

**MIRECC Advanced Fellowship in  
Mental Illness Research and Treatment**

**VA Greater Los Angeles Healthcare System**

**Training Handbook**

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# Introduction

## Purpose and goals of fellowship training

The purpose of the Postdoctoral Fellowship program is to train professional psychologists for eventual leadership roles in clinical research, treatment, and education -- particularly in Medical Center and academic settings. Training at the VA Greater Los Angeles Healthcare Center is designed to develop psychologists who can independently carry out programmatic clinical research, develop grant writing skills, effectively teach and train other professionals, provide expert patient care, and design innovative clinical services. These capabilities are best achieved through advanced training in clinical research complemented by intensive experience in a special area of emphasis.

The postdoctoral fellow is expected to function at a more advanced level than the pre-doctoral intern, and to assume progressively more responsibility over the course of the postdoctoral fellowship. Psychology fellows can expect to develop advanced knowledge and skills in conducting clinical research, assessment and intervention, teaching, and administration. Moreover, they can expect continued professional development, including further consolidation of professional identity, increased confidence in assuming an advanced level of professional responsibility, and advanced knowledge and skills in ethics, professional and legal standards, and in culturally competent practice. The postdoctoral fellowship also serves as preparation for licensure and independent functioning as a practicing psychologist.

## Guiding principles

The fellowship program has been developed to meet the guidelines established by the American Psychological Association and the VA Guidelines for Postdoctoral Programs. It ascribes to the principles articulated by the Ann Arbor Conference on Postdoctoral Education and Training in Psychology. Questions regarding accreditation can be directed to:

Office of Program Consultation and Accreditation  
American Psychological Association  
750 First Street, NE  
Washington, DC 20002  
(202) 336-5979

## Purpose of the Training Handbook

This handbook presents the policies and procedures of the Psychology Postdoctoral Fellowship Program at the MIRECC within the VA Greater Los Angeles Healthcare Center. It is the product of past experience and is designed to facilitate training by providing guidelines. Unforeseen circumstances may call for exceptions to or changes in guidelines.

# Administrative Information

## The fellowship calendar

The Fellowship in Advanced Mental Health Research and Treatment is full-time for two years (with possible renewal for a third) beginning between July 1 and September 30 (negotiable). Fellows are given credit for 2080 hours of training for a full year (a total of 4160 hours over the two-year Fellowship period), thereby fulfilling the licensing requirements of most states.

## Tour of duty

Like other Medical Center employees, fellows work a 40-hour week, with a standard tour of duty from 8:00am to 4:30pm, with 30 minutes for lunch, resulting in an 8-hour day. Some flexibility to the standard tour of duty can be negotiated with the Co-Directors. Requests for non-standard schedules must be made in writing to the Training Co-Directors and approved before implementation.

## Leave

Fellows accrue 13 days of vacation and 13 days of sick leave, in addition to 10 Federal holidays. Except in an emergency, planned leave time must first be negotiated with the Co-Directors, taking into consideration clinical research responsibilities, and subsequently, submitted electronically for recording purposes and formal approval. Per VA policy, leave may be used only after it is accrued; advanced leave may be authorized by the Co-Directors in exceptional circumstances. Authorized absence (leave which does not count against vacation) may be granted for attendance at conferences, workshops and professional meetings, in the same amount as other Medical Center staff.

# Administrative Organization

## Training Directors

The Training Co-Directors are responsible for the overall functioning of the psychology postdoctoral fellowship training program. They are responsible for the day-to-day operations of the fellowship training program, and when not directly involved in direct oversight of a Fellow, they are responsible for the oversight of training activities provided by other MIRECC supervisors and mentors. The Training Directors are selected by department heads within the MIRECC Unit.

## Training Committee (TC)

Training policies and procedures are formulated by the Training Committee. Its task is to serve the needs and goals of the postdoctoral fellows with respect to training issues.

1. The Training Committee consists of seven voting members: four psychologists (the two co-directors plus two other supervisors, two psychiatrists (the overall training director and the co-director of the psychiatry fellowship program), and one fellow.
  - Both Training Co-Directors are permanent members who sequence agenda and co-chair the TC meetings.
  - At the inception of the training year, one postdoctoral fellow is selected by their respective peers for a one-year term.
  - The minutes of the meeting are distributed to all attendees, as well as the other fellows, and retained for at least five years.
2. If any Training Committee member experiences a conflict of interest in a decision to be made by the TC, the member is expected to bring this to the attention of the committee, and to abstain from voting on the issue. If the issue involved will require protracted consideration (more than two meetings), an alternate with voting privileges may be temporarily appointed by one of the Co-Directors to maintain diversity of opinion and ensure fair representation. The alternate member will be appointed prior to any hearing and deliberation, so that they may give fair and informed consideration to the issue.
3. The Training Committee may meet as a whole to consider issues that pertain to all levels of training. More frequently, the TC may meet in subcommittee to consider issues that pertain solely to the postdoctoral fellowship program.
4. The Training Committee meets as a whole or in subcommittee at least quarterly, and at the call of the Co-Directors when there are specific agenda to be considered.
5. Any supervisor or fellow may request that the Training Committee consider an issue. Such requests should be submitted in writing to the Co-Directors. The Co-Directors will inform the person of the date the issue will be considered. Supervisors and fellows who propose agenda items are invited to attend meetings when their agenda items are to be discussed.
6. Decisions made by the Training Committee are based on information obtained from supervisors, fellows, and/or other involved parties. This information may be requested by memo, questionnaire, interview, or open discussion. Decisions that change the policies of the program will be written and distributed as additions or corrections to this handbook.
7. Policy decisions will be made by the Training Committee as a whole, or relevant subcommittees,

only when a quorum of voting members is present. Preferably, such decisions will reflect a consensus of the committee, but if this is not possible, a simple majority will prevail.

