Clinical Psychology Postdoctoral Residency
Emphasis on Health Psychology and Interprofessional Training

2019 – 2020

Corporal Michael J. Crescenz
VA Medical Center
Psychology Residency Program
3900 Woodland Avenue
Philadelphia, Pennsylvania 19104
Clinical Psychology Postdoctoral Residency
Emphasis on Health Psychology and Interprofessional Training

Corporal Michael J. Crescenz Veterans Affairs Medical Center
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Accreditation Status
The fellowship is accredited by the Commission on Accreditation (CoA) of the American Psychological Association.

Application & Selection Procedures

Eligibility
All applicants to the postdoctoral residency at the Corporal Michael J. Crescenz VAMC must have a doctoral degree in Clinical or Counseling Psychology from an APA-accredited program or an APA-accredited re-specialization training program in Clinical or Counseling Psychology. An emphasis in health or community psychology is preferred, but not required. Applicants must also have completed an internship program accredited by the APA Commission on Accreditation or have completed a VA-sponsored internship (including a new VA internship that is not yet APA accredited). Please see the psychology training website for a detailed explanation of eligibility requirements for all VA residencies: https://www.psychologytraining.va.gov/eligibility.asp.

Please note: The selected applicant must have successfully defended his/her dissertation and completed all other degree requirements before they begin the residency program.

To apply to the residency program, the following materials are needed:
1. A cover letter that describes your personal training goals and how this residency program may meet those goals. In your letter, please describe your previous educational, research, and clinical experience relevant to this residency and your career goals.

2. A copy of your curriculum vitae.

Prior to the Uniform Notification Date (February 25, 2019), please also submit the following materials:
1. Two (2) letters of recommendation from faculty members or clinical supervisors who are familiar with your clinical and research work.
2. A letter or email from the graduate program Training Director specifying current dissertation status and the projected timeline for completing all requirements for the doctoral degree (if the degree has already been completed, please submit the certificate or similar official documentation).

3. A letter or email from the internship Training Director indicating good standing in the internship program and expected completion date (if the internship is already completed, please submit certificate or similar official documentation).

4. One (1) official graduate transcript from each graduate program attended.

**Submission:**

Please submit all materials electronically directly to Dr. Helms at Rebecca.Helms@va.gov.
The application deadline is **January 5, 2019**.

*Selection and Interview Process:* Written application materials will be reviewed upon receipt by all relevant psychology training faculty. Top candidates will be invited for interviews that will take place in February. In-person interviews are preferred, but telephone interviews can be arranged if needed. Candidates for interview will be selected based on several criteria, including meeting the requirements described above, clinical experiences, and applicant fit with our residency program. Please be sure to indicate daytime and evening telephone numbers in your application materials so you can be reached to schedule an interview.

Upon acceptance to the residency program, Human Resources Management Service (HRMS) will begin the process of employment. The applicants are required to complete an OF 612 (Optional Application for Federal Employment) and a physical exam. The appointment to a residency position is contingent upon the individual's application being cleared through a national data bank to screen for possible ethical and legal violations. The applicant must pass employment screenings through the Department of Health and Human Services, Office of Inspector General, List of Excluded Individuals and the National Practitioner Health Care Integrity and Protection Data Bank, as well as a fingerprint check, before the appointment becomes official. An applicant must also pass the pre-employment physical completed by a VA hospital before he or she can begin the residency. The applicant must also complete Online Cyber Security Awareness Training, Privacy Training, and sign the Rules of Behavior before arriving for orientation.

*Program Structure*

The Postdoctoral Residency is a one year, full-time training experience. The resident will spend approximately 50% of her/his time devoted to the direct provision of clinical services. In addition, the resident will receive at least 2 hours of supervision/week. VA Residents take an active role in developing their own training plans and in adjusting them to meet their needs and emerging interests. Residents receive experiential and didactic training in interprofessional team-based care and evidence-based care in health psychology/behavioral medicine. Apart from this central training, the resident will function in different capacities determined by the core emphasis. The Interprofessional Curriculum will include: a) Clinical Experiences, i.e. experiential learning; b) Didactics; c) Research; and d) other training experiences.

