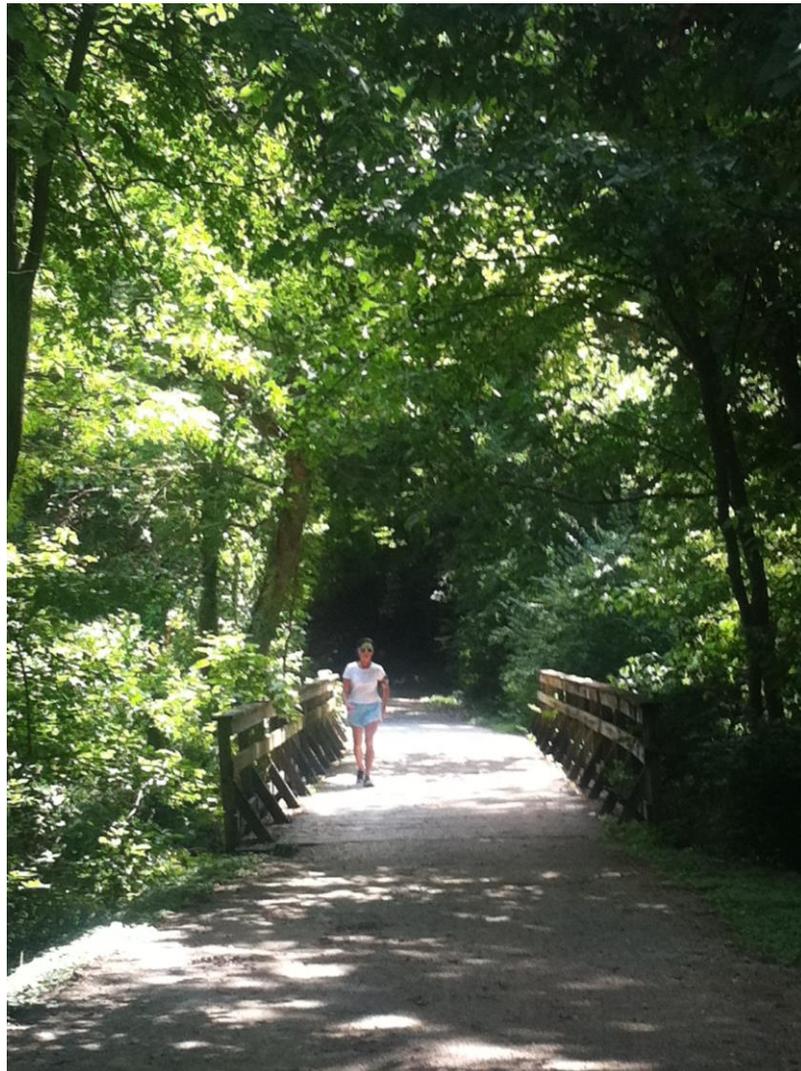




Truman VA Medical Center Psychology Postdoctoral Fellowship 2016-2017 Training Year



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2016-2017 Training Year**

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Postdoctoral Fellowship Brochure

Table of Contents

Introduction and Welcome!	5
Fellowship Overview	
Training Model.....	6
Training Goals and Objectives.....	6
Organization of Fellowship	
Clinical Training.....	10
General Clinical Experiences.....	11
TBI/PTSD Emphasis Clinical Experience.....	11
Geropsychology Emphasis Clinical Experience.....	13
Research Training	
TBI/PTSD Emphasis Research Opportunities.....	16
Geropsychology Emphasis Research Opportunities.....	17
Professional Development and Education	
Postdoctoral Professional Issues Didactic.....	18
Clinically Focused Diversity Workshops.....	18
Psychology Grand Rounds.....	19
VA Psychology Journal Club.....	19
Elective Didactic Experiences.....	19
Other Educational Experiences.....	19
Administrative Policies and Procedures	
Hours, Stipend, and Benefits.....	20
Time Breakout of Weekly Activities.....	20
Statement of Nondiscrimination.....	21
Requirements for Completion.....	21
Review and Remediation Procedures	
Evaluation Methods.....	21
Due Process Policy.....	22
Training Environment	22
Living Environment	23
APA Accreditation Status	26

Postdoctoral Fellowship Brochure

Table of Contents (Continued)

Application and Selections Procedures	
Eligibility for Application.....	27
Selection Process.....	27
Requirements for Application Submission.....	27
TRUMAN VA Fellowship Core Training	
Faculty	29
TRUMAN VA Psychology	
Faculty	31
Postdoctoral Fellowship "Research Mentor" Faculty	33
Trainees	37

Fellowship Training Brochure

2016 - 2017 Edition

Introduction

Welcome to our Fellowship Program!

The Truman VA Psychology Postdoctoral Fellowship Program values and welcomes the unique individual differences each Fellow brings to the program. There is an atmosphere of collegiality, and an attitude that what we learn from each other enriches and strengthens us all.

The structure of the Truman VA Psychology Postdoctoral Fellowship Program follows the format of the substantive traditional practice area of Clinical Psychology, as defined by APA's Policy Statements and Implementing Regulations.

Within the Clinical Psychology Training Program, we offer training in two areas of emphasis:

1. Assessment and Treatment of Veterans with Traumatic Brain Injury (TBI) and Post Traumatic Stress Disorder (PTSD)
2. Geropsychology Assessment and Treatment

During the 2016-2017 training year, the Truman VA Psychology Postdoctoral Fellowship Program will provide training for three full-time Fellows in the traditional practice of Clinical Psychology

We look forward to your application for admission!

Fellowship Overview

Model of Training

The Postdoctoral Fellowship Training Program is committed to the **scientist-practitioner** model. It is the reciprocal process of empirically supported treatments informing clinical care and clinical observation informing clinical research that is essential to maintaining the vitality of psychology as a science and as a profession in the changing health care environment. The diversity of our patient populations requires that we have the skills, not only to adapt treatments to meet patient's unique clinical needs, but to demonstrate the effectiveness of those outcomes empirically. Our staff models the scientist-practitioner approach from the perspectives of training in evidenced based treatments, program outcome evaluation, and clinical research.

Training Goals and Objectives

The overarching goal of the Truman VA Psychology Postdoctoral Fellowship Training program is to provide a comprehensive, integrated and flexible learning experience that produces independently functioning, competent, ethical, multi-culturally aware clinical psychologists, with advanced levels of training to make them competitive for entry level clinical and academic positions. To this end, there are six goals, designed to encompass the American Psychological Association's guideline for the six general competency areas to be addressed during Fellowship training.

Within the traditional practice area of Clinical Psychology, the TRUMAN VA Psychology Postdoctoral Fellowship offers two areas of emphasis:

- 1). Assessment and Treatment of Veterans with Traumatic Brain Injury (TBI) and Post Traumatic Stress Disorder (PTSD); and
- 2). Professional Geropsychology and Rural Mental Health Practice

Both areas of emphasis share the same six competency goals, which cover those outlined by APA, listed below. Each area has additional objectives within those goals to reflect advanced skills in the chosen areas of emphasis.

APA Competency Goals:

- (a) *theories and effective methods of psychological assessment, diagnosis and interventions;*
- (b) *consultation, program evaluation, supervision and/or teaching;*
- (c) *strategies of scholarly inquiry;*
- (d) *organization, management and administration issues pertinent to psychological service delivery and practice, training, and research;*

- (e) *professional conduct; ethics and law; and other standards for providers of psychological services;*
- (f) *issues of cultural and individual diversity that are relevant to all of the above.*

Goal #1: Expertise. Fellowship training provides the knowledge, skills and experiences necessary to become an authority in clinical psychology as well as in the chosen area of emphasis.

General (includes all Fellows) Objectives for Goal #1:

- Fellows demonstrate advanced knowledge of diagnostic interviewing skills, including differential diagnosis, using the DSM-5; appropriately selects and interprets psychological tests, and integrates behavioral observations, historical data medical records and other non-test based information.
- Fellows demonstrate advanced psychotherapy skills in at least two areas of EBT. Opportunities include: Cognitive Behavior Therapy (CBT), Cognitive Processing Therapy (CPT), Prolonged Exposure Therapy (PE); Acceptance and Commitment Therapy (ACT), Dialectical Behavioral Therapy (DBT); and Social Skills Training.
- Fellows demonstrate skills in establishing and maintaining a therapeutic alliance with complex patients, recognizing and responding appropriately to patient crises, while maintaining therapeutic boundaries

Emphasis Area Specific (TBI/ PTSD area Fellow) Objectives for Goal #1:

- Fellow proficiently administers and interprets the CAPS, PCL-M, and Trauma Exposure Scale and writes integrated reports, with test data, for use by the treatment team and other medical professionals
- Fellow proficiently selects and interprets appropriate neuropsychological testing and other psychological testing to evaluate patterns of cognitive deficits in general, including those consistent with the presence of TBI and the potential cognitive effects of PTSD, and writes integrated reports.
- Fellow demonstrates proficiency in implementing "best practices" (Holistic Rehabilitation) in Multi-disciplinary group format with Speech Pathology and Occupational Therapy

Emphasis Area Specific (Geropsychology area Fellow) Objective(s) for Goal

#1: Fellow proficiently administers and interprets cognitive screening measures (e.g., MoCA, SLUMS), as well as psychiatric symptom and functional measures appropriate for older adults and their caregivers (e.g. GDS, GAS, Cornell Scale, FAST, Zarit Caregiving Burden Inventory)

Fellow demonstrates proficiency in semi-structured and open interviewing techniques with older adults, including assessment of decisional capacity and interviewing of collateral sources

Fellow proficiently administers and interprets neuropsychological assessment batteries to evaluate for major/minor neurocognitive disorders (NCD) in older adults, and is familiar with differential diagnosis of various progressive NCD syndromes (e.g., Alzheimer's disease, vascular NCD, Lewy body)

Fellow demonstrates proficiency in selection and delivery of evidence-based interventions for older adults, family caregivers, and persons with life-limiting illness (e.g. interpersonal therapy for depression (IPT), REACH-VA caregiving skills training, health-psychology EBPs including CBT-Insomnia and CBT-Chronic Pain) Fellow demonstrates expertise in functioning of interdisciplinary treatment teams, and ability to offer consultation and training to improve team functioning.

