

Clinical Neuropsychology Fellowship Supplemental Brochure *2020-2021*

**Veterans Affairs Portland Health Care
System** **Portland, Oregon**



U.S. Department
of Veterans Affairs

Affiliated with Oregon Health & Science University



**Neuropsychology Postdoctoral Residency
VA Portland Health Care System**

in affiliation with Oregon Health & Science University (OHSU)

3710 SW US Veterans Hospital Road, P3MHN

Portland, Oregon 97239

(503) 220-8262

<http://www.portland.va.gov>

Application Due Date: December 13, 2019

Accreditation Status

In July 2016, our postdoctoral fellowship program was accredited until 2023 by the American Psychological Association as a postdoctoral residency in clinical psychology. We have also received specialty accreditation, on contingency, from the American Psychological Association in Clinical Neuropsychology until 2023. For questions about our accreditation status please contact:

*American Psychological Association
Office of Program Consultation and Accreditation
750 First Street, NE • Washington, DC • 20002-4242
Phone: 202-336-5979 • TDD/TTY: 202-336-6123
Fax: 202-336-5978 • Email: apaaccred@apa.org
<http://www.apa.org/ed/accreditation/>

Application & Selection Procedures

The VAPORHCS Postdoctoral Residency in Neuropsychology begins August 17, 2020. It is a full-time program for two years with a salary of \$48,693 (Year 1) and \$51,605 (Year 2), with benefits. Applicants must be U.S. citizens who are candidates in (or have completed) an APA-accredited doctoral program in clinical or counseling psychology. They must have completed an APA approved internship program and earned their Ph.D. or Psy.D. prior to the start of the residency. Successful candidates typically have substantial academic and clinical experience in neuropsychology, with preference for candidates who have completed internships satisfying Houston Conference requirements in neuropsychology. While our program is organized to provide two years of postdoctoral training, advancement to the second year is contingent on successful completion of first year requirements.

The following materials are required to submit an application:

1. A letter of interest (identifying the desired fellowship, a brief summary of your interests and qualifications for this specialty training, why you are interested in this position, and aspirations for your psychology career).
2. Curriculum Vitae (including a brief description of your internship rotations).
3. Three letters of recommendation (at least one from an internship supervisor).
4. A separate, brief memo from your graduate program Training Director or Dissertation Chair stating with certainty that you will complete all graduation requirements, **including the dissertation**, by the start date of the Fellowship (please do not embed this within a letter of recommendation).
5. Official graduate school transcripts
6. Two sample neuropsychological reports.

We will use the APPA CAS system for application in the fall of 2019.

<https://appicpostdoc.liasoncas.com/applicant-ux/#/login>

Please feel free to contact Dr. Jason Steward, Director of Postdoctoral Training, Psychology (e-mail: Jason.steward@va.gov; phone: 503-220-8262, ext. 51120) with any questions.

Note: VA interns and fellows are subject to all employment rules applying to federal employees.

We do not require in-person interviews and will be available to interview applicants by phone (January/February 2019, dates TBD). No interviews will be held at the Annual International Neuropsychological Society Conference. Candidates interested in an on-site visit may do so upon request; however, to remain unbiased in the interview process the applicant will still be interviewed by phone. We will rank order applicants based on their application materials and interview. Our positions are not offered through the APPCN Match program.

VAPORHCS plans to comply with APPIC recommended recruitment guidelines for the 2020-2021 recruitment cycle. As such, all of our programs are also advertised on the Universal Psychology Postdoctoral Directory (which can be found at: <http://www.appic.org/About-APPIC/Universal-Psychology-Postdoctoral-Directory>). Additionally, per APPIC Postdoctoral Selection Guidelines, we will comply with the Uniform Notification Date (UND) of February 26, 2018 to make offers to candidates. For more information regarding selection guidelines, please visit: <http://www.appic.org/About-APPIC/Postdoctoral/APPIC-Postdoctoral-Selection-Guidelines>.