## **Training program committees**

In addition to serving on the Training Committee, fellows are asked to assist in the development and administration of the training program by participating in other committees and activities.

- **Selection committee**  
Fellows may be asked to participate in the selection of future fellows, as a means of participating in the fellowship program and learning skills in personnel selection.

# Resident Selection and Internship/Academic Requirements

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 must be completed prior to the start of the fellowship year. Persons with a Ph.D. in another area of psychology who meet the APA criteria for re-specialization training in Clinical or Counseling Psychology are also eligible. Applicants must be U.S. citizens (per VA policy). As an equal opportunity training program, the fellowship strongly encourages applications from all qualified candidates, regardless of racial, ethnic, sexual orientation, disability, or other minority status.

Selection is based on applicants' prior academic and clinical preparation, fit with our program, and compatibility with our training objectives (see description of Selection Process in Appendix D). Successful applicants to our program have significant prior training (including education, clinical exposure, and research work) in the area of emphasis they choose to pursue on Fellowship. They discuss this prior training and their more general fit with our Fellowship program in their application. Together, these steps ensure that Fellows are well prepared academically and have an excellent baseline of clinical and research training before embarking on the rigorous training offered here. They also ensure that Fellows training goals are in line with the programmatic offerings of the Fellowship prior to admission. Because our training program emphasizes a scientist-practitioner model in a public sector setting, we prefer applicants who have experience working with complex clinical populations, clinical experience in the area of emphasis, and a history of clinical research productivity. In the end, our goal is to select Fellows who have the potential to develop as leaders in clinical research, clinical practice and education.

# Learning Experiences and Resources

## Orientation

During the early phase of training, fellows are introduced to the structure, policies and procedures of the Fellowship Program in a series of meetings with their primary supervisor. In addition, they receive orientation to important aspects of the VA health care system and the VA Greater Los Angeles Healthcare System in day-long training required of all new employees. This training includes a review of fair employment practices and EEO procedures, employee rights and grievance procedures, sexual harassment policies, patient and employee safety, universal precautions, provider ethics, human resources policies and procedures, and employee assistance resources.

## Staff meetings

Fellows are encouraged to participate as members of the MIRECC's professional community in a variety of ways. Fellows are expected to attend the weekly lab meetings attended by the fellowship co-directors, supervisors, junior faculty, other fellows, and research staff. Staff meetings provide fellows with an opportunity to learn about pragmatic issues of professional relationships in a complex organization, and the kinds of political considerations that affect working conditions.

## Library and information resources

The VA Greater Los Angeles Healthcare System library is a valuable resource to fellows and staff. The library contains a large selection of current materials and periodicals and provides extensive assistance for information searches and inter-library loans. The VAGLAHS offers state-of-the-art computer resources, Internet access, and computer-support personnel to assist in research activities.

## Professional meetings

Fellows are encouraged to attend professional meetings and conventions of their choice as a means of participating in the larger professional world, and of pursuing individual professional interests. Authorized absence may be granted for such activities in an amount comparable to other VA Psychology staff. Absences for such meetings must be negotiated with the supervisor and submitted electronically to the timekeeper for formal approval.

## Supervision

Fellows should receive at least two-hours per week of individual, face-to-face, regularly scheduled supervision, conducted by licensed psychologists or UCLA faculty with joint VA affiliations with expertise in the areas being supervised. Fellows should receive supervision from one primary supervisor during each training year; Fellows should also receive ongoing supervision from other mentors involved in their training, but to a lesser extent than their primary supervisor. In addition, fellows should participate in at least two additional hours per week of other structured learning activities, which may include group supervision, case review, didactics, seminars, co-therapy and/or formal coursework. Supervision provided should be relevant to the professional services conducted by the fellow, including supervision of research, direct patient care, teaching, and consultation.

## Individualized learning contracts

Fellowship training is outlined in an individualized learning contract. This is a written learning plan for each year of the fellowship that is developed by the fellow in conjunction with the primary supervisor. The contract contains proposed learning experiences in clinical research, assessment, patient treatment or rehabilitation, teaching, and professional development during each year of the fellowship. The contract allows fellows to tailor their learning experiences to best meet their individual training needs, while also providing sufficient structure to help ensure successful completion of training goals.



## **Preparation for licensure**

Fellows are encouraged to prepare for the Examination for the Professional Practice of Psychology (EPPP) during the fellowship period. Fellows should consult with the Training Co-Directors should they have questions about the licensing process, or the required experience prerequisite to sit for the written examination for licensure in California.