Emphasis Area Specific Competencies Expected:

- Expertise in neuropsychological assessment (**TBI/PTSD area Fellow**)
- Expertise in cognitive and psychological assessment of geriatric patients, and their caregivers and appropriate interventions with geriatric patients, caregivers and treatment team members (**Geropsychological area Fellow**)

Goal 2: Teaching and Supervision. General (includes all Fellows)

Objectives for Goal #2:

- Fellows will provide at least 1 lecture for the internship didactic series.
- Fellows will present/organize one 4 hour workshop on a chosen aspect of diversity, to be offered campus wide for Continuing Education credits for psychologists.
- Fellows will participate in Postdoctoral Didactics, which focuses on the competencies of supervision and the challenges of ethics.
- Fellows will supervise a practicum student in clinical assessment, group or individual therapy, or clinical research, as available

General (includes all Fellows) Competencies Expected:

- Independent organization of didactic seminars to disseminate advanced clinical knowledge.
- Integrates "best practices of supervision" in supervision of practicum students.

Goal 3: Professionalism. General (includes all Fellows) Objectives for Goal #3:

- Fellows consolidate their sense of professional identify, demonstrate awareness of professional issues and independently prepare for/complete state licensing process for autonomous functioning upon completion of Fellowship.
- Fellows demonstrate effective working relationships (e.g. Treatment Teams, peers, supervisors) across settings and seek consultation independently at level appropriate for junior faculty.
- Fellows take initiative in ensuring that key clinical tasks are completed and maintain timely records that consistently include essential information involving patient care.
- Fellows demonstrate independent, effective time management skills regarding appointments, meetings, and leave requests.
- Fellows appropriately seek supervision, at the level of a junior faculty member, and use it appropriately

General (includes all Fellows) Competencies Expected:

- Professional autonomy.
- Professional interpersonal functioning across settings.
- Professional documentation.
- Professional time management.
- Professional provision of Supervision.

Goal 4: Scientific Inquiry. General (includes all Fellows) Objectives for Goal #4:

- Fellows participate in additional learning experiences designed to develop specific competencies in scientific inquiry (Journal Club; Research Mentor Program).
- Fellows demonstrate a conceptual approach consistent with the scientist-practitioner model, wherein empirically informed knowledge informs psychological assessments and interventions, and questions arising from clinical practice drive clinical research and program evaluation.
- Fellows participate in clinical research or program evaluation project in the respective areas of emphasis.

General (includes all Fellows) Competencies Expected:

- Independent pursuit of scientific learning experiences.
- Scientist-practitioner model orientation.
- Participation in clinical research or program evaluation.

Goal 5: Cultural Competence. General (includes all Fellows) Objectives for Goal #5:

- a. Fellows will participate in activities to increase knowledge regarding issues of individual and cultural diversity.
- b. Fellows will demonstrate awareness of cultural competence issues in assessment and therapeutic intervention.
- c. Fellows will demonstrate initiative in the dissemination of cultural competence through teaching or participating in diversity related program development.

General (includes all Fellows) Competencies Expected:

- a. Autonomous pursuit of knowledge regarding individual and cultural diversity.
- b. Spontaneous demonstration of integration of knowledge of individual and cultural diversity and application of this knowledge to assessment and therapeutic interventions.
- c. Competence in dissemination of cultural competence through teaching or participating in diversity related program development.

Goal 6: Ethical Standards Integration: General (includes all Fellows) Objectives for Goal # 6:

- Fellows will demonstrate a working knowledge of APA's Ethical Guidelines

for Psychologists and state law and integrate this with patient care, seeking consultation as appropriate.

General (includes all fellows) Competencies Expected:

- Integration of knowledge of APA Ethical Guidelines and state law into routine patient care

Organization of the Fellowship

The Truman VA Fellowship includes clinical, research, and educational components described below. Fellows have flexibility in designing their training experience to be consistent with their interests and training needs. Fellows are encouraged to develop their training plan with the supervisors in their respective area of emphasis. Further, the Fellows benefit from opportunities for collegial learning and collaboration.

Clinical Training

The Fellowship's clinical experience is organized longitudinally, based on a Continuity of Care Model, which allows optimization of the cumulative effects of learning experiences across the training year. Fellows are able to acquire new skills, such as learning a new EBT, in a manner of graduated in complexity across the full year.

Fellows are assigned to serve as the "Behavioral Health Primary Care Provider" for patients seeking services from Behavioral Health, and clinical cases are followed across the Fellowship year. Each clinical case involves the three core clinical competencies of: Assessment, Treatment and Consultation. The Fellow performs the initial assessment, develops a treatment plan and provides psychotherapy services as indicated, in addition to providing consultation regarding that patient to the multidisciplinary Behavioral Health team to which the patient is assigned. Cases are assigned with graduated levels of complexity, as mastery evolves over the course of the training year. The rate at which case complexity is assigned is dependent upon the expertise of Fellow. It is expected that by the end of the training year, the Fellow will function with relative autonomy, with supervision as needed during the regularly scheduled time. Similarly graduated exposure occurs as the Fellow provides consultation with medical staff involved with the patient's physical health care, where the Fellow serves as the Behavioral Health expert.

General Clinical Experiences: Fellows are provided access to a full spectrum of clinical populations through their participation in:

Bimonthly Evidence Based Treatment (EBT) Staff Peer Supervision-- led by the staff psychologist who serves as the Truman VA EBT Coordinator, during which, Fellows and Behavioral Health staff process their EBT therapy cases, as well as having the opportunity to raise relevant issues.

□ **Continuity of Care Model of Service Provision**--Fellows have direct experience with the full array of psychology services available, from:

✓ Working longitudinally with 2-4 inpatients admitted to the Acute Psychiatric Care Unit (APCU) , by providing intensive individual therapy to those patients, monitoring those patients' progress through various outpatient groups, making appropriate referrals for additional services, and helping patients integrate their experiences over the course of changes in relationship or health status.

✓ Working with the co-morbidities of complex patients, offers Fellows opportunities to work with other Behavioral Health (BH) treatment teams, such as the Addiction Treatment Program, and serve as the expert on the mental health of that patient in Treatment Team meetings to develop individualized treatment plans.

TBI/PTSD Emphasis Clinical Experience

Fellows choosing TBI/PTSD as an emphasis area also receive advanced training experience in the following areas:

- Assessment and treatment of PTSD, which provides the opportunity to function as part of an interdisciplinary outpatient team including PTSD psychologists, psychiatrists, and social workers. The team provides care for veterans with PTSD from military, non-military, and sexual trauma. In terms of assessment, proficiently administers and interprets the CAPS, PCL-M, & Trauma Exposure Scale and writes integrated reports, with test data, for use by the treatment team and other medical professionals. In terms of the treatment of PTSD, the Fellow will have the opportunity to learn a variety of evidenced based interventions, including: Cognitive Processing Therapy (CPT) and Prolonged Exposure Therapy.
- Selection and interpretation of appropriate neuropsychological testing and other psychological testing to evaluate patterns of cognitive deficits in the population of medical patients referred for evaluation and differential diagnosis, including but not limited to those who present with a history of TBI and/or the potential cognitive effects of PTSD. The Fellow learns to write integrated reports, with practical treatment recommendations to assist family and health professionals involved in the patients care. In cases with a diagnosis of PTSD, TBI or Co-morbid TBI and PTSD, the Fellow will have the opportunity to follow patients to provide interventions, as case load permits.
- Consultation with three multi-disciplinary treatment teams through which Veterans with TBI enter the system or are referred:
 - ✓ **The OEF/OIF Seamless Transition Team**, staffed by physicians, social workers and psychologists working with Veterans returning from the wars in Iraq and Afghanistan to identify each Veteran's unique psychosocial needs as they transition back to civilian life.

- ✓ **The Behavioral Medicine and Health Psychology Team**, staffed by psychologists, a psychiatrist, and advanced practice nurses to provide assessment and psychological services to various medical populations, including (but not limited to) Veterans with TBI.
- ✓ **The Poly-Trauma Clinic**, staffed by physiatrists (i.e., Physical Medicine & Rehabilitation physicians), medical residents, and psychologists to identify the psychosocial needs of Veterans with TBI and other disabilities.
- Co-facilitation of a 10 week, Multi-disciplinary TBI Rehabilitation Group, staffed by a Rehabilitation Psychologist, a Ph.D. Speech Pathologist, and the Director of Occupational Therapy Services. Opportunities to co-facilitate Acceptance and Commitment Therapy (ACT) groups, as well as the standard use of CBT are also available to Fellows in the TBI/PTSD area of emphasis.