Psychology Setting

VAPORHCS's Clinical Psychology Fellowship Program is supported at the national and local level by explicit training missions. The Department of Veterans Affairs' (DVA's) mission is to fulfill President Lincoln's promise – "To care for him who shall have borne the battle, and for his widow, and his orphan" – by serving and honoring the men and women who are America's Veterans. As part of that mission, the Veterans Health Administration (VHA) provides primary care, specialty care, extended care, and related social services in the context of an integrated health care delivery system aimed at improving the health of the Veteran population. For 70 years, VA has demonstrated an ongoing commitment to training and to the development of academic affiliations for: 1) training and retaining high quality VA health care providers, 2) improving Veteran health care, and 3) promoting an environment of scientific inquiry. The VA is legislatively mandated to support the training of healthcare professionals, such as psychologists, for its system and the nation. VAPORHCS is housed within the system network that serves the states of Washington, Oregon, Alaska, and Idaho (Veterans Integrated Service Network (VISN) 20).

VAPORHCS is a 277-bed facility serving more than 85,000 unique Veterans and 880,000 outpatient veterans visits each year in Oregon and Southwest Washington. VAPORHCS consists of the main tertiary care medical center overlooking the city of Portland, Oregon, the Vancouver Campus in Vancouver, Washington, and ten outpatient clinics across Central and Northwest Oregon. VAPORHCS provides a full continuum of inpatient, outpatient, long-term, and emergent care. VAPORHCS is proud to host 12 national-level Centers of Excellence leading research efforts from mental illness to Parkinson's, epilepsy, auditory research, and others. VAPORHCS is a designated teaching facility connected to Oregon Health & Science University (OHSU) both physically and through partnerships in shared research endeavors, the training of healthcare professionals, and the use of shared staff including scientists, clinician-educators, and clinician-researchers.

The Portland campus houses numerous in-patient and out-patient medical and specialty clinics, a primary care clinic, a mental health clinic, a rural telemental health clinic, a neuropsychology clinic, and an intensive case management and outpatient recovery program for adults with serious and chronic mental illness. The spacious Vancouver campus is located just a few miles away from the Portland campus, across the Columbia River. The Vancouver campus houses long-term rehabilitation programs, a skilled nursing facility, a substance abuse treatment program, a posttraumatic stress disorder (PTSD) clinic, a post-deployment clinic, and primary care. In addition to our main facility in Portland and our Vancouver Campus, we offer services in ten community based outpatient clinics (CBOC). These clinics are located in Bend, East Portland, Hillsboro, North Coast (Camp Rilea), Newport, Lincoln City, Salem, The Dalles, West Linn, and a Community Resource and Referral Center (CRRC) in downtown Portland.

88,124 veterans received services at VAPORHCS in Fiscal Year 2015. The mental health division served 18,110 (21%). The demographics for the veterans served in the mental health division are as follows: The entire adult age span is represented (range 18-101 years). Gender distribution is 87% male and 13% female. Identified ethnicities are 82% White, 5% Black/African American, 3% Asian or Pacific Islander, 2% American Indian or Alaska Native, and 1% Hispanic. Serving veterans, we also consider diversity in era of service: Vietnam Era (1961-1975) 37%; Persian Gulf War (1990-present) 42%, Post-Vietnam (1975-1990) 16%; Korean (1950-1955) 2%; Post-Korean (1955-1961) 1%. Veterans with service-connected conditions (disabilities or health conditions acquired during military service) are more than half the population (55%). Our veterans have a vast array of mental health diagnoses with the most common being

Depressive Disorder (46%), PTSD (42%), any active Substance Use Disorder (18%), and Dysthymic Disorder (8%).

Training Model and Program Philosophy

Operating within the VAPORHCS Clinical Psychology Fellowship program, the Neuropsychology Fellowship's training philosophy remains consistent with the VAPORHCS Psychology's broader clinical training program philosophy by reflecting deeply held principles of respect for individual differences, supportive training towards professional growth and transition to an autonomous psychology career, emphasis on science informing psychological practice and vice versa, and ethical practice and decision-making. We view postdoctoral training as an opportunity to consolidate and advance skills established during internship, while increasing autonomy across the training years to allow our graduates to feel fully prepared to enter an independent psychology career at the end of training. Clinical supervision within the program reflects the advanced skills of the postdoctoral trainee by eliciting the Fellow's case conceptualization and plan at the outset, and offering reflective supervision to assist the Fellow in making clinical decisions.