Veterans often present with multiple chronic health concerns requiring more comprehensive and coordinated team based care. For all Veterans, attention to wellness and chronic
disease/condition management and risk reduction is central. The resident will spend the majority of clinical time functioning in the role of a psychologist on various interdisciplinary healthcare teams and on the interdisciplinary pain team, where the resident will provide assessment, intervention, and “curbside” consultation with interdisciplinary providers.

The postdoctoral residency will consist of a combination of year-long required assignments, briefer experiences, and a program development project based on the resident’s interests. Strong emphasis will be placed on promoting skills in working collaboratively with other disciplines, to foster a strong professional identity in the role of a health psychologist, and to encourage continuing professional growth.

Training Experiences

1. Health Promotion Disease Prevention (HPDP): The resident will receive specialty training in behavioral medicine interventions delivered in individual and group format as well as interdisciplinary collaboration. Example of individual referrals could include coping with/adjustment to chronic illness, insomnia, needle phobia, and IBS, to name a few. The resident will facilitate a weight management group and, based on interest, could also participate in either pre-diabetes educational group, tinnitus management group, or develop a group based on current facility and specialty needs. The resident will assume a leadership role on the HPDP team by triaging program referrals (coping with chronic illness, weight management, insomnia, functional GI disorders), coordinating and facilitating HPDP group supervision, providing tiered supervision to psychology intern(s) and/or practicum student(s), and consultation to various interdisciplinary treatment teams (e.g., oncology, MOVE, Tobacco).

   a. In collaboration with the Radiation and Hematology Oncology specialty clinics, the resident may assist with distress screening for newly diagnosed patients. The main role of the Resident in this clinic will be to manage oncology referrals and coordinate treatment for patients at various stages of cancer survivorship. The resident will consult with specialty oncology clinics and develop and provide treatments via group, individual format, and colocation services.

   b. The resident will serve as the behavioral health coordinator of the Women’s MOVE! Intense Class. This is a 16-week, multidisciplinary group designed exclusively for Women looking to manage their weight. The group is co-led with a member of the Nutrition Physical Therapy teams. Although topics and facilitators rotate weekly, the resident will serve as a constant presence to assist with setting, group guidelines, and group cohesion, as well as the primary facilitator for several of the weeks.

2. Interdisciplinary Pain Management: The resident will have specialty training in the treatment of chronic pain. Employing a biopsychosocial model of understanding and a mind-body approach to treatment strongly grounded in CBT, the resident will see patients for comprehensive psychological pain intakes, complete joint intakes for new patients with a nurse practitioner, provide individual and group behavioral pain management interventions, and assist in triaging chronic pain referrals to Pain Psychology. Resident will also see Veterans who are being treated both within Pain Clinic and oncology clinic.

   Additionally, the resident will have the opportunity to co-facilitate and supervise Whole Health for Chronic Pain, an eight-week, comprehensive class on the biopsychosocial approach to pain management that incorporates didactic presentations from numerous specialties, including pain medicine, nutrition, physical/occupational therapy, psychology, and pharmacy. The resident will also facilitate an ACT for Chronic Pain group. The resident will be involved in interdisciplinary
pain team meetings and will be expected to contribute to treatment planning for veterans. Communication and collaboration with primary care and mental health providers is emphasized to ensure continuity of care and foster a comprehensive approach to chronic pain management.

3. Supervision: Weekly individual coupled with impromptu supervision, as needed, will be provided. During the first quarter, Resident will be provided Group Supervision as a member of the Pain Psychology team, focused on triage and treatment planning discussions.