Geropsychology Emphasis Clinical Experience

Fellows choosing Geropsychology as an emphasis area also receive advanced training experiences selected:

- In accordance with the Pikes Peak model of geropsychology training (Knight, Karel, Hinrichsen, Qualls, and Duffy, 2009) at the postdoctoral level of competence
- The Pikes Peak Competencies Tool (Karel et al., 2012) will be employed to measure progress toward satisfactory completion of postdoctoral training goals.
- With successful completion of the program, the fellow will meet supervised practice requirements for board certification in geropsychology through the American Board of Geropsychology (ABGERO; ABPP, 2013).
- The fellow will gain clinical experience in the following settings:

- ✓ **Community Living Center (CLC)**: The CLC at TRUMAN VA is a 41-bed unit which provides long-term care services to patients with chronic and disabling medical conditions, including dementia and neurological disorders. The CLC also serves patients transferring from acute care who are in need of rehabilitation, reconditioning, or additional therapy that cannot be delivered on an outpatient basis prior to discharging to home. Additionally, the CLC has dedicated hospice beds for patients with life-limiting conditions. In the CLC, the geropsychology fellow would provide direct assessment and psychotherapy services to patients, supportive interventions to family members of patients, and skills –training interventions for family caregivers. The fellow would function as a consulting psychologist to an interdisciplinary treatment team including: physicians with specialty training in geriatric medicine, a geriatric psychiatrist, medical and psychiatric residents rotating through the University of Missouri School of Medicine residency program, geriatric nurse practitioners, nursing staff at all levels (RN, LPN, CNA), physical, occupational, and recreation therapists, a pharmacist, a registered dietitian, a social worker, and chaplains. The fellow would participate in treatment planning with the team, and would offer consultations to unit staff on behavioral issues. He/she would develop and implement behavior management plans and track their progress, and would develop and present in-services to unit staff on relevant topics. As a member of a functioning interdisciplinary healthcare team, the fellow would be expected to contribute his/her expertise to address process issues that may arise within the team.
- ✓ **“Next Step” Geriatric Evaluation Clinic**: The “Next Step” Geriatric Evaluation Clinic was developed as a T21 initiative to expand services for cognitively-impaired older adults within the VA

system. The clinic was designed to provide a single-day multidisciplinary evaluation of patients identified with cognitive and/or functional impairment, as well as comorbid geriatric syndromes such as frequent falls, polypharmacy, and chronic medical illness. Patients are seen sequentially by a team of providers with specialized training in geriatrics, including: a speech-language pathologist, pharmacist, clinical psychologist, occupational therapist, dietitian, social worker, and geriatric physician.

Each team member conducts an assessment of the patient, providing a “warm handoff” of their impressions for succeeding providers. At the end of the day, patients and their families are given a summary feedback of the team’s impressions. The team collaborates to develop a comprehensive report for the patient record complete with recommendations from each discipline, which can be used by the referring provider to inform treatment planning. This comprehensive, interdisciplinary assessment allows providers to avoid multiple and often redundant referrals, and saves patients and families multiple appointments which can be both confusing and time-consuming.

The fellow will serve as the consulting psychologist for the team, and will conduct the psychology portion of the assessment. He/she will review medical records in preparation for the assessment, and will select appropriate measures to assess cognition, psychiatric symptoms, caregiving burden, and functional status. The fellow will provide direct consultation to members of the assessment team regarding patient and family BH issues, and will work with the team to develop a comprehensive set of treatment recommendations for referring providers.

- ✓ **Palliative Care Consultation Team (PCCT)**: The PCCT is an interdisciplinary consultation team of providers with specialized training in palliative and end-of-life care. The mission of this team is to consult with treating providers, patients, and families regarding care issues in the context of life-limiting illness, and to provide recommendations and aid in developing appropriate treatment plans for these patients. The team serves inpatients in the dedicated hospice beds on the CLC, patients on the acute medical floors, and out patients who elect to remain in their homes to receive palliative and hospice care. The team is led by a geriatric physician with specialty training in palliative medicine, and consists of providers from several disciplines with similar training and experience, including: a geriatric nurse practitioner with extensive background in end-of-life care, chaplain, geropsychologist with

specialized training in palliative care, social workers with hospice background, masters-level RN who serves as the team coordinator.

Psychologists are expected to function as core members of the PCCT (VHA, 2008). In this role, the fellow will consult with team members to address psychosocial concerns faced by patients with life-limiting illness and their families. He/she will provide assessment and brief intervention services to palliative/hospice patients and their families as needed, throughout the course of disease progression from diagnosis to death and bereavement follow-up. The fellow will also have opportunities to assist in staff development on topics related to palliative care, and to provide support to staff members involved in end-of life care. Fellows may elect to participate in performance improvement projects to evaluate and improve the quality of palliative care within the facility. The fellow will also have the opportunity to participate in meetings of the Palliative Care Community Outreach committee, which consists of hospital staff and community partners in hospice care.

- ✓ **Home-Based Primary Care (HBPC)**: The Home Based Primary Care (HBPC) service at Truman VA offers in-home medical case management services and primary care to homebound veterans living within a 75-mile radius of TRUMAN VA . A second HBPC team, based at the Waynesville, MO CBOC, serves veterans living within a 50-mile radius of that facility. Each interdisciplinary HBPC care team is led by a nurse practitioner, and anchored by advanced-practice registered nurses who assume responsibility for individual case management. Under the leadership of a geriatric physician, the teams provide primary-care medical services in the home for veterans assigned to the HBPC service. Other disciplines represented on the HBPC team include pharmacy, occupational therapy, dietary, social work, and psychology.

The Fellow will travel to veterans' homes within the HBPC catchment area, conducting psychological, cognitive, and neuropsychological screening assessments and offering time-limited, evidence-based psychosocial, educational, and behavioral medicine interventions to HBPC patients and their families. Fellows will be expected to participate in weekly interdisciplinary treatment-planning meetings, and would contribute to development of individual treatment plans. Fellows will also develop skills for effective consultation to members of the HBPC team regarding individual patient issues; this may include development of individualized behavior management plans, providing resources for dissemination to patients and families, or developing inservices for HBPC staff. The HBPC rotation offers fellows a unique opportunity

to work with an ethnically and culturally diverse veteran population that is predominantly rural-dwelling and elderly.

- In addition to these experiences, the Fellow will have the opportunity to provide assessment, consultation, and psychotherapy services to older adults and their families through the BHSL Outpatient clinic. Fellows will have the opportunity to gain supervised experience in providing evidence-based psychotherapies of relevance to older adults, including REACH-VA caregiving skills training, Cognitive-Behavioral Therapy for Insomnia (CBT-I), Cognitive Behavioral Therapy for Chronic Pain (CBT-CP), Interpersonal Psychotherapy (IPT) for depression, REM Therapy for depressed older adults with cognitive impairment, and other therapeutic modalities.

Research Training

The Fellowship integrates science and practice through a self-directed literature review in the Fellow's area of interest. The scientist –practitioner orientation of the Fellowship supervisors makes the empirical basis of therapy and potential clinical research questions part of the collegial dialogue of supervision and other informal interactions. The research requirement is flexible and designed to meet the Fellow's training needs, and may occupy up to 25% of the the Fellow's week (10 hours) with a minimum of 4 hours per week of the Fellow's time. To meet the research requirement, Fellows may: collaborate with VA or UMC faculty on ongoing research (please see list of potential UMC Research Mentors under Fellowship Faculty), collaborate with faculty on a program evaluation project, or design and implement an independent research project under the mentoring of one faculty member. Fellows are encouraged to present their work in a local, regional, and/or national educational setting, or submit work for publication as appropriate.

- **TBI/PTSD Emphasis Research Opportunities: Outcome Evaluation of Clinical Interventions**—Examples might include looking at changes in functional outcomes from the Multi-disciplinary TBI Rehabilitation Group, comparing the effectiveness of CPT based on the presence or absence of participation in pre-therapy group intervention to increase readiness for therapy or using a single subject design to evaluate changes to a treatment protocol for a Veteran with co-morbid TBI and PTSD.
- **Collaboration with VA faculty on IRB approved Research on Clinical Outcomes** – Examples might include comparing the effectiveness of standard CPT for Veterans with co-morbid TBI and PTSD vs. those with PTSD only or developing a prospective comparison of standard CPT vs. a CPT protocol modified for person with mild TBI.

- **Collaboration with UMC faculty on IRB approved Research on Clinical Outcomes**—Examples might include collaborating with UMC faculty with established research on alcohol abuse to examine applications for Veterans with co-morbid PTSD and substance abuse.

Geropsychology Emphasis Research Opportunities:

- **Outcome Evaluation of Clinical Interventions**—Examples include looking at changes in perceived QOL, trait hopefulness and trait meaning in participants in the End of Life Recovery Group; Ongoing Program Evaluation of the multi-disciplinary Next Step Program.
- **Collaboration with VA faculty on IRB approved Research on Clinical Outcomes** – Examples include research on the validity of the WHODAS in a geriatric Veteran population.
- **Collaboration with UMC faculty on IRB approved Research on Clinical Outcomes**—Examples include collaborating with UMC faculty with established research at MUs Rehabilitation Neurosciences Laboratory on the Stroke and Hand study, which looks at compensatory forced hand use and associated neural plasticity following stroke.