In service of our postdoctoral training program's broader clinical training philosophy, our Neuropsychology Fellowship adheres to the scientist-practitioner model of training in preparing Fellows for advanced practice in clinical neuropsychology. We particularly emphasize the integration of science and practice throughout training. Consistent with the prevailing professional standards in clinical neuropsychology we provide two years of advanced training in clinical neuropsychology with the goal of producing fully competent independent practitioners in this specialty area. The VAPORHCS Neuropsychology Postdoctoral Fellowship is structured to provide advanced clinical, didactic and research experiences over the course of a two-year, full-time residency. The Fellowship is designed to progressively build upon previously developed competencies through participation in increasingly more advanced specialty training by providing developmentally appropriate training experiences fostering greater autonomy and responsibility as well as increased participation in research activities consistent with the training goals of the fellow. Specialty training experiences serve to expand knowledge of brain-behavior relationships, cultivate expertise in the evaluation and treatment of neurobehavioral disorders, and enhance professional development through increasing involvement in direct supervision of pre-doctoral trainees, leadership roles in neuropsychological and neurobehavioral clinics, and expert consultation within the multi-disciplinary treatment teams.

At the start of training, residents are assigned a primary clinical training supervisor and select a research mentor and complete a pre-residency evaluation that relies substantially on direct observation and is designed to assess general neuropsychological skills. This evaluation identifies the fellow's prior relevant experiences, strengths and weaknesses, and training and career goals. Information from this evaluation is used to guide development of a formal individualized training plan outlining training objectives, required activities, and caseload guidelines. The primary clinical training supervisor is responsible for coordinating the fellow's overall training experiences, and works closely with other supervisors, research mentors and teaching faculty to facilitate and assess the fellow's progress in achieving advanced neuropsychological competencies. At the midpoint and completion of each residency year, written evaluations of the fellow's progress in achieving rotation-specific training objectives are provided by supervisors. The fellow and program supervisor review these evaluations with systematic assessment of the extent to which individualized competencies are being attained.

Adjustments to the training plan to accommodate greater or less than expected advancement may be made throughout the year.

Emphasis and Purpose

The VAPORHCS Clinical Neuropsychology Training Program provides high-quality advanced training in the practice of clinical neuropsychology. Compromise of brain and central nervous system functioning can result in extensive distressing changes in the quality of life of Veterans and their families, and clinical science indicates that providing care for Veterans and their families experiencing these distressing life changes requires comprehensive specialized training in clinical and cognitive psychology, neuroanatomy and neurophysiology, behavioral neurology, and cognitive rehabilitation and other neuropsychological interventions. We believe that particularly within clinical neuropsychology, adherence to the scientist-practitioner model is crucial for competent practice and rapid incorporation of new knowledge into clinical practice. Our program comprises clinical, didactic, and research experiences leveraging the extensive resources available at VAPORHCS and its affiliated university Oregon Health & Sciences University (OHSU). Our overall goal is to produce highly trained, scientifically knowledgeable, clinically skilled independent practitioners who will be competent to work as advanced clinical neuropsychologists.

Teaching Methods

Training experiences build on skills learned in pre-doctoral training and are assessed at the beginning of the residency. Clinical and educational experiences are graded in complexity with progression from basic to more complex experiences requiring advanced skills, and from close supervision to greater autonomy. There is an emphasis on assigning residents a wide variety of patients with different cultural, racial backgrounds and clinical needs, and familiarizing them with the range of neuropsychological assessment and interventions.

Fellows receive a minimum of four hours of supervision, including one hour of group and three hours of individual supervision, in addition to monthly meetings with a research mentor. In-vivo observation, role modeling, and post-session review of neuropsychological evaluation sessions, as well as joint participation in teaching clinics are among the supervision models employed. In addition, every four months' meetings are scheduled between all program faculty and neuropsychology trainees (residents and interns), which serve both as further opportunity for supervision and teaching, as well as for on-going evaluation and modification of the program. Finally, formal required and optional didactics including individual lectures and seminars, case conferences, journal clubs, and grand rounds at the VAPORHCS and OHSU occur throughout the training year.