**Training Teams**

Health Promotion/Disease Prevention (HPDP): HPDP is a VA-initiative dedicated to reducing the burden of chronic disease by targeting unhealthy behaviors (e.g., diet, exercise, tobacco and alcohol use, chronic stress) and promoting patient empowerment through self-management behaviors. As such, interdisciplinary collaborators include dietitians, nurses, and physicians in primary care and specialty clinic settings. HPDP services are interdisciplinary in nature and highly integrated within Primary Care’s Patient Aligned Care Team (PACT) and throughout various specialty clinics such as the hematology/oncology, ALS, and Infectious Diseases teams. The HPDP team plays a pivotal role in specialized prevention programs such as Smoking Cessation, MOVE! Weight Management, Diabetes Wellness and multiple medical center wide promotional activities (e.g., Wellness Fairs, Great American Smoke-Out) to facilitate a shift towards the delivery of more proactive health care.

Pain Management Clinic: The Pain Clinic team is comprised of MDs, NPs, PharmDs, RNs, PAs, LPNs, and Pain Psychologists working together at all levels of pain management, from first-line primary care to tertiary specialty intervention. The Pain Clinic is also a vibrant training ground for this postdoctoral position as well as medical residents, PA students, and addiction residents. It is also a resource for professional colleagues to reach out for consultation on challenging cases. Thus, this setting offers unique specialty training in treatment of chronic pain by working closely with the Pain Psychologist and all members of the Pain Clinic interdisciplinary team.

**Research /Program Development**

The amount of protected time allotted for research or program development will depend on the resident’s training goals and will be discussed at the beginning of the year with the residents’ supervisors. Residents will be encouraged to present their work in local, regional, and/or national educational settings, or submit work for publication as appropriate. Residents will also attend the twice monthly MIRECC Writing Meeting, led by Dr. Hank Kranzler, Professor of Psychiatry, University of Pennsylvania. Residents will be required to present an end of year project that highlights their interests and work throughout the residency; this project can be a scholarly manuscript, poster, grant application, or program development project.

**Supervising Practicum Students and Interns**

As part of their professional development, all residents will have the opportunity to supervise an intern and/or practicum student under the supervision of a staff psychologist. Additionally, residents will attend the supervisor development didactic series.
**Didactics**

Psychology Postdoctoral Residents (General): The postdoctoral residents will have a minimum of 2 hours per week of didactic training including the residency seminar, Supervisor Development, MIRECC writing group, and additional didactics related to the resident’s area of emphasis.

- **Residency seminar** (1 hr/wk): would include topics such as interprofessional functioning, provision of telemental health, geriatrics, diversity, integrating research into clinical practice and professional development.

- **Supervisor development** (1 hr/mo): attended by residents and staff psychologists for discussion of common supervision issues and articles relevant to supervisor development.

- **MIRECC Writing Group** (2 hrs/mo): a multidisciplinary meeting (mainly psychiatry and psychology but open to other disciplines) of trainees, junior investigators, and senior investigators that has a goal of helping all attendees advance their writing projects through review and feedback of each project.

Postdoctoral Resident with an Emphasis on Health Psychology and Interprofessional Training:

- **Health Psychology Journal Club** (1 hr/mo): Includes journal article selections in health psychology topics such as smoking cessation, weight management, chronic pain, and others.

- **CBT for Chronic Pain** – 2-day training: The CBT-CP model approaches chronic pain holistically, helping the Veteran appropriately address the social, psychological, and physical impacts of chronic pain. The emphasis is on increasing Veteran’s self-efficacy around the self-management of pain with the adoption of adaptive expectations and coping skills. While relieving pain intensity is always desirable, the focus of CBT-CP is to improve overall functioning and quality of life.

- **Motivational Interviewing for PACT Teams**: This specific Motivational Interviewing training program has been designed to increase the Motivational Interviewing skills of clinical members of PACT teams, including PACT teamlets and members of the extended team at each VA facility. Training includes two 2-hour workshops on MI that have been designed for PACT teamlet clinical staff. The first workshop focuses on core elements of MI including MI “Spirit”, Principles and Processes as well as the Core MI skills and techniques associated with the first 2 MI Processes = Engaging and Focusing. Part II will provide an opportunity for participants’ to reflect on their experience applying MI skills after Part I, briefly review Engaging and Focusing, and move on to Processes 3 and 4, Evoking and Planning.