Professional Development and Education

The Truman VA Fellowship's educational component for the 2016-17 year will be comprised of three parts:

Required Didactics include:

- A bimonthly **Postdoctoral Professional Issues Didactic, focusing on Competencies of Supervision and Professional Ethics**, coordinated by the former Training Director of the Missouri Health Sciences Internship Consortium, who has particular interest and expertise in training and supervision. It will address professional issues that arise for Fellows across the training year, and cover such topics as:
 - Models of Providing Supervision
 - Competencies in Providing Supervision
 - Common Issues for New Supervisors
 - Ethical Issues in Providing Supervision
 - Ethical Issues in Individual and Couples Psychotherapy
 - Ethical Issues in Group Psychotherapy
 - Ethical Issues associated with Social Media and Internet

The Truman VA Psychology Diversity Committee will offer three **Clinically Focused Diversity Workshops**, where Fellows (who serve on the Truman VA Diversity Committee) collaborate with a faculty member to develop at least one, half-day, interactive, educational experience, combining presentations on selected readings, and interactions with a panel of discussants, including at least two members of the community. Topics will focus on potential cultural barriers to therapy and potential therapeutic approaches to those barriers among:

- Latino Americans
 - African Americans
 - Persons from Lower SES
 - Persons with Physical Disabilities
 - Other under-represented populations
- **Psychology Diversity Rounds**, which, during the 2014-2015 training year included the following:
 - Deconstructing Ferguson: Examining Psychology's Response to Civil Unrest
 - Lesbian, Gay, Bisexual, and Transgender Older Adults: Providing Culturally Sensitive Mental Health
 - Addressing Value-Based Conflicts in the Patient-Provider Relationship: A Discussion

- Special Considerations in Working with the SPMI Population: Presentation & Documentary
- Quarterly **Psychology Grand Rounds**, which, during the 2014-2015 training year included the following:
 - Evidence-based Parenting and Family Interventions Presenter: Keith Herman, Ph.D.
 - Human Trafficking: Searching Survivors; Deborah L. Hume, Ph.D.
 - Using the Minority Stress Model with LGBT Clients; Kurt DeBord, PhD
 - Developmental and Integrative Approach to Behavioral Pain Management; Steve Kvall, PhD
 - The Neuropsychology of Spirituality ; Presenter: Brick Johnstone, Ph.D., ABPP
- Quarterly **VA Psychology Journal Club**, which, during the 2014-2015 training year, included the following topics:
 - A Meta-Analysis of Cognitive Deficits in Euthymic Patients with Bipolar Disorder; Robinson, Thompson, Gallagher, et. al., (2006)
 - Addressing Value — Based Conflicts within the Counseling Relationship: A decision making model; (Kocet and Herlihy, 2014)
 - A systematic review of relations and psychotherapist religiousness/Spirituality and Therapy Related Variables; (Cummings, Ivan, Stanley, et. al., 2014)
 - Reflections of a Gay Male Psychotherapist; (Haldeman, 2010)
 -
- Weekly **Postdoctoral Case Conference**, in which Fellows and supervising psychology staff present current cases to highlight particular clinical issues of interest and to solicit further clinical input..

Elective Didactic experiences include:

- Weekly Psychiatry Grand Rounds
- Monthly Neuropsychology/Neurology Case Conferences, through the UMC, Department of Health and Neuropsychology
- Monthly seminars through the UMC, Department of Psychology

Other Educational Experiences:

The depth of the Fellows' clinical experiences can be enhanced by an array of choices which consist of 2 hours per week of non-supervised learning experiences. With the Training Director's approval, these experiences can be put together in flexible ways to create an individualized training plan and can include, but are not limited to:

- Weekly brain cuttings through the University of Missouri School of Medicine, Department of Pathology
- Neurology "Shadow" Practicum
- Attending local monthly support meeting for the National Alliance for the Mentally Ill (NAMI).
- Assisting in the administration of the Clinical Peer Review process
- Diversity enhancing experiences, sponsored by the University of Missouri (MU), including:
 - ✓ The Annual Cambio de Colores Conference—to facilitate the transition of Latinos of various backgrounds to living in the mid-west
 - ✓ Monthly meetings of the MU LGBT support group
 - ✓ The Annual February Black History Keynote Speakers or “Difficult Dialogues” Brown Bags at the MU Black Culture Center

Administrative Policies and Procedures

Hours, Stipend, and Benefits

- All Fellows receive a full stipend – no Fellow is accepted on a Without Compensation (WOC) status.
- All Fellows are admitted into the full-time training programs (September 1 through August 31).
- The Postdoctoral Fellowship requires that Clinical Psychology Fellows must complete 2080 training hours annually, 30% of which consist of direct clinical care, for satisfactory completion of the program.
- The stipend for a first year postdoctoral fellow is \$42,239 before taxes.
- Fellows are eligible for health insurance at a reduced cost.
- Benefits include 10 paid holidays, 13 days of annual leave and, if needed, 13 days of sick leave. Upon completion of the year of training, Fellows are eligible to enter Federal Service at the grade of GS-12.

Time Breakout of Weekly Activities

Based on a 40-hour work week, the average amount of time (in hours) spent in various activities during postdoctoral training is as follows:

- An average of 14 hours per week is spent in direct service to patients (i.e., assessment, feedback, individual therapy, group therapy etc.)
- An average of 8 hours per week are spent in support of direct patient care (i.e., chart review, writing progress notes or reports, analysis and scoring of assessment data, etc.)

- An average of 4 hours per week are spent in supervision, at least two hours of which will be individual supervision.
- An average of 10 hours per week is spent in activities of scholarly inquiry/ research. Approximately 4 hours per week will be spent in other training activities. This consists of time spent in team meetings, case conferences, and didactic activities.

Statement of Nondiscrimination

The TRUMAN VA Postdoctoral Fellowship Training Program is committed to a policy of nondiscrimination on the basis of race, sex, age, religion, color, national origin, disability status or sexual orientation. Veterans and persons of diverse backgrounds, including those representing traditionally underserved populations, are strongly encouraged to apply.

REQUIREMENTS FOR COMPLETION

To successfully complete the TRUMAN VA Psychology Fellowship, Fellows must participate in training opportunities for a minimum of 2080 hours. Fellows are expected to achieve ratings of at least "High Intermediate Skills", with 80% of items rated at Advanced Skills or higher, by the end of the training year. This allows for some variability with respect to training in areas in which Fellows have considerable past experience and well as new areas, in which they may have little or no prior experience. Fellows are expected to complete a research project during the course of their Fellowship year. The project can range from evaluation of a Behavioral Health treatment program for clinical decision making, to piloting methodologies to demonstrate clinical outcomes for individual patients, to active collaboration with ongoing clinical research, to developing an independent research project. Fellows are expected to abide by the APA Guidelines for Ethical Behaviors and Standards for Providers of Psychological Services and the Ethical Principles of Psychologists and relevant Missouri Rules and Laws.

Review and Remediation Procedures

Evaluation Methods

Postdoctoral Fellows receive formal written evaluation of their progress by each supervisor at 6 months and 12 months. Fellows provide written evaluations of their training supervisors on the same schedule. Fellow are invited to engage in Informal discussion with the Training Director about their experience of the Fellowship Training Program throughout the year. Formal written evaluations of the Fellowship Training Program are completed by the Fellows on an annual

basis. Evaluation methods are explained in detail in the Postdoctoral Fellowship Handbook that is provided to Fellows.

Due Process Policy

In the event of a grievance the Fellowship Program has a due process policy that outlines both remediation procedures and procedures for Fellows to follow if they have a concern about the review process. The Due Process Policy is incorporated within “Remediation Procedures” that are detailed in the Postdoctoral Fellowship Handbook.

Training Environment

Truman VA <http://www.columbia-mo.va.gov/>

The Harry S. Truman Memorial Veterans' Hospital (TRUMAN VA) is a full service medical center that provides inpatient and outpatient care to a diverse range of eligible veterans from mid-Missouri in the areas of medicine, surgery, behavioral health, neurology and physical medicine and rehabilitation. Approximately 38,000 individual veterans receive health care services at TRUMAN VA and, on an average during a year, 7,500 individuals receive inpatient treatment. More than 116,000 outpatient visits occur each year.

TRUMAN VA's strong commitment to training can be seen in its development of the Psychology Postdoctoral Fellowship in 2007, it's longstanding, (over 25 years) as an APA approved psychology internship program, psychology graduate level practicum opportunities, graduate level social work practicum opportunities, as well as medical residency programs in anesthesiology, internal medicine, orthopedics, pathology, psychiatry, rehabilitation medicine, and surgery at the facility.

The University of Missouri School of Medicine is conveniently located across the street from TRUMAN VA and is connected by an underground tunnel. This allows for easy access to elective didactic experiences including weekly Psychiatry Grand Rounds and the Pathology Department's weekly Brain Cuttings. The nationally recognized University of Missouri's Department of Psychology and the more recently established Department of Health and Neuropsychology are a 5- 10 minute walk from TRUMAN VA , through the lovely MU campus. A number of distinguished psychology researchers from MU have agreed to serve as mentors for TRUMAN VA Fellows, who are interested in pursuing individual or collaborative research projects. (Please see Research Mentors List.)