Ethics, Multiculturalism, and Diversity

Our faculty are an ethically principled, diverse collection of colleagues who welcome growth in our understanding of diverse populations within and around our professional network. We recognize that cultural competence is an ongoing process. We strive to create and sustain an environment that consistently conveys cultural sensitivity, cultural humility, and honors intersecting identities and diverse worldviews. We recognize that this requires an ongoing commitment to evaluation and feedback to develop a welcoming environment for all employees and trainees, to model this welcoming culture for others throughout the Portland VA, and to increase diversity in our richly varied community as we grow. Fellows are expected to demonstrate competence in working with culturally and individually diverse clients. Didactic Seminars provide an opportunity to improve Fellows' cultural competence as well as foster a workplace that appreciates diversity. Each Fellow also presents one

Seminar during the year on a self-directed topic concerning diversity or ethical/legal issues.

Program Competencies

Upon completion of the program, each fellow will be able to demonstrate advanced competency in the following 11 competency areas:

1. Integration of Science and Practice
2. Neuropsychological Assessment
3. Neuropsychological Interventions
4. Supervision
5. Consultation and Interdisciplinary Skills
6. Research
7. Ethical and Legal Standards
8. Individual and Cultural Diversity
9. Professional Values and Attitudes
10. Communication and Interpersonal Skills
11. Specialized Neuropsychology Practice Competencies

Program Structure

Year One:

A. 80% Clinical

1. Core Experience (60%)
 - a. 50% (10-12 patient/family contact hours per week) VAPORHCS Neuropsychology Clinic; in the second six months of the fellowship, contact hours will increase to 12-15 hours per week).
 - b. 10% (four contact hours per week) VAPORHCS Neuropsychological Rehabilitation Clinic.
2. Rotation Experiences (20%)
 - a. Beginning in the second half of the first year: six months, 20% time (five contact hours per week) in the VAPORHCS Neurology Service.
 - b. In the first six months of the fellowship, the Fellow will spend significantly more time in the Neuropsychology Clinic conducting outpatient neuropsychological assessments and neuropsychological rehabilitation. Upon entering the second half of the first year, consistent with the developmental model of our training program, the fellow will begin their rotation with VAPORHCS Neurology Service (e.g., dementia/geriatric assessment, stroke, general neurology, multiple sclerosis, or epilepsy clinics).

B. 20% Didactic/Education/Research

1. Required didactics, including seminars, grand rounds, and clinical case presentations.
2. Each fellow must identify a research mentor. This may be a member of the VAPORHCS Neuropsychology faculty or an M.D. or Ph.D. researcher outside of Neuropsychology.
3. Each fellow will be expected to spend at least four hours a week engaged in some scholarly activity. This may include participation in on-going research of a faculty member, preparation of a literature review, or development of an independent

research project. Each project will be expected to have a product suitable for presentation at a scientific meeting or submission to a journal.

Year Two:

- A. 70% Clinical
 - 1. Core Experience (60%)
 - a. 40% (8-10 patient/family contact hours per week) VAPORHCS Neuropsychology Clinic.
 - b. 20% (eight contact hours) VAPORHCS Neuropsychological Rehabilitation Clinic.
 - 2. Rotation Experience (10%, four contact hours per week)
 - a. Choice of rotations for six months, 20% time (five contact hours) in the VAPORHCS Neurology Service (e.g., dementia/geriatric assessment, stroke, general neurology, multiple sclerosis, or epilepsy clinics).

- B. 30% Research/Didactic/Education
 - 1. Each fellow will have one full day (eight hours per week) protected research time contingent on demonstration of productivity during their first year. Similar to the first year, scholarly activities may include participation in on-going research of a faculty member, preparation of a literature review, or development of an independent research project.
 - 2. Four hours per week of required didactics including seminars, grand rounds, and clinical case presentations.

Evaluation

Following initial assessment, residents are assessed on core competencies at 6-month intervals to ensure that they are developing at the appropriate rate. We also solicit regular appraisals from our residents of the quality of the training provided by rotations and program supervisors. Program and fellow effectiveness are regularly monitored at monthly VAPORHCS Psychology Training Committee meetings. Semi-annual joint fellow/faculty lunch meetings provide a forum for residents to participate in program evaluation and development. Research and case conference presentations also provide the opportunity for the entire faculty to assess competence and progress of individual residents. We host an annual faculty retreat to review the previous year's curriculum, as well as the overall effectiveness of the program. More distal measures of program effectiveness involve assessment of our graduates' success in securing employment that requires competencies in the areas of neuropsychology in which we train.