Other Potential Didactics Include:

- **Evidence Based Treatment trainings**: required for interns, encouraged for Postdoctoral residents. At least 3 or more evidence based treatments training are given during the training year, each about 2 days. Offerings may include CBT for depression, Prolonged Exposure, CBT for Insomnia, CBT for Chronic Pain, Motivational Interviewing and ACT. Delivered by CMC VAMC psychologists who are also national trainers.

- **Cultural Competence/Military Culture brown bag** (2 hours/month): required for interns, encouraged for post-doctoral residents. Begins the year with a focus on military culture
as an introduction to the VA and working with veterans, and then progresses throughout the year to focus on different aspects of diversity including racial and ethnic diversity and sexual orientation.

- **Assessment brown bag** (1 hour/month at the VA and optional 1 hour/month at the University of Pennsylvania): required for interns, encouraged for post-doctoral residents. Discussion of assessment issues, related scientific literature and complex assessment cases. Monthly attendance at University of Pennsylvania’s neuropsychology seminar is optional.

- **Grand Rounds of BHS/CMC VAMC** (1 hour/month): Invited speaker series on topics of interest for interprofessional staff. Optional.

- **Grand Rounds University of Pennsylvania Department of Psychiatry** (1 hour/month): optional. Invited speaker series for Psychiatry staff and residents open to Psychology residents and Interns.

- **BHS Case Conference** (1 hour/month): optional. Interprofessional case conference.

- **SCAN-ECHO Pain Management Conference** (Offered 2x weekly) - discussing multiple topics related to VA national efforts toward the treatment of chronic pain, working with challenging cases, and specialty topics.

- **VISN 4 Pain Management and CIH Conference** (1x/month) – discussing multiple topics related to VISN efforts towards managing opioid medications, non-pharmacological chronic pain management, working with challenging cases, and specialty topics.

### Residency Objectives
The aim and objective of this residency is to develop advanced competence in the following areas specifically as it pertains to health psychology and interprofessional care:

- Psychological assessment, diagnosis, and intervention.
- Consultation, program development and evaluation, supervision, and/or teaching.
- Scholarly inquiry and research development.
- Organization, management, and administration issues.
- Professional conduct and ethics.
- Cultural and individual diversity.

### Specific Residency Competencies
As evidenced by evaluations, treatment notes, supervisory discussions, treatment decisions and interventions, Residents will demonstrate advanced proficiency in:

- Choosing and applying evidence-based treatments for clinical intervention with the outpatient medical population (e.g., CBT, MI/ motivational enhancement, problem-
solving treatment, mindfulness based stress reduction, acceptance and commitment therapy, brief treatments).

- Knowledge of the biopsychosocial approach to understanding health and illness including adequate knowledge of common health conditions (e.g., diabetes, obesity, hypertension, chronic pain), their relationship to psychological and behavioral concerns, and knowledge of commonly used medications.

- Specialized treatment interventions (e.g., smoking cessation, CBT-insomnia, weight management, CBT for chronic pain, relaxation training, and harm reduction approaches to substance abuse).

- Clinical time management both for session length and treatment duration according to the demands and characteristics of the clinical setting.

- Performing clinical interventions in group modalities (e.g., psycho-education, self-management, time limited psychotherapeutic).

- Conducting brief (“same-day triage”) and as needed, full intakes, appropriate to the outpatient medical setting.

- Choosing brief assessment instruments relevant to presenting problems within the outpatient medical setting.

- Knowledge of the research literature related to health and pain psychology. This will include models of health related behavior change, a Veteran’s experience of health care, functional competencies within health psychology, and professionalism as a Clinical Health Psychologist.

- Completing research or performance improvement project.

- Consulting with medical staff and contributing a mental health perspective through participation in team meetings, “curbside” consultation with medical providers, and conjoint patient contacts with medical providers.

- Ability to promote healthy interprofessional team functioning including the ability to assess team dynamics, coach teams to improve functioning, and negotiate resolution of conflicts between clinicians, staff, patients, and systems.

- Providing supervisory feedback to a more junior trainee.

- Sensitivity to multicultural and ethical concerns.

**Psychology Setting**

The CMCVAMC is part of the VISN 4 VA Healthcare Network, serving Veterans in the city of Philadelphia, as well as Southeastern Pennsylvania and Southern New Jersey. In addition, the CMCVAMC manages several community based outpatient clinics (CBOCs), which include clinics in Camden, NJ; Burlington County, NJ; Gloucester County, NJ; Center City Philadelphia; and Horsham, PA. The CMCVAMC currently has over 90,000 veterans from diverse backgrounds and cultures enrolled for healthcare. With a full complement of inpatient and outpatient treatment programs, VA Centers of Excellence, and specialty programs designed to meet the healthcare needs of Veterans, the Crescenz Veterans Affairs Medical Center (CMCVAMC) delivers an outstanding educational experience across a variety of professions including psychology.
CMCVAMC Psychology is organized as a section within Behavioral Health. Our Acting Chief Psychologist is Johanna Klaus, PhD. The Psychology Service has grown in the past ten years from 12 to about 50 doctoral level psychologists. Psychologists serve in a wide range of clinical and research settings including: Primary Care-Mental Health Integrated Care team, the VA Home Based Primary Care Program, the Mental Health Clinic (MHC), the Inpatient Psychiatric Unit, the Community Living Center (CLC), the Psychosocial Rehabilitation and Recovery Center (PRRC), the Mental Illness Research, Education and Clinical Center (MIRECC), the Center of Excellence for Substance Abuse Treatment and Education (CESATE), the Center for Health Equity, Research and Promotion (CHERP), the Addictions Recovery Unit (ARU), the Opioid Treatment Program (OTP), the Post-deployment Clinic (PDC), the Sleep Clinic, the Polytrauma Team, and in three community-based outpatient clinics. As members of interdisciplinary teams, psychologists work to operationalize the Patient Centered Medical Home and to facilitate the integration of mental health service into Veteran’s healthcare delivery. Furthermore, psychologists are also involved in clinical research projects in collaboration with members of other disciplines throughout the Medical Center.

CMCVAMC has recruited and retained highly qualified psychologists from a wide variety of theoretical orientations, many from VA training programs, and many of whom specialize in evidence based treatments. Staff include a national VA trainer and consultant in Prolonged Exposure (PE) who is currently the Evidence Based Treatment Coordinator, a trainer in Cognitive Behavioral Therapy (CBT) from the University of Pennsylvania who leads the CBT training program, along with national experts in Motivational Interviewing, Cognitive-Behavioral Treatment for Insomnia, and Integrated Behavioral Couples Therapy. There is little staff turnover, assuring continuity of patient care and programs.

The CMCVAMC has an extensive history of excellence in health profession education and a long history of graduate level psychology training for post-doctoral Residents in the Mental Illness Education, Research, and Clinical Center and for practicum students. The Psychology Internship began in 2011, and was accredited by APA in March of 2013 until 2020. In 2014, psychology training was further expanded to include two postdoctoral residency positions with an emphasis in Interprofessional Mental Health. Our five VA Centers of Excellence and numerous clinical research projects offer an atmosphere of dynamic exchange between rigorous academic research and clinical applications.

Furthermore, CMCVAMC is adjacent to and closely affiliated with the University of Pennsylvania whose psychiatry residents, medical, and nursing students rotate through CMCVAMC Behavioral Health. CMCVAMC psychologists are integral to the education of these trainees. Psychology trainees have access to didactic training in conjunction with the University of Pennsylvania’s Psychiatry and Psychology clinical training programs and have opportunities for professional collaboration on clinical and research endeavors with University-affiliated faculty. Most CMCVAMC psychologists have University of Pennsylvania faculty appointments.