Effective September 1, 2011, psychologist, Karen Smarr, Ph.D., TRUMAN VA Research Compliance Officer, joined the TRUMAN VA Psychology Postdoctoral

Fellowship Program Training Committee to serve as our site Research Consultant. Dr. Smarr oversees Fellows' early completion of VA Research Requirements to facilitate participation in established IRB approved research or to consult on projects of the Fellow's own design, to provide feedback and guidance in developing a research product that can be realistically completed within the Fellowship year, with consultation and guidance to facilitate completion of the research project over the course of the fellowship year.

The medical library at TRUMAN VA subscribes to major psychology journals, has a national borrowing agreement with other libraries and provides computerized literature searches, and is supported by the medical library of the University of Missouri.

The Behavioral Health Service (BHS), directed by Cheryl Hemme, M.D., consists of psychologists, psychology technicians, social workers, psychiatrists, nurses, rehabilitation specialists and vocational rehabilitation programs. The sixteen psychologists of the BHS have interests in emotional health and illness, behavioral medicine, posttraumatic stress disorder, addictions, crisis intervention, geropsychology, pain management, neuropsychology, rehabilitation psychology, and research. Two staff psychologists are board certified (Rehabilitation Psychology) and others are board eligible in Clinical Neuropsychology and Rehabilitation Psychology. Psychometricians administer, on request, a wide variety of psychological instruments, including both personality and cognitive batteries in the Psychology Laboratory.

Fellows experience the responsibility of serving as Primary Behavioral Health Providers in the context of integrated behavioral health care. They develop the collaborative strategies and professional confidence working shoulder to shoulder with other disciplines within the medically oriented primary care environment. At TRUMAN VA, Fellows work with a diverse population, including both men and women consumers, from both rural and urban backgrounds, and from low-to middle- income status, and with a wide range of medical and emotional disabilities. A significant number of consumers travel to this VA medical center from the entire state of Missouri to request services.

Living Environment

The Harry S. Truman Memorial Veterans' Hospital (TRUMAN VA) is located in Columbia, Missouri, (population 108,000), a picturesque, college town with all the benefits of having a large university, in addition to two other colleges, within the city limits. The vibrant downtown district offers a variety of interesting local coffee shops, ethnic and nouvelle cuisine restaurants, with outdoor cafes, in addition to shops, art galleries and bookstores. In 2006, *Money* magazine ranked Columbia in the top 100 "best places to live" and *Forbes* magazine ranked Columbia at #16 in "best small places for business." *Outside* magazine (July 2008) ranked Columbia, MO at #10 "best places". Columbia also boasts the best hamburgers

(Booches), best coffee spot (Lakota), and it's popular Shakespeare's Pizza was featured on Good Morning America (November 20, 2010) as one of the 4 best college eateries in the nation. Located halfway between St. Louis and Kansas City, Columbia has invested heavily in its extensive parks and hiking/biking (MKT) trail systems, through largely wooded areas, which connects Columbia to quaint towns along the Missouri River, with its breathtaking bluff views. Home to film festivals (True/False), art fairs and music festivals (Roots & Blues), local venues (The Blue Note; We Always Swing Jazz Series) regularly bring national recognized musicians to Columbia. The University of Missouri offers everything from classical music to modern dance troupes and theatre to the predominantly youthful Columbia community (nearly 30% of the town's population is between 25-44). For those interested in regular workouts, state-of-the-art facilities are available through the University's fabulous (has its own indoor rock climbing wall) Recreation Center, (recognized by *Sports Illustrated* the best college rec center in the nation) as well as through the city's lovely, family friendly ARC recreation center. Sports fans are likely already familiar to MU Tiger football and basketball. Both the University of Missouri and the city of Columbia are architecturally accessible. There is a large international community in Columbia and the Latino and African American populations continue to grow (91% growth rate and 34% growth rate, respectively from available statistics from the 2000 Census). Columbia's support for the LGBT community is evident from the success of its Annual Gay Pride Festival and The Center Project. The low cost living and the high quality of life make Columbia a place that faculty from urban, rural and geographically diverse areas enjoy calling home.

Getting to Columbia

While there is a regional airport located in Columbia, flight selection is somewhat limited. Columbia is situated roughly 2 hours' drive either direction from major metropolitan airports in St. Louis (**STL**) or Kansas City (**MCI**), with convenient, ground shuttle service between the two airports and Columbia.

Easy Day-trip Destinations

Kansas City (KC) is situated at the confluence of the Kansas and Missouri rivers. With over 200 fountains, the city claims to have the second most in the world, just behind Rome. Hence, KC is officially nicknamed the *City of Fountains*. The city also has more boulevards than any city except Paris and has been called "Paris of the Plains." KC is home to multiple museums, galleries and major league sports teams. It is also well known for its contributions to cuisine (Kansas City-style barbecue) as well as to the musical styles of jazz and blues. Kansas City jazz in the 1930s marked the transition from big bands to the bebop influence of the 1940s. Today, the annual "Kansas City Blues and Jazz Festival", attracts top jazz stars nationwide and large out-of-town audiences. Another less

well known aspect of KC culture includes the Kansas City Ballet, founded in 1957 by Tatiana Dokoudovska, and which later combined with Dance St. Louis to form the State Ballet of Missouri, although it remained located in Kansas City. Today, the Ballet offers an annual repertory split into three seasons which ranges from classical to contemporary ballets. KC is also home to The Kansas City Chorale, a professional 24-voice chorus, which has achieved international renown with 9 recordings. The Nelson-Atkins is internationally recognized as one of the finest general art museums in the US with a permanent collection of 33,500 works. KC is also home to the Kemper Museum of Contemporary Art as well as the noted art school, the Kansas City Art Institute.

St. Louis, situated near the confluence of the Missouri and the Mississippi Rivers, lies at the heart of Greater St. Louis, a metropolitan area of nearly three million people in Missouri and Illinois. Greater St. Louis is an academic and corporate center for the biomedical sciences. St. Louis University and Washington University in St. Louis are the leading research institutions. Also home to major league sports teams, a world class zoo, and spectacular children's' museums (Magic House; The City Museum; and the St. Louis Science Museum), St. Louis is also another metropolitan center of culture. The world-renowned Saint Louis Symphony Orchestra, founded in 1880, is the second-oldest U.S. orchestra. Under Conductor Laureate, Leonard Slatkin, the orchestra has received six Grammy Awards and fifty-six nominations. The Opera Theatre of Saint Louis is an annual summer festival of opera performed in English. The Union Avenue Opera performs opera in their original languages. Renovation of the Kiel Opera House is underway. Other classical music groups include the Arianna String Quartet,^[38] the quartet-in-residence at the University of Missouri–St. Louis, the Saint Louis Chamber Chorus. St. Louis has long been associated with great ragtime, jazz and blues music. Early rock and roll singer/guitarist Chuck Berry is a native St. Louisan who still performs there several times a year. Soul music artists Ike Turner and Tina Turner, Fontella Bass, and jazz innovator Miles Davis began their careers in St. Louis or on the 'East Side' (East St. Louis, Illinois). The theater district of St. Louis in midtown's Grand Center, St. Louis, is undergoing major redevelopment. The district includes the Fox Theatre, one of the largest live Broadway theaters in the United States; the Powell Symphony Hall; the Saint Louis University Museum of Art; the Museum of Contemporary Religious Art; The Sun Theater (also under redevelopment); The St Louis Black Repertory Theater Company;^[41] the Contemporary Art Museum Saint Louis; the Pulitzer Foundation for the Arts;^[42] the Sheldon Concert Hall; and the Grandel Theatre. The Muny (Municipal Opera Association of St. Louis) is an outdoor amphitheater located in Forest Park. It seats about 11,000 people, and its charter reserves 1,500 seats at the top of the amphitheater that are free on a first-come-first-serve basis. Last, but not least is the Saint Louis Art Museum, also one of the nation's leading comprehensive art museums with collections that include works of art of exceptional quality from virtually every culture and time period. Areas of notable depth include Oceanic art, pre-Columbian art, ancient Chinese bronzes, and European and American

art of the late 19th and 20th centuries, with particular strength in 20th-century German art.

Lake of the Ozarks

The **Lake of the Ozarks**, approximately 90 minutes' drive from Columbia, is one of the largest recreational lakes in the Midwest. Created by damming the Osage River in the northern part of the Ozarks in central Missouri, the lake surface covers 55,000 acres, with over 1,150 miles of shoreline. A vacation haven for boating, fishing and swimming, "the Lake" is also home to Party Cove, a rowdy gathering spot that a travel writer for *The New York Times* called the "oldest established permanent floating bacchanal in the country." In contrast, Lake of the Ozarks State Park's thousands of wooded acres have 12 trails that wind through the park, providing quiet places to hike, mountain bike or enjoy the lake away from the hustle and bustle of the more dense tourist areas. Caves are common geologic features in areas like the Ozarks. The protected environment of the Ozark Caverns offers a journey through geologic processes that have proceeded unhindered for thousands of years, leaving formations such as soda straws, helictites, stalagmites and Angel Showers, an unusual cave phenomenon, where a never-ending shower of water seems to come out of the solid ceiling of rock. Four species of salamanders, four species of bats, and 16 species of invertebrates live in Ozark Caverns, and are sometimes visible to visitors.