Training Experiences

Clinical Training

Portland Outpatient Neuropsychology Clinic: The Outpatient Neuropsychology Clinic receives consults from all Health Care System services and all VA facilities in Oregon and SW Washington, most prominently from Neurology, Polytrauma, Mental Health, and Primary Care. Many Veterans present with complicated diagnostic pictures, and with comorbid neurologic, psychiatric, medical and substance abuse problems. Common neurologic illnesses seen within this clinic include Dementia of the Alzheimer's Type (DAT), Vascular Dementia, Alcohol Dementia, Parkinson's Disease, focal stroke, and Multiple Sclerosis. We also receive many consults for a young cohort of patients who experienced Traumatic Brain Injury (TBI) while serving in recent conflicts abroad. Patients experiencing cognitive deficits secondary to psychiatric disorders (e.g. depression, post-traumatic stress disorder, schizophrenia) are also frequently referred. Clinical services include comprehensive neuropsychological evaluations, neurocognitive screenings, neuropsychological interventions, and detailed feedback to patients, family, and referral sources.

Outpatient Neuropsychological Rehabilitation Clinic: The Outpatient Neuropsychological Rehabilitation Clinic receives a steady flow of consultation referrals from several disciplines, most prominently Neuropsychology, Neurology, Mental Health, Primary Care, Polytrauma, and Caregiver Support. Treatments consist of group and individual modalities aimed at increasing awareness of cognitive problems, providing psychoeducation, optimizing independence, real-world problem solving, and stress management. Efforts are made to integrate treatments with efforts of other involved health care providers, community/work leaders, and families.

Neurology Service at VAPORHCS: The VAPORHCS Neurology Service provides a full range of inpatient and outpatient neurological evaluation and treatment services to Veterans. Neurology subspecialty areas include the dementia/geriatric assessment, stroke, neuromuscular, seizure (including non-epileptic), movement disorders, multiple sclerosis, and ALS clinics. Neuropsychology fellows are integrated into the neurology subspecialty clinics where they provide brief assessment, consultation, and intervention services.

Research

The VAPORHCS has a long tradition of research in neuropsychology and the neurosciences. A major portion of this work is conducted on the Portland and OHSU campuses, and involves collaboration between neurologists, clinical and experimental psychologists, and other neuroscientists at the VA and OHSU. Because of our history of multi-site clinical outcome studies, our investigators also have long-standing collaborative relationships with VA and non-VA investigators across the U.S. including Seattle, San Diego, Boise, Iowa City, and Atlanta. Investigators and students from all sites are actively engaged in research on the Portland campus, and have ongoing contact with frontline clinicians through joint training and educational experiences. Gains in knowledge from this work have direct bearing on the development of more effective methods of treatment for Veterans with neurobehavioral disorders. The close collaboration between clinicians and researchers on the Portland campus has provided an extraordinary opportunity for developing and evaluating innovative new treatment and diagnostic programs, and has created an exciting and fertile training ground for postdoctoral residents.

Residents will be encouraged to present their research work within our group and to submit their work

to national meetings such as the International Neuropsychological Society, the National Academy of Neuropsychology, Society for Neuroscience, and the Cognitive Neuroscience Society. They will also be encouraged to participate in professional societies to keep their knowledge of our field up-to-date. This is a full-time post-doctoral residency, and it is expected that residents will spend at least 40 hours weekly in clinical, didactic, and research activities.