## **Professional activities outside the VA**

Professional activities and services conducted in Fellowship placements by postdoctoral fellows are covered by the Federal Tort Claims Act, which provides professional liability coverage. All other activities involving patient contact, consultation or other professional services occurring outside the auspices of the VA Puget Sound are outside the purview of this institution. Any fellow engaging in such activity on his/her own is responsible for any action that may be taken against him/her in connection with this activity. The fellow is expected to inform the Training Co-Directors of any such activities.

## **Early completion**

One complete training year entails 2080 hours (or 4160 for a two-year fellowship). Graduation from the Fellowship program requires completion of this time commitment as well as successful attainment of the program competencies (described in detail in the Learning Outcomes and Evaluation sections of this handbook). Upon fulfillment of these requirements, a Certificate of Completion is awarded, verifying the fellow's completion of a postdoctoral training program.

# Expected Learning Outcomes

The purpose of the Postdoctoral Fellowship program is to train professional psychologists for eventual leadership roles in clinical research -- particularly in Medical Center and academic settings. This eventual expected outcome rests on three primary goals of the fellowship program: 1) the development of advanced skills in clinical research, 2) development of advanced skills in clinical assessment and treatment intervention, and 3) the foundational and functional competencies of professional psychology. In this regard, fellows should demonstrate an advanced level of skill and knowledge in the following areas by the completion of the postdoctoral program, as measured by supervisors' evaluations of the specific competencies:

## Goal 1. Scholarly Inquiry

**Competencies:** Fellows should demonstrate the ability to formulate testable and meaningful research hypotheses; to design and carry out studies to test these hypotheses; to present research findings in professional forums; to publish data resulting from independent or collaborative work; to participate as a contributing member of a research group; and/or to prepare a grant proposal for submission. Fellows should demonstrate knowledge of, and sensitivity to, ethical, legal, and cultural issues in the conduct of research. Fellows should demonstrate knowledge of the current scientific literature in their area of emphasis, and provide clinical service that is consistent with this body of knowledge.

## Goal 2. Intervention skills

**Competencies:** Fellows should demonstrate the ability to work effectively with diverse populations and implement psychosocial and other therapeutic interventions appropriate for individuals with serious mental illness. Fellows should also be able to provide clinical leadership when working with junior providers.

## Goal 3. Assessment skills

**Competencies:** Fellows should be able to appropriately assess and evaluate a broad range of patients, including those with complex presentations and complicated co-morbidities. Selection and use of assessment tools should be appropriate to the clinical needs of the patient and the clinical setting and responsive to the needs of other professionals. Assessment should be practiced in a culturally competent manner, and conducted with an awareness of current ethical and professional standards. The fellow may also demonstrate advanced skill in assessment by providing consultation and/or instruction in this area to other providers.

## Goal 4. Scientific presentation and teaching skills

**Competencies:** Fellows should demonstrate the ability to give formal scientific presentations at local and national conferences; to teach skills to junior postdoctoral fellows and research staff, and allied health trainees in VA medical center training settings. Fellows may demonstrate emerging mentoring skills by providing consultation to junior postdoctoral fellows. Fellows should demonstrate emerging skills in supervision, as well as knowledge of, and sensitivity to, ethical, legal, and cultural issues in providing supervision.

## Goal 5. Professional, ethical, and legal skills

**Competencies:** Fellows should demonstrate continued growth in professional development and identity over the postdoctoral fellowship. In accordance with their advanced training, fellows should assume increasing professional responsibility for conducting independent clinical research. They should demonstrate advanced knowledge in ethical, legal and cultural issues related to all of the above objectives, and conduct themselves in accordance with these principles and with current professional standards. Fellows should participate in the larger professional community, by involvement in professional and scientific organizations. They should demonstrate commitment to continued self-education and life-long learning, and contribute to the larger community by making themselves available as an educational resource to other professionals.

## **Goal 6. Cultural and individual diversity skills**

**Competencies:** Fellows should demonstrate awareness and appreciation of cultural and individual differences and attain cultural competence regarding the formulation of research designs, and the implementation thereof, involving veterans representing a broad spectrum of diversity.

## **Goal 7. Confidence and professional identity skills**

**Competencies:** Fellows should develop a strong professional identity, confidence, and demeanor commensurate with their entry level status in the profession.

# Evaluation of Fellows

## Overview

A variety of evaluation methods are used in the training program. Because feedback and instruction are most valuable when immediate and specific, supervisors and fellows are expected to exchange feedback routinely as a normal part of their daily interactions. In addition, written evaluations are completed at the mid-point and end of each fellowship year. Evaluations focus on the learning goals identified by each fellow in their individualized learning contract, as well as on the fundamental skills and abilities required of a professional psychologist. Evaluations are discussed between the fellow and the supervisor and may be modified by their consensus before being finalized. Fellowship staff meets at least quarterly to discuss fellows' progress, for the purpose of identifying additional supports and resources that may assist fellows' in attaining their training goals. In addition, fellows are asked to critique themselves in accordance with their own goals and to provide both verbal and written evaluation of placements and supervisors.