Visitor Bureau www.visitcolumbiamo.com

Chamber of Commerce www.chamber.Columbia.mo.us

Missouri State Parks www.mostateparks.com

State Historical Society www.system.missouri.edu/shs

Concert Series www.kbia.org

University of Missouri www.missouri.edu

APA Accreditation Status

The TRUMAN VA Psychology Postdoctoral Fellowship Training Program is accredited by APA. The next site visit will be during the academic year 2017.

The Office of Program Consultation and Accreditation of the American Psychological Association can be reached at:

Telephone: 202-336-5979

Fax: 202-336-5978.

The office of Program Consultation and Accreditation can be reached online at: www.apa.org/ed/accreditation

Application and Selection Procedures

Eligibility for Application

Applicants for postdoctoral fellowships must be graduates of APA-accredited doctoral programs in Clinical or Counseling Psychology and must have completed APA-accredited internships. All requirements for the doctoral degree, including dissertation defense, must be completed prior to the start of the fellowship year. Applicants must be US citizens. As an equal opportunity training program, the fellowship welcomes and strongly encourages applications from all qualified candidates, regardless of gender, racial, ethnic, sexual orientation, disability, or other minority status.

Selection Process

All applications are reviewed for eligibility after all materials are received. Applications are distributed to directors of each area of emphasis (e.g., TBI/PTSD, EBP/SMI or Geropsychology) where they are reviewed and evaluated by supervising faculty in each emphasis area. Telephone or in-person interviews are offered to top candidates. Applicants are extended offers based on their written application materials and interview presentation.

The TRUMAN VA Psychology Postdoctoral Fellowship Program evaluates the following criteria when selecting applicants:

- Breadth and quality of prior general clinical or counseling training
- Quality of experience in the specific area of emphasis to which the applicant applies
- Quality and scope of research productivity
- Evidence of personal maturity and accomplishments
- A clear, thoughtful, and meaningful writing style in application materials
- Strength of letters of recommendation.
- Goodness of fit between the applicant's professional goals and program training objectives

Requirements for Application Submissions

For **each** Fellowship track for which you wish to be considered for admission, please submit materials below:

- Cover letter, including statements about background experience with and interests in
 - ✓ PTSD; TBI; neuropsychology **or**
 - ✓ Geropsychology **and**

- ✓ How this training program would fit your long term career goals;
- Vita,
- Copy of graduate school transcript;
- Three (3) letters of recommendation
 - ✓ At least one from a therapy supervisor on internship
 - ✓ One from Graduate Training Director re: expected date of completion of dissertation (if not already completed);
- Two (2) professional writing samples (1 neuropsychology report if applying to the PTSD/TBI position; Cognitive Evaluation if applying for the Geropsychology position)

Application materials are due by February 1, 2016.

Please be sure to include all application materials in one envelope. Materials mailed separately may not be reviewed in a timely manner.

Applications and Inquiries should be directed to

Martha Brownlee-Duffeck, Ph.D., ABPP
 Psychology Leader & Director of Training,
 Post-doctoral Program
 Behavioral Health Service,
 Harry S. Truman Memorial Veterans' Hospital,
 800 Hospital Drive,
 Columbia, Missouri 65201
Martha.Brownlee-Duffeck@VA.gov
 Tel. 573-814-6486 FAX: 573-814-6493

After receipt of written materials, suitable applicants will be called to set up interviews. In person interviews are preferred but we realize that the cost of travel may be prohibitive. Therefore, phone interviews are acceptable. All applicants will be **notified by February 16, 2016**. At the time that a position is offered, the selectee may accept, decline, or request that they be able to put the offer on hold for a maximum of three days before a decision is required.

If you are selected as a Fellow, you will be considered a Federal employee, and the following requirements will apply. The Federal Government requires that male applicants to VA positions who were born after 12/31/59 must sign a Pre-appointment Certification Statement for Selective Service Registration before they are employed. It is not necessary to submit this form with the application, but if you are selected for this fellowship and fit the above criteria, you will have to sign it. All interns will have to complete a Certification of Citizenship in the United States prior to beginning the internship. We will not consider applications from anyone who is not currently a U.S. citizen. Falsifying these documents will result in the intern's immediate dismissal. The VA conducts drug screening exams on randomly selected personnel as well as new employees. Interns are

not required to be tested prior to beginning work; but once on staff, they are subject to random selection as are other staff.

TRUMAN VA Fellowship Core TRAINING FACULTY

Martha Brownlee-Duffeck, Ph.D., ABPP Rp-CN (University of Missouri, 1987) is the current Psychology Leader for the Behavioral Health Service at TRUMAN VA. She is a certified by the American Board of Professional Psychology in Rehabilitation Psychology and holds adjunct positions as Clinical Assistant Professor in both the Department of Physical Medicine & Rehabilitation at the University Of Missouri School Of Medicine and the Department of Health Psychology in the University of Missouri School of Health Professions. Clinical interests include rehabilitation of persons with Traumatic Brain Injury (TBI), individual psychotherapy therapy with persons with mild TBI and PTSD, individual therapy with Acceptance and Commitment Therapy (ACT) for persons with Depression and Mild Cognitive Impairment (MCI), neuropsychological assessment of medical patients. Research interests include Examining the Effectiveness of Cognitive Processing Therapy (CPT) for Veterans with co-morbid TBI & PTSD vs. PTSD only; developing a modified CPT protocol for persons with co-morbid TBI; Expanding the work of using of Statistical Process Control (SPC) as an outcome measure in rehabilitation settings to psychotherapy outcomes as part of EBP. Leisure interests include reading, art and hiking.

Alice Christensen, Ph.D. (Vanderbilt University,1982) is a clinical psychologist at TRUMAN VA , the former Director of Training of the Missouri Health Sciences Psychology Consortium, and a Clinical Assistant Professor of Psychiatry in the Department of Psychiatry at the University of Missouri. She has particular interests in the facilitation of the professional growth of psychologists, including the preparing psychologists for becoming supervisors. Dr. Christiansen has nearly 20 years of clinical experience working on multi-disciplinary treatment teams and directly with Veterans with SMI, across inpatient and outpatient settings. In addition, she is particularly interested in family therapy and the assessment and treatment of affective disorders and post-traumatic stress disorder. Research interests include the training of psychologists, and the efficacy of treatment of post-traumatic stress disorder. Leisure interests include family, running and handicrafts.

Grant O'Neal, Ph.D. (University of Missouri, 1995) is a licensed psychologist and Leader of the PTSD clinical team. He has previously worked in various capacities within the mental health community including: therapist and group facilitator, Quality Improvement Director, Clinical Supervisor for mental health and substance abuse providers and Clinic Director for a community psychiatric

rehabilitation program. His interests include: evidence-based treatments for anxiety and depression, mindfulness-based treatment, and practitioner resilience.

Zachary H. Osborn, Ph.D. (University of Alabama at Birmingham, 2007) is a neuropsychologist at TRUMAN VA and the Associate Director for the Postdoctoral Fellowship program. He served as the Consortium Director of Training from 2010-2013 and VA training director from 2010-2015. He conducts neuropsychological evaluations, as well as triage evaluations. He received his Master's Degree (Counseling Psychology) at Iowa State University and then specialized in neuropsychology in the Medical Psychology Doctoral program at the University of Alabama Birmingham. While there he worked in the areas of both pediatric and adult neuropsychology; including medical/genetic, rehabilitation, and athlete populations. Dr. Osborn has worked with athletes at all levels including professional football players. He completed his internship at the Missouri Health Sciences Psychology Consortium (MHSPC), working at both TRUMAN VA and for the UM-DHP. Dr. Osborn serves as an adjunct editor for a major psychology journal (Rehabilitation Psychology), reviewing studies involving TBI/mTBI. He has also given a number of invited talks to TRUMAN VA staff, state organizations, and VISN 15 on TBI/mTBI and psychological co-morbidities focusing on evaluations and treatments. Current research projects focus on suicidality and neuropsychological functioning/impairment.

W. Michael Palmer, Ph.D. ABPP Geropsychology (University of Missouri-St. Louis, 2007) is a geropsychology specialist on the Behavioral Medicine/Neuropsychology Services (BMNS) team at TRUMAN VA . Dr. Palmer completed a specialty track in geropsychology during his graduate training at UMSL, earning a graduate certificate in 23 gerontology along with his doctoral degree. He completed a specialty internship in geropsychology and geriatric neuropsychology at the Edith Nourse Rogers VAMC in Bedford, MA, where he was supervised by staff from the Alzheimer's Disease Research Center (ADRC). He completed his postdoctoral residency in geropsychology at the Louis Stokes Cleveland VAMC. He recently completed a Mini-Fellowship in Ethnogeriatrics through the Stanford University School of Medicine. Dr. Palmer's clinical duties include consulting to the facility's Community Living Center (CLC) and Palliative Care Consult Team, conducting psychological assessments in the Next Step geriatric assessment clinic, and providing outpatient therapy services to older veterans and their families. His teaching and research interests include dementia caregiving, medical and psychiatric comorbidity in older adults, elder mobility and driving safety, application of the Recovery Model to end-of-life care, and multicultural competency in clinical geropsychology. Dr. Palmer supervises interns on the BMNS/Geropsychology track major and minor rotations, and serves on the consortium's Multicultural/Diversity committee. He chairs the medical center's Dementia Committee, and serves on the Missouri Department of Transportation Subcommittee on Elder Mobility and Safety.