Didactics

Residents will be required to participate in a range of scheduled didactics offered at VAPORHCS and Oregon Health Sciences University (OHSU). Didactics will be primarily provided by VA Neuropsychology, Clinical Psychology, and Research Psychology faculty, and will periodically include faculty from other related disciplines, such as Neurology, Psychiatry, and Speech Pathology. Residents will steadily increase their involvement in didactics; initially with attendance, and gradually assuming more active roles as junior faculty, providing presentations to staff and other trainees, leading case presentation activities, and leading journal club discussions. Core didactic experiences will be required and will maintain regular schedules, while other activities will be dependent on more variable factors, such as the fellow's particular interests in Neuropsychology, current status of the various faculty members' research, opportunities to engage with other related disciplines, and the schedule of OHSU activities. Core didactic experiences will maintain the following schedule:

Neuropsychology Case Presentations

This bi-weekly, one-hour series involves clinical case presentations by Neuropsychology faculty, residents, interns, and practicum students. Cases are selected by the presenting clinician based on such issues as the clinical uniqueness of the case, clinical, ethical, and cultural diversity issues encountered in the case, and assistance with case conceptualization and, or treatment recommendations.

Alternating Mondays, 8-9 a.m.

Neuropsychology Journal Club

This bi-weekly, one-hour series, involves presentations by Neuropsychology faculty, fellows, interns, and practicum students of journal articles, followed by a discussion led by the presenter. Articles are selected by the presenter but not predetermined (i.e., tailored around the resident's specific training interests and needs upon discussion) and may include a wide range of topics relevant to Neuropsychology.

Alternating Mondays, 3-4 p.m.

Neuropsychology Seminar Series

This bi-monthly, 90-minutes series, involves presentations by Neuropsychology faculty and fellows on topics relevant to Neuropsychology. The series will follow a rotating schedule of 12 topics, over a two-year period, to correspond with the fellow's training time. Seminar topics are selected based on their relevance to recommendations of organizations, such as the American Psychological Association (APA) Division 40, American Academy of Clinical Neuropsychology (AACN), and American Board of Neuropsychology (ABN), for achieving specialized training and board certification in Clinical Neuropsychology. Examples of topics, each of which will involve multiple seminars, include: Neuroanatomy, Neurological Disorders, Assessment, Psychometrics, Ethics, and Cultural Diversity.

First Monday, bi-monthly, 2:30-4 p.m.

VA Psychology Postdoctoral Fellow Didactic Series

This bi-weekly, 80-minute series provides an opportunity for VA Psychology postdoctoral residents of all disciplines (i.e., Health Psychology, Palliative Care, PCMHI, MIRECC) to attend a series of didactics addressing a broad range of issues relevant to Clinical Psychology, including practice, research, ethics, and diversity. While most of the presentations in this series are offered by staff, all residents are required to provide a presentation of their own, related to a topic of their choice.

Alternating Wednesdays, 1:00-2:20 p.m.

In addition to the required core didactics, residents will also be expected to select from a range of didactic opportunities available at both VAPORHCS and OHSU. Residents will be expected to attend at least four-hours of these additional activities monthly. Optional didactics include, but are not limited, to the following activities:

- OHSU Neuropsychology Case Share
- OHSU Neurology Grand Rounds
- OHSU Psychiatry Grand Rounds
- OHSU Neurology Noon Conference
- VAPORHCS MIRECC Presentations
- VAPORHCS Movement Disorders Clinic Journal Club
- VAPORHCS Movement Disorders Clinic Didactics
- OHSU Brain Cuttings

Requirements for Completion

Fellow and supervisors develop a formal individualized training plan outlining training objectives, required activities, and caseload guidelines. Written evaluations of the fellow's progress in achieving rotation-specific training objectives is provided by supervisors every six months. The fellow and program supervisor review these evaluations with systematic assessment of the extent to which individualized competencies are being met. Adjustments to the training plan to accommodate greater or less than expected advancement may be made throughout the year.

Facilities and Training Resources

The Fellow uses a shared office within the neuropsychology clinic for administrative and clinical purposes. While the Fellow has priority in the office, it is frequently checked out by other neuropsychology staff and trainees when available. The office is equipped with state-of-the-art computing services that support clinical, educational and research needs. The Fellow has a computer equipped with a remote camera to support clinical work in Telemental Health and they may obtain credentialing in this service on an elective basis. Computers offer access to the hospital medical records, and the Fellow will be expected to enter all progress notes and consultation requests electronically. The Fellow is provided with sufficient phone and computer privileges to facilitate easy access to patients' electronic medical records, the request of remote records for patients treated at VAPORHCS, and consultation with outside providers. In addition, most clinical, educational, and research

settings are equipped with a conference room (many equipped for video teleconferencing) and other appropriate meeting space. At the beginning of the program, Fellows receive a VA email address for their professional use. Other word processing, database, slide preparation, statistical software, and web-based medical and psychological databases are readily available for their use. In all research and clinical settings to which they are assigned, equipment to assist with printing, photocopying, and scanning is available; regular office and government mailing supplies are provided at no charge, and specialty equipment (e.g., poster printer) is available for their use.