## Fellow self-evaluation

Fellows are asked to evaluate themselves as a regular part of the evaluation process. At the start of the year, fellows meet individually with the emphasis area Directors to assess their prior training and to identify strengths and weaknesses that would impact their Fellowship experience. These are subsequently addressed in the individualized learning contract that each fellow constructs with the assistance of Fellowship faculty. A written copy is provided to faculty working with the fellow, and a copy is placed in the fellow's training file.

As the Fellowship period progresses, fellows are periodically asked to evaluate their progress in terms of meeting their original training goals, to modify their goals as appropriate, and to plan for attaining these goals during the remainder of the Fellowship period (updated annually). Forms are provided to fellows to aid with these tasks. A copy of the completed form is placed in the fellow's training file.

## Informal evaluations

At the three-month point in the first year of the Fellow's postdoctoral fellowship period, supervisors are expected to exchange feedback with fellows regarding supervision, the fellow's performance, and other aspects of the overall learning experience. The Fellowship Co-Directors collect these informal faculty and fellow evaluations and present them at a meeting of the Fellowship Training Committee. The primary purpose of this meeting is to ensure that any difficulties or special training needs are identified at an early point in the fellowship so that remedial recommendations or assistance can be offered in a timely manner. The meeting also provides an opportunity for on-going evaluation and improvement of the program. Should the fellowship faculty develop any feedback for a fellow as a result of the review, it is the responsibility of the fellow's primary supervisor or mentor to discuss such feedback with them. The Fellowship Training Committee acts in an advisory capacity to the Fellowship Co-Directors and the Fellow's primary mentor.

## Formal evaluations

Fellows receive formal written evaluations of their progress on clinical research and general professional competencies two times each year (mid-point and end of year). The Clinical Research and General Professional Competency Evaluation form (Appendix A within this handbook) uses a competency rating designed to be flexible and adaptable to the various settings in which training takes place (e.g., not all skills can be evaluated in all settings) and mindful of variation in Fellows' baseline skills. A letter based rating scale is used to evaluate progress on clinical research and general professional competencies (W= progressing well; P = problem; C = competency attained). Additionally, summative feedback is provided regarding the fellow's individualized learning goals. Evaluation is expected to be as specific as possible, and communicated in a respectful manner. The supervisor and fellow discuss the formal evaluation and both sign

it before it is placed in the fellow's training file.

In the rare instance where a rating of “P” emerges, remediation plans are implemented to correct the problem following the procedures described under, “Problem Identification and Resolution,” pp.150-153. For year 1, ratings of W, C, or I are acceptable levels of professional competency. For year 2, fellows should be at the level of C or I on all areas unless there are circumstances warranting a rating of W in a selected area, e.g., began CBT training later in the fellowship program when that option became available to the fellow.

Clinical research evaluations, once completed, discussed, and signed by the Fellow, primary supervisor and the Fellowship Co-Directors are kept in the Fellows’ folder in a locked filing cabinet in the office of the Fellowship Co-Director (Dr. Kern).

## **Minimum Requirements for Successful Completion of the MIRECC Fellowship Training Program**

1. Minimum of 2 publications (in press or published) by completion of program; one must be as first author.
2. Regular presentations of research at professional conferences (1 per year)
3. Successful attainment (via formal evaluation with supervisor) of skill area competencies:
  - Completion of requisite hours
  - Scores of “W” (Progressing Well) or higher on all General Clinical Competency and Emphasis Area skills evaluated in year 1; Scores of “C” (Competency Achieved) on all major relevant skills evaluated by completion of year 2 (“I”s are also acceptable; may also have a W level on minor skill areas or later added skills).
4. Successful completion of required didactics (via formal evaluation by supervisor)
5. Maintenance of consistently professional and ethical conduct in professional setting throughout duration of training (via formal evaluation by primary supervisor)

### Additional Suggested Benchmarks:

1. Licensure (or at least successful completion of EPPP)
  2. Job market preparation (successful submission of grant, completion of job search)
- Finally, our expectations of Fellows (and staff) extend beyond performance and achievement. We expect Fellows to consistently behave in a fully professional and ethical manner. It goes without saying that Fellows are expected to adhere to all relevant VAGLAHS policies regarding the diagnosis, treatment, and clinical management of patients and the appropriate conduct of research. Fellows are to ensure patient privacy and confidentiality by adhering to HIPAA guidelines and VAGLAHS policies regarding the secure storage of clinical research data, etc.

# Program Evaluation

A variety of evaluation methods are used to elicit feedback about the training program. Keeping in mind that feedback is most useful when it is immediate and specific, fellows are encouraged to provide input and feedback as a routine part of the supervision process in their weekly meetings with their primary supervisor. Additional program evaluation procedures are used to formalize this regular information exchange.

## Informal Evaluation Procedures

Informal evaluation procedures are based upon the routine verbal exchange of feedback. These informal evaluations are expected to occur regularly, and are scheduled and structured twice during each fellowship year.

### First Fellowship Year

- After completing the first month, each fellow meets with their primary supervisor and the Fellowship Co-Directors to discuss their adjustment to the fellowship, as well as any concerns or problems.
- After completing the third month, fellows exchange feedback with their primary supervisor and other mentors. This exchange should include feedback regarding the training program, including barriers or hindrances that impact the fellow's training experience and progress. Any comments or suggestions regarding program quality are to be forwarded to the Fellowship Co-Directors.
- The Fellowship Training Committee, which includes the Co-Directors, meets quarterly to discuss professional and programmatic issues that may result in any changes to the program.
- Each fellow meets with the Training Co-Directors and their primary supervisor during the last week of the first fellowship year to review the fellowship year and offer comments and suggestions for improving the training program.

### Second Fellowship Year

- After completing the first month of the second fellowship year, each fellow meets with their primary supervisor and the Fellowship Co-Directors to discuss their progress towards meeting fellowship goals.
- After completing the third month, fellows exchange feedback with their primary supervisor and other mentors about their progress. This exchange should include feedback about barriers or hindrances that impact the fellow's training experience and progress. Concerns or issues are forwarded to the Fellowship Co-Directors.
- The Fellowship Training Committee, which includes the Co-Directors, meets quarterly to discuss professional and programmatic issues that may result in any changes to the program. In Year 2, the primary focus is on the fellow's progress towards meeting fellowship goals.
- At close of the fellowship, each fellow meets with the Training Co-Directors and their primary supervisor during the last week to review the quality of fellowship training overall and offer comments and suggestions for improving specific aspects of the training program.

## Formal Evaluation Procedures

In addition to the informal exchange of feedback at the three-month points (described above for Years 1 and 2), fellows complete a written evaluation of the fellowship experience at the mid-point and end of each fellowship year. The evaluation form is structured to elicit specific feedback about the quality of the learning and training experience(s) (see Appendix C within this Handbook). These evaluations are discussed and signed by the fellow and supervisor prior to being submitted to the Training Co-Directors who keep a copy as a means of monitoring program quality. Placement evaluations are intended to provide direct feedback to supervisors, and are made available to current and future fellows as a source of information about learning experiences.

# Problem Identification and Resolution

## Trainee grievances

We believe that most problems are best resolved through face-to-face interaction between fellow and supervisor (or other staff), as part of the on-going working relationship. Fellows are encouraged to first discuss any problems or concerns with their direct supervisor. In turn, supervisors are expected to be receptive to complaints, attempt to develop a solution with the fellow, and to seek appropriate consultation. If fellow-faculty discussions do not produce a satisfactory resolution of the concern, a number of additional steps are available to the fellow.

### 1. Informal mediation

Either party may request a Training Co-Director to act as a mediator, or to help in selecting a mediator who is agreeable to both the fellow and the supervisor. Such mediation may facilitate a satisfactory resolution through continued discussion. Alternatively, mediation may result in recommended changes to the learning environment, or a recommendation that the fellow change their primary supervisor/mentor (or make some other alteration in their learning contract) in order to maximize their learning experience. Fellows may also initiate a request to change their primary supervisor/mentor, following the procedures described in a previous section. Changes in supervisor/mentor must be reviewed and approved by the Training Committee.

### 2. Formal grievances

In the event that informal avenues of resolution are not successful, or in the event of a serious grievance, the fellow may initiate a formal grievance process by sending a written request for intervention to the Training Co-Directors and overall Fellowship Director.

- a. The Training Co-Directors will notify the overall Fellowship Director of the grievance, and call a meeting of the Training Committee to review the complaint. The fellow and faculty will be notified of the date of the review and given the opportunity to provide the Committee with any information regarding the grievance.
- b. Based upon a review of the grievance and any relevant information, the Training Committee will determine the course of action that best promotes the fellow's training experience. This may include recommended changes in clinical research responsibilities, a change in supervisory assignment, or a change in assigned clinical responsibilities.
- c. The fellow will be informed in writing of the Training Committee's decision, and asked to indicate whether they accept or dispute the decision. If the fellow accepts the decision, the recommendations will be implemented. If the fellow disagrees with the decision, they may appeal to the overall Fellowship Director, who as a member of the Training Committee will be familiar with the facts of the grievance review. The overall Fellowship Director will render the appeal decision, which will be communicated to all involved parties and to the Training Committee.
- d. In the event that the grievance involves any member of the Training Committee (including one of the Training Co-Directors), that member will recuse himself or herself from serving on the Training Committee due to a conflict of interest. A grievance regarding a Training Co-Director may be submitted directly to the overall Fellowship Director for review and resolution in consultation with the Training Committee.
- e. Any findings resulting from a review of a grievance that involves unethical, inappropriate, or unlawful staff behavior will be submitted to the overall Fellowship Director for appropriate personnel action.



# Probation and termination procedures

## 1. Insufficient competence

The fellowship program aims to develop advanced professional competence. Conceivably, a fellow could be seen as lacking the competence for eventual independent practice due to a serious deficit in skill or knowledge, or due to problematic behaviors that significantly impact their professional functioning. In such cases, the training program will help fellows identify these areas and provide remedial experiences or recommended resources in an effort to improve the fellow's performance to a satisfactory degree. Conceivably, the problem identified may be of sufficient seriousness that the fellow would not get credit for the fellowship unless that problem was remedied.

Should this ever be a concern, the problem must be brought to the attention of the Training Co-Directors at the earliest opportunity in order to allow the maximum time for remedial efforts. The Training Co-Directors will inform the fellow of staff concern, and call a meeting of the Training Committee. The fellow and involved fellowship faculty will be invited to attend and encouraged to provide any information relevant to the concern.

- a. A fellow identified as having a serious deficit or problem will be placed on probationary status by the Training Committee, should the Training Committee determine that the deficit or problem is serious enough that it could prevent the fellow from fulfilling the exit criteria, and thereby, not receive credit for the fellowship.
- b. The Training Committee may require the fellow to participate in particular learning experiences or may issue guidelines for the type of experiences the fellow should undertake in order to remedy such a deficit.
- c. The fellow, in concert with the fellow's supervisor(s), the Training Co-Directors, and the Training Committee will produce a learning contract specifying the kinds of knowledge, skills and/or behavior that are necessary for the fellow to develop in order to remedy the identified problem. The learning contract will be submitted to the Training Committee for formal approval.
- d. Once a fellow has been placed on probation and a remedial learning contract has been written and adopted, the fellow is to begin working towards meeting the standards and completing the goals set forth in the contract immediately upon its formal approval. The changes may recommend a new supervisor/mentor if there is consensus that a new supervisor will assist the fellow's remediation. The new supervisor will be carefully chosen by the Training Committee and the fellow to provide a professional relationship that is conducive to working on the identified problems. Alternatively, the fellow and supervisor may agree that it would be to the fellow's benefit to remain with the current supervisor. If so, both may petition the Training Committee to maintain the current assignment.
- e. The fellow and the supervisor will report to the Training Committee on a regular basis, as specified in the contract (but not less than every two months) regarding the fellow's progress.
- f. The fellow may request that a representative of their choosing be invited to attend and participate as a non-voting member in any meetings of the Training Committee that involve discussion of the fellow and his/her status in the fellowship.
- g. The fellow may be removed from probationary status by a majority vote of the Training Committee when the fellow's progress in resolving the problem(s) specified in the contract is sufficient. Removal from probationary status indicates that the fellow's performance is at the appropriate level to receive credit for the fellowship.

- h. If the fellow is not making progress, or, if it becomes apparent that it will not be possible for the fellow to receive credit for the fellowship, the Training Committee will so inform the fellow at the earliest opportunity.
- i. The decision for credit or no credit for a fellow on probation is made by a majority vote of the Training Committee. The Training Committee vote will be based on all available data, with particular attention to the fellow's fulfillment of the learning contract.
- j. A fellow may appeal the Training Committee's decision to the overall Fellowship Director. The overall Fellowship Director will render the appeal decision, which will be communicated to all involved parties, and to the Training Committee. Should the overall Fellowship Director be recused from deliberation due to a conflict of interest, one of the Psychology Training Co-Directors will render the appeal decision.
- k. These procedures are not intended to prevent a fellow from pursuing an appeal of the Training Committee decision under any other applicable mechanisms available to VA employees, including EEO, or under the mechanisms of any relevant professional organization, including APA or APPIC.

## **2. Illegal or unethical behavior**

Illegal or unethical conduct by a fellow should be brought to the attention of the Training Co-Directors in writing. Any person who observes such behavior, whether staff or fellow, has the responsibility to report the incident.

- The Training Co-Directors, the supervisor, and the fellow may address infractions of a very minor nature. A written record of the complaint and action become a permanent part of the fellow's training file.
- Any significant infraction or repeated minor infractions must be documented in writing and submitted to the Training Co-Directors, who will notify the fellow of the complaint. Per the procedures described above, the Training Co-Directors will call a meeting of the Training Committee to review the concerns, after providing notification to all involved parties. All involved parties will be encouraged to submit any relevant information that bears on the issue, and invited to attend the Training Committee meeting(s).
- In the case of illegal or unethical behavior in the performance of patient care duties, the Training Co-Directors may seek advisement from appropriate Medical Center resources, including Risk Management and/or District Counsel.
- Following a careful review of the case, the Training Committee may recommend no action, probation or dismissal of the fellow. Recommendation of a probationary period or termination shall include the notice, hearing and appeal procedures described in the above section on the problematic trainee. A violation of the probationary contract would necessitate the termination of the fellow's appointment at VA Greater Los Angeles Healthcare System (MIRECC Unit).

# Review and Revision of the Training Handbook

The Training Handbook is reviewed and edited by the Training Co-Directors prior to the start of each training year. Staff and current trainees are invited to recommend changes or revisions. Any revisions made at this time, or earlier during the year, are to be incorporated into the body of the handbook to accurately reflect program policy and procedure. The revised handbook is to be distributed to all staff members and incoming fellows.

# APPENDIX A

## Supervisor's Evaluation of Postdoctoral Fellow Clinical Research and General Professional Competencies

**Program:** VA Advanced Fellowship Program in Mental Illness Research and Treatment

**Site:** MIRECC VA Greater Los Angeles Health Care System

**Supervisor:** \_\_\_\_\_ **Fellow:** \_\_\_\_\_

**Training Setting:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Year:** First \_\_\_\_\_ Second \_\_\_\_\_ **Evaluation:** Mid \_\_\_\_\_ Final \_\_\_\_\_

Please review the Exit Competencies and rate each according to the scale below. You may add site-specific items to the rating form in the blank spaces provided at the end of each section.

- P** Fellow is having a problem in this area
- W** Fellow is progressing well in this area (performing at level consistent with point in training)
- C** Fellow has developed competency in this area (performing at level of entry-level psychologist, no supervision needed, knows when to consult)
- I** Inadequate opportunity to assess, but no problem noted

To pass, fellows must have ratings of "C" on every relevant item by the end of the two-year fellowship, (with the exception of those that are rated "I"; "W" is permissible for skills added later in the fellowship). To obtain a "C" rating, within at least the last month of the fellowship, the fellow should consistently display the specific quality in every clinical area and/or know when he/she needs to consult. Please rate those skills that are not relevant as "I" ("Inadequate opportunity to rate."). Such ratings will not be held against fellows in considering whether they have passed.

Please discuss all of these ratings with the fellow, along with his or her feedback about your supervision. In the feedback, it is important to give specific examples if you have concerns about the fellow's progress. It is also important to give clear examples of what you think the fellow does well. Please use the feedback session to plan what you would like the fellow to emphasize in his/her continued training. As you discuss feedback, **please keep in mind that an overarching goal of the program is to help the fellow develop a sense of their own professional identity as a psychologist, so we urge you to include areas of focus that may help them in that process.**

Please also indicate below which modalities you have used to obtain information for making your evaluations. Check all that are applicable:

- |   |  |
|---|--|
| <input type="checkbox"/> Fellow's self-report of interview/therapy sessions<br><input type="checkbox"/> Audiotape review of interview/therapy sessions<br><input type="checkbox"/> Videotape review of interview/therapy sessions<br><input type="checkbox"/> Direct, live observation of interview/therapy sessions<br><input type="checkbox"/> Individual supervision sessions<br><input type="checkbox"/> Group supervision sessions | <input type="checkbox"/> Observation during team meetings<br><input type="checkbox"/> Co-therapy conducted with fellow<br><input type="checkbox"/> Review of written material<br><input type="checkbox"/> Consultation w/ team members/other staff<br><input type="checkbox"/> Role play or response to vignettes<br><input type="checkbox"/> Other: _____ |
|---|--|

## SCHOLARLY INQUIRY

	First Year Mid-Eval	First Year Final-Eval	Second Year Mid-Eval	Second Year Final-Eval
<b>Integrating Science and Practice</b>				
1. Articulates a personal theoretical or conceptual perspective that is comprehensive and flexible, and demonstrates understanding of a scientist-practitioner approach within that perspective.				
2. Demonstrates a systematic, hypothesis-driven approach to conceptualization of treatment for specific mental health problems.				
3. Able to review the literature to identify empirically supported treatments for Veterans' mental health problems.				
4. Able to identify the strengths and weaknesses of empirically supported treatments when applied to different mental health problems.				
<b>Conducting Clinically Informed Research</b>				
5. Proposes realistic goals for research or educational activities for the year.				
6. Demonstrates independent, critical thinking as applied broadly to the conduct of clinical research.				
7. Able to critically review literature in areas of clinical interest, identify current gaps in knowledge, and formulate testable research hypotheses to address these gaps.				
8. Able to formulate methods of testing hypotheses or addressing questions using experimental, quasi-experimental, and or qualitative methodology.				
9. Able to independently carry out and/or provide oversight for all activities necessary to conduct a small scale research project.				
10. Able to organize and analyze clinical research data using sound analytic approaches; able to identify and appropriately address potential confounds to interpretation of findings.				
<b>Technical Skills</b>				
11. Able to clearly and effectively summarize clinical research ideas via both written and oral modalities.				
12. Works towards developing written skills as they relate to describing research findings in poster presentations at national conferences.				
13. Works towards developing skills in writing manuscripts for submission to peer-review journals or other avenues of dissemination.				
14. Works towards developing skills as a reviewer for manuscripts submitted to peer-review				

journals.				
<b>Grant Writing</b>				
15. Works towards developing skills in grant writing as evidenced by submitting an application for MIRECC pilot funds during the first year of the Fellowship and creating a draft of CDA or other career advancing grant application by end of the Fellowship				

**PSYCHOSOCIAL TREATMENT**

	First Year Mid-Eval	First Year Final-Eval	Second Year Mid-Eval	Second Year Final-Eval
<b>Intervention</b>				
1. Demonstrates appropriate empathy, is responsive, and elicits cooperation from SMI individuals served by the VA.				
2. Attends to the process and content of a patient's interpersonal interactions.				
3. Demonstrates ability to effectively implement one or more psychosocial interventions such as social cognition skills training according to fidelity standards.				

**ASSESSMENT**

	First Year Mid-Eval	First Year Final-Eval	Second Year Mid-Eval	Second Year Final-Eval
<b>Diagnostic</b>				
1. Conducts thorough diagnostic interviews using the SCID (patient edition) on Veterans presenting with complex characteristics affecting diagnostic determination.				
2. Adheres to and maintains fidelity standards maintained by the MIRECC in administration of the SCID.				
3. Presents clear case overviews; able to identify key criteria that need to be reconciled to determine a diagnosis.				
4. Able to identify and acknowledge areas of uncertainty on certain diagnostic criteria and show an appreciation for how such uncertainty may affect the confidence level associated with a particular diagnostic formulation.				
<b>Symptom</b>				
5. Conducts structured symptom interviews on Veterans presenting with complex symptom constellation, mixed levels of severity, and/or				

difficult to elicit symptoms.				
6. Adheres to and maintains MIRECC fidelity standards in administration of symptom rating measures (BPRS, SANS, CAINS).				
<b>Cognitive</b>				
7. Conducts cognitive or social cognitive assessments on Veterans with a wide range of deficits and behavioral problems.				
8. Interprets test results at individual and group level with a critical perspective				
9. Attains and maintains MIRECC fidelity standards for administration and scoring.				

**SCIENTIFIC PRESENTATIONS/TEACHING**

	First Year Mid-Eval	First Year Final-Eval	Second Year Mid-Eval	Second Year Final-Eval
<b>Scientific Presentations</b>				
1. Able to clearly describe in writing research background, methodology, and summary of findings for conference presentations.				
2. Able to clearly describe in oral presentations clinical research ideas and findings at local meetings and national conferences.				
<b>Teaching</b>				
3. Demonstrates ability to effectively teach colleagues, trainees, and other professionals in areas of expertise.				
4. Attends, presents, and actively participates in Fellowship seminars.				
5. Understands basic supervision concepts and principles, and the ability to understand issues involved in giving and receiving constructive feedback.				

**PROFESSIONAL, ETHICAL, AND LEGAL ISSUES**

	First Year Mid-Eval	First Year Final-Eval	Second Year Mid-Eval	Second Year Final-Eval
1. Demonstrates professional responsibility: on time for appointments, prepared for supervision, meets agreed upon deadlines, follows program procedures, self-directed/able to function independently within the scope of competence.				
2. Shows emotional maturity in professional contexts by tolerating ambiguity/anxiety and considering the views of others, even in charged situations.				
3. Accurately evaluates level of competency and				

considers own limitations in conducting clinical or research activities; knows when level of expertise is exceeded; seeks appropriate consultation.				
4. Responds to consultation and feedback from supervisors and other professionals with constructive action or changes.				
5. Demonstrates knowledge of risks in working with patients with serious mental illness and shows appropriate level of precaution in working with patients in a research setting.				
6. Exercises good judgment as a professional.				
7. Demonstrates development of professional identity as a "Clinical Research Psychologist."				
8. Interacts effectively with other clinical researchers, psychiatrists, trainees, and professionals from other disciplines.				
9. Shows awareness of APA ethical guidelines and ethical issues that arise in professional activities.				
10. Shows ability to think critically about ethical issues.				
11. Overall, demonstrates behavior consistent with APA ethical guidelines.				
12. Demonstrates knowledge and awareness of legal issues pertaining to professional activities as a clinical researcher.				
13. Demonstrates knowledge and skills involved in submitting research proposals and consent materials to the VA IRB for review.				

**CULTURAL AND INDIVIDUAL DIVERSITY**

	First Year Mid-Eval	First Year Final-Eval	Second Year Mid-Eval	Second Year Final-Eval
1. Demonstrates awareness of and acts in accordance with APA Guidelines on Multicultural Education, Training, Research, Practice, and Organizational Change for Psychologists.				
2. Demonstrates knowledge of cultural and other diversity issues and how these relate to clinical treatment and research.				
3. Applies knowledge of cultural and other diversity issues in assessment and intervention.				
4. Applies knowledge of cultural and other diversity issues in supervision and teaching.				
5. Applies knowledge of cultural and other diversity issues in scholarly activities.				



**\*\*Please provide comments about the above rating areas (mid-year evaluation) or a narrative summary of the Fellows performance (final-year evaluation) for each year of participation in the fellowship program:**

I have reviewed all of the evaluation material with (fellow's name) \_\_\_\_\_ on (date) \_\_\_\_\_  
\_\_\_\_\_. We have discussed the fellow's strengths and any areas of expected improvements. We also have reviewed the fellow's ratings of my supervision and the training setting.

**If deficiencies were noted, a plan for performance improvement was generated, which are attached to this document.**

None noted \_\_\_\_\_ Deficiencies noted; document attached \_\_\_\_\_

If deficiencies were noted, the fellow **has** \_\_\_\_\_/**has not** \_\_\_\_\_ passed this area of competency (if you indicate the fellow has not passed, please contact me immediately, as a complex process will need to be initiated regarding the fellow's standing in the program).

\_\_\_\_\_  
Primary supervisor

\_\_\_\_\_  
Fellow

\_\_\_\_\_  
Michael F. Green, Ph.D.  
Co-Director, VA Advanced Fellowship in Mental Illness Research and Treatment

\_\_\_\_\_  
Robert S. Kern, Ph.D.  
Co-Director, VA Advanced Fellowship in Mental Illness Research and Treatment

**APPENDIX B:  
Self-Assessment of General Advanced Practice Competencies**

**Program: Advanced Fellowship in Mental Health Research and Treatment**  
**Site: VA Greater Los Angeles Health Care System (MIRECC), Los Angeles, CA**

Fellow: \_\_\_\_\_

Primary Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

Competency	Prior Experience	Training Needs in this Area
<b>General Advanced Practice