Karen Smarr, Ph.D. (University of Missouri, 2003) is a Research Psychologist performing Compensation and Pension Examinations, in addition to serving as the Research Compliance Officer (RCO) at Harry S. Truman Memorial Veterans' Hospital (TRUMAN VA). She currently holds an academic appointment as a Clinical Assistant Professor in the Departments of Internal Medicine and Psychiatry at the University of Missouri (MU). As the RCO, she works closely with the MU Institutional Review Board (IRB) and VA researchers involved in the conduct of human subject research. She serves as a member of the VA Central IRB (CIRB), responsible for review of multisite studies funded by VA. Her research interest is in the area of psychological adaptation with rheumatic diseases, specifically conducting studies of depression management, adaptation to chronic illness, cognitive-behavioral interventions, self-management, and e-health applications. She has been the Principal Investigator on a research project, funded by the National Institute on Disability and Rehabilitation Research, examining the effects of an empirically-validated, cognitive-behavioral self-management in rheumatoid arthritis delivered using an internet/telephone-supported approach. Her past clinical experience involved working as a staff psychologist on the Health Psychology Team with particular interests in coping with chronic illness, rehabilitation in geriatric populations, family issues related to health, and smoking cessation. Her current research work focuses on ensuring human subjects protection at TRUMAN VA and nationally on the CIRB, as well as research compliance as she serves as a consultant to the TRUMAN VA Research Oversight Committee and its subcommittees.

TRUMAN VA Psychology Faculty

Andrew J. Darchuk, Ph.D., L.P. (Ohio University, 2007) is a clinical psychologist with the Behavioral Health Service at TRUMAN VA. He works closely with the Post-traumatic Stress Clinical Team (PCT) and the Addiction Treatment (ATP) teams and has significant expertise in the assessment and treatment of dually-diagnosed individuals. Dr. Darchuk completed his predoctoral internship at the Hazelden Foundation and has considerable experience treating individuals with addictive disorders, serious and persistent mental illness, and mood disorders in outpatient, residential, and forensic settings. His clinical and research interests include men's issues in psychotherapy, anger management/emotion regulation, cognitive-behavioral approaches to addictions treatment, motivation in addiction recovery, psychotherapy process research, and psychosocial correlates of positive treatment outcome.

Kathleen M. Darchuk, Ph.D., L.P., ABPP (Ohio University, 2007) is a clinical psychologist and Team Leader for Behavioral Medicine and Health Psychology Services at TRUMAN VA. She conducts psychological evaluations for veterans with chronic pain and provides individual and group-based treatment to veterans with chronic pain and their families. Dr. Darchuk has extensive training in health psychology and chronic pain management. She completed a postdoctoral

fellowship in Medical Psychology at the Mayo Clinic, where she specialized in chronic pain rehabilitation and primary care. Her research interests include cognitive and emotional processes that potentially serve as risk factors for the development and maintenance of chronic pain disorders, sociocultural and psychological factors that influence treatment outcomes for chronic pain disorders, and improvement of chronic pain treatment within primary care.

Janet M. Johnson, Ph.D. (University of Wisconsin-Milwaukee, 2007) is the Evidence Based Practice (EBP) Coordinator for Behavioral Health and a staff psychologist with the Personal Recovery Program at TRUMAN VA. Her role as EBP Coordinator is to support the facility in the implementation and sustainability of evidence-based psychotherapies. She provides individual, evidence-based therapy to veterans using Cognitive Behavioral Therapy, Dialectical Behavior Therapy (DBT), Acceptance and Commitment Therapy (ACT), and Cognitive Processing Therapy. Within the Personal Recovery Center, she also leads groups, such as an ACT and a DBT group. She completed her internship at the University of Maryland School of Medicine/ VA Maryland Health Care System consortium and her post-doctoral fellowship at the Edith Nourse Rogers Memorial VAMC. Her past experience includes outpatient and inpatient work with both children and adults in the areas of anxiety disorders, substance use disorders, serious mental illness, and dual diagnosis. Her leisure pursuits include jogging, painting, travel, eating very spicy food, and visiting archaeology and history museums.

Megan K. Null, Psy.D. (Indiana State University, 2004) is a staff psychologist with the Behavioral Health Recovery Team at TRUMAN VA. As a new hire at TRUMAN VA, she looks forward to providing individual and group services to both the outpatient and psychiatric inpatient units. She provides individual, evidence-based psychotherapy to veterans using Cognitive Behavioral Therapy, Cognitive Processing Therapy and Prolonged Exposure. She also looks forward to running groups in Dialectical Behavior Therapy (DBT) and Seeking Safety (SS). She completed her internship at the Edward Hines Jr. VA Hospital in Chicago. She previously worked for more than six years as an outpatient clinical psychologist at the Jesse Brown VA Medical Center in Chicago. Her work there involved being the psychologist for the Women's Health Clinic, as well as a member of a Supportive Care Team for Veterans with Psychotic Disorders. She was the first Military Sexual Trauma Coordinator for the medical center, and worked in that role, primarily in a clinical capacity, for the last 3 years. When not at work, she enjoys reading, playing the piano, travel, hiking and exploring Columbia.

Randall E. Rogers, Ph.D. (University of North Texas, 2005) is the Addictions Treatment Program Director at TRUMAN VA. He earned a Ph.D. in Clinical Health Psychology from the University of North Texas and completed a NIDA-

funded postdoctoral fellowship in behavioral pharmacology at the University of Vermont. Dr. Rogers is interested in behavioral models of substance use/abuse and treatment, with particular emphasis on clinical applications such as contingency management interventions.

Scott Sandstedt, Ph.D. (University of Missouri, 2004) is a psychologist in the administrative position of Clinical Manager for the BHS. He also serves as a Clinical Assistant Professor in the Department of Psychiatry and Neurology, University of Missouri. Clinical interests include facilitating patient access to appropriate Mental Health care, the treatment of addictions and dual diagnosis, assessment, and crisis intervention. Research interests include examining the efficacy of motivational interviewing and other cognitive-behavioral interventions within the treatment of substance abuse, smoking cessation, and dual diagnosis. Leisure interests include jogging, hiking, photography, and cooking and eating BBQ.

Postdoctoral Fellowship "Research Mentor" Faculty

Nelson Cowan, Ph.D., Curators Professor, and Director, Brian Imaging Center, Department of Psychological Sciences, University of Missouri. Dr. Cowan received his B.S. from the University of Michigan, 1973 and his Ph.D. from the University of Wisconsin, 1980. He attended a Postdoctoral Fellowship at NYU, 1981-82 and is currently Curators' Professor. Dr. Cowan has served as associate editor for two journals, has published 4 books, 44 book chapters and over 150 articles in peer reviewed journals. **Research Interests:** Working memory; How much can be held in working memory; How the amount in working memory can be measured; The role of selective attention in working memory; Life span development of working memory.

Janet Farmer, PhD, ABPP, Professor, Department of Child Health, University of Missouri School of Medicine, Professor, Department of Health Psychology, and Director of Academic Programs at the Thompson Center for Autism and Neurodevelopmental Disorders at the University of Missouri Columbia. Dr. Farmer received her bachelor's degree from the University of Kansas and her doctorate in clinical psychology from the University of Missouri. She also completed her internship and post-doctoral fellowship at the University of Missouri, where she specialized in working with children and adults with chronic health conditions and disabilities. In 1991, she joined the faculty of the MU Department of Physical Medicine and Rehabilitation and the Department of Child Health in the School of Medicine. In 2001, Farmer participated in the development of the MU Department of Health Psychology in the School of Health Professions. She has earned a diploma in rehabilitation psychology from the American Board of Professional Psychology and is a fellow of the American Psychological Association. She was appointed to the Missouri Commission on

Autism in 2008 and re-appointed by Governor Jay Nixon in April 2009. Dr. Farmer has received grant funding from the Robert Wood Johnson Foundation, the National Institute on Disability and Rehabilitation Research, National Institutes of Health/National Institute on Deafness and other Communication Disorders, the federal Maternal and Child Health Bureau, the Office for the Advancement of Telehealth and the Missouri Foundation for Health. She is also serving as associate editor from 2006-11 of the *Journal of Rehabilitation Psychology*. **Research Interests:** Children with chronic health conditions and disabilities, including autism; Interventions that promote healthy child development and improve each family's quality of life, through advances in health service delivery and public policy.

Kris Hagglund PhD, ABPP, Professor of Health Psychology, Professor Public Affairs; Associate Dean of the School of Health Professions and Director of the Master of Public Health program, University of Missouri. Dr. Hagglund was a 2000-2001 Robert Wood Johnson Health Policy Fellow in the Washington, D.C. office of Senator Tom Harkin (D-IA), where he worked principally for the U.S. Senate Health, Education, Labor, and Pensions Committee on legislation addressing patients' rights, mental health parity, rural health care, the health professions workforce, community health centers, and the National Health Service Corps. Dr. Hagglund was President of the Division of Rehabilitation Psychology of the American Psychological Association in 2003-2004. He was a member of the Institute of Medicine's 2005-2006 Committee on Improving the Disability Decision Process. **Research Interests:** Dr. Hagglund has published 58 peer-reviewed articles and 11 book chapters addressing health policy, disability, and rehabilitation. His current projects include a contract with Health Literacy Missouri to improve health literacy in the state. His recent publications address health policies and services for persons with traumatic brain injury, financing and delivery of personal assistant services, health and rehabilitation policy, and the effect of new media on health care. In 2006, he co-edited the book *Handbook of Applied Disability and Rehabilitation Research* with Allen Heinemann, PhD. His previous research explored access to health care for persons with arthritis and community integration among persons with spinal cord injury. He was the Principal Investigator of the Missouri Model Spinal Cord Injury System from 1995 to 2004.

Kristen M. Hawley, Ph.D., Assistant Professor, Department of Psychological Sciences, University of Missouri. Dr. Hawley earned her bachelor's degree from the University of Missouri and her M.A. and Ph.D. from the University of California, Los Angeles. Her graduate work at UCLA focused on practice-based interventions research and she completed postdoctoral training in youth mental health services research at San Diego State University, San Diego Children's Hospital and the NIMH-funded Child and Adolescent Services Research Center. **Research Interests:** Youth Mental Health Services and Interventions: moderators of treatment engagement and outcome, therapeutic change processes, core components of effective interventions; Dissemination

and Implementation of Evidence-Based Practices: provider training and application of research-supported assessment and treatment, streamlining and enhancing research-supported therapies for clinical practice

John G. Kerns, Ph.D., Associate Professor, Director, Cognitive and Emotional Control Laboratory, Department of Psychological Sciences, University of Missouri.

Dr. Kerns received his B. S. Psychology, Summa Cum Laude, at the University of Dayton in 1993 and his Ph.D. in Clinical Psychology, from the University of Illinois at Urbana-Champaign in 2001. He completed a Postdoctoral Fellowship, University of Pittsburgh, Department of Psychiatry from 2001-2003 in Clinical Cognitive Neuroscience. **Research Interests:** The psychological and neural basis of cognitive and emotional control and their role in the development of schizophrenia (including fMRI studies) and its symptoms (e.g., disorganized speech, negative symptoms). Treatment of cognitive and neural deficits in schizophrenia.

Rebecca Johnson, Ph.D., Dr. Rebecca Johnson, Ph.D, RN, FAAN, is the Millsap Professor of Gerontological Nursing and Public Policy at the MU Sinclair School of Nursing, an associate professor in the Department of Veterinary Medicine and Surgery, in the College of Veterinary Medicine, and is Director of the Research Center on Human Animal Interaction (ReCHAI). Dr. Johnson's gerontological research focuses on housing transitions and ways to promote healthy physical activity among older adults. She is widely known for her research on relocation of older adults. Her work in the area of the health benefits of human-companion animal interaction aim to facilitate well-being for humans and animals. She is the incoming President of the International Association of Human Animal Interaction Organizations, and serves on the Executive Boards of the Delta Society (the premier source for training and registration of "Pet Partner" teams, and the International Society for Anthrozoology (ISAZ). In 2009 ReCHAI hosted the 18th Annual ISAZ Conference and the 1st ReCHAI Human Animal Interaction Conference. In 2000, in conjunction with VET ONE, an organization dedicated to promoting the human/animal bond, she joined a delegation to meet with the U.S. Surgeon General David Satcher to acquaint him with research on the role of animals in promoting human health and wellbeing. Johnson joined the University of Missouri faculty in August 1999. Dr. Johnson is currently grant funded to examine the impact of Veterans training shelter dogs as service animals.

Matthew Martens, Ph.D., Dr. Martens graduated from the University of Missouri in 2002. Since then, he has had faculty appointments at two Counseling Psychology programs, the University at Albany-SUNY and the University of Memphis before joining the faculty at Missouri in the fall of 2009. Dr. Martens' primary research interest is in the area of health psychology, particularly addictive behaviors. Over the past several years most of his work has involved testing the effectiveness of various Motivational Interviewing-based brief

interventions aimed at reducing heavy drinking among college students. He has received funding as either a PI or Co-PI from agencies such as the National Institute of Health (NIH), US Department of Education, Substance Abuse and Mental Health Services Administration, and the Alcohol Beverage Medical Research Foundation to support these efforts. He also continues study topics in the substance abuse area such as protective behavioral strategies, drinking motives, and personality-related risks. He currently has a grant from NIH where he is examining the effectiveness of a brief behavioral intervention aimed at reducing heavy drinking among at-risk college students. Dr. Martens is also collaborating with VA faculty to examine interventions for Veterans in treatment through the Substance Abuse Treatment Program at the TRUMAN VA.

Kenneth J Sher, Ph.D., Curators Professor, and Director, Alcohol, Health, and Behavior Laboratory, (funded by NIAAA), Department of Psychological Sciences, University of Missouri. Dr. Sher has established an inspiring international reputation as a premier authority in the area of drug and alcohol abuse research, making contributions that will forever change the way researchers approach the subject. He is unique among clinical psychologists in being equally comfortable with behavior genetic, psychophysiological, neuropsychological and psychosocial methods and models. Dr. Sher was appointed Curators' Professor of Psychological Services at the University of Missouri in 2000, was the Middlebush Professor of Psychology from 1997-2000 and received the Chancellor's Award for outstanding faculty research and creativity in the behavioral sciences in 1992. **Research Interests:** Dr. Sher has published approximately 170 scholarly publications and more than 130 articles in the premier journals in his field. He is the recipient of numerous federal grants, including the prestigious MERIT award, for a total of more than \$13 million. His research has been federally funded without interruption since 1983. He recently received the American Psychological Association's Division on Addictions Distinguished Scientific Contributions Award. This peer-nominated award recognizes Sher for his wide-ranging research during the past two decades. The award considers the whole body of Dr. Sher's research, teaching and service. The first major theme in Dr. Sher's research dealt with individual differences in the effects of alcohol. Another theme was understanding the risk/protection mechanisms involved in intergenerational transmission of alcoholism. He has also studied alcohol-related comorbidity (e.g., alcohol dependence and anxiety disorders; Most recently, with the goal of understanding the use of alcohol and its disorders over the lifespan of an individual.

Cheryl Shigaki, Ph.D., Associate Professor, Department of Health Psychology, School of Health Professions, University of Missouri. Dr. Shigaki completed her undergraduate work at the University of South Carolina. She completed her doctorate at the University of Florida – Gainesville, in the Clinical and Health Psychology program. Dr. Shigaki completed a two-year postdoctoral fellowship in neuropsychology and rehabilitation psychology in the Department of Health Psychology at the University of Missouri. Dr. Shigaki's

current research program is focused on stroke recovery and rehabilitation. She works with MUs Rehabilitation Neurosciences Laboratory group. Dr. Shigaki is the PI for the Stroke and Hand study, which looks at compensatory forced hand use and associated neural plasticity following stroke.

Timothy Trull, Ph.D., Professor, and Director, Personality and Emotion Laboratory, Co-Director, DBT Program, Department of Psychological Sciences, University of Missouri. Dr. Trull received his B.A. in 1982, from Baylor University, Waco, Texas and his Ph.D. in Clinical Psychology in 1988, from the University of Kentucky, Lexington.

Research Interests: diagnosis and classification of mental disorders, personality disorders (particularly borderline personality disorder), substance use disorders, psychometrics and clinical assessment, the relationship between personality and psychopathology, professional issues in

Trainees

2014-2015 Fellowship Class

Nicole Hofman, Ph.D.

Hampton VA Medical Center Internship

University of South Dakota

Amy Poindexter, Ph.D.

Truman Medical Center-Kansas City Internship

University of Missouri-Kansas City

Laura R. Walker, Ph.D.

Missouri Health Sciences Consortium Internship

Ball State University

2013-2014 Fellowship Class

Ashley Smith, Ph.D.

Missouri Health Sciences Consortium Internship

University of Missouri, Columbia Missouri

Meredith Slish, Ph.D.

Missouri Health Sciences Consortium Internship

University of Oklahoma

2012-2013 Fellowship Class

Tamara Woods, Ph.D.

Iowa City VA Medical Center Internship

University of Iowa, Iowa City, Iowa

Phil Dang, Psy.D.

Colorado Mental Health Institute at Fort Logan Internship

University of La Verne, La Verne, California

2011-2012 Fellowship Class

Nathan Frise, Ph.D.

Iowa City VA Medical Center Internship

George Fox University, Newburg Oregon

Jocelyn Abanes, J.D., Psy.D.

Oklahoma University Health Sciences Center/VAMC Internship

Argosy University Hawaii, Honolulu

2010-2011 Fellowship Class

Leigh Ann Randa, Ph.D.

Iowa City VA Medical Center Internship

Seattle Pacific University, Seattle, Washington

2009-2010 Fellowship Class

Laura Gambone, Ph.D.

PTSD/SUD Specialist, Alaska Veteran's Healthcare System

Cincinnati VA Medical Center Internship

University of South Carolina, Columbia, South Carolina

2008-2009 Fellowship Class

Emily Crawford, Ph.D

Clinical Staff Psychologist, Burrell Behavioral Health Center

Graduate Faculty, Stephens College, Columbia, Missouri

Missouri Health Sciences Internship Consortium;

Miami University, Oxford, Ohio