Administrative Policies and Procedures

Due Process Policy and Procedure

The program's policies and procedures for addressing the described scenarios are discussed in the Clinical Psychology Fellowship Memorandum on our website (<https://www.portland.va.gov/cptp.asp>), particularly sections: I Evaluation of Residents; XII Requesting an Alternative Supervisor; XIII Due Process for Fellow Grievances; XIV Policies and Procedures for Fellow Suspension or Dismissal – which includes newly written policies for developing and implementing a remediation plan; and XV Due Process for Fellow Discipline or Termination of a Contract. These policies are verbally reviewed as well during the Orientation and during initial sessions with individual supervisors.

Regarding Fellow grievances, it is expected that Fellows will attempt first to resolve difficulties directly and informally with the subject of their complaint prior to filing a grievance complaint. However, we recognize that a formal procedure may at times constitute the best option. At any time during the training year a formal grievance may be submitted. This grievance will be presented in writing to the Director of Training. If the Director or any member of the Training Committee is part of the grievance, that person will not be part of the vote on the resolution.

The Psychology Service, in coordination with the Office of Academic Affiliations (OAA) reserves the right to terminate the Fellow's contract and/or deny provision of a certificate of Residency completion to any Fellow who does not remediate deficiencies in clinical skills or who does not conduct him/herself in a manner consistent with the ethical standards of the American Psychological Association or who is convicted of a felony prior to or during the training year. The right to terminate extends to any behavior that raises concern for the welfare of patients, staff, or the public at large. A Fellow whose adequacy is questioned has the right to request a hearing, to be represented by counsel of his/her choice at such a hearing, the right to present evidence pertinent to the issue, and the right to examine opposing witnesses. This hearing will be conducted by the Psychology Training Committee. The Committee's report will be issued by the Training Director or an individual appointed by the Training Director.

Fellows receive, at least semi-annually, systematic written feedback on the extent to which they are meeting these performance requirements and expectations. Feedback should address the Fellows' performance and progress in terms of professional conduct and psychological knowledge, skills and competencies in the areas of psychological assessment, intervention and consultation, and should include:

- a) An initial written evaluation provided early enough in the program to serve as the basis for self-correction (if needed);

- b) A second written evaluation which occurs early enough to provide time for continued correction (if needed) or development;
- c) Discussions and signing of each evaluation by the Fellow and the supervisor.

Privacy Policy

All applicant and trainee information is treated as confidential and stored securely with access limited to training program staff. We collect no personal information about potential applicants when they visit our Website.

Policy on Psychology Trainee Self Disclosure

Consistent with the Ethical Code of the American Psychological Association, psychology trainees in the VA Portland Health Care System are generally not required to self-disclose sensitive topics (e.g. sexual history, history of abuse and neglect, psychological treatment or conditions, and relationships with parents/family members, peers, and spouses or significant others) during application to the program or during training. The only exception is in situations in which a trainee's personal problems or condition could reasonably be judged to put patient care, the trainee, or clinical and educational operations at risk. This policy is designed to balance the importance of trust and personal privacy in the supervisory relationship with the supervisor's responsibility for care of the patient and for the safety of all staff members and trainees. In cases when self-disclosure of personal information is necessary, the required disclosure is limited to circumscribed information related to managing the specific clinical, safety, or patient care concern.

Training Staff

Clinical Faculty

Marilyn Huckans, Ph.D.

Director of Training for Psychology

Staff Neuropsychologist, VAPORHCS

Associate Professor, Department of Psychiatry, Oregon Health & Science University

Jason C. Steward, Ph.D.

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Local Information

Portland, Oregon is in the Pacific Northwest.

For more information, please visit:

<https://www.portlandoregon.gov>

<https://www.travelportland.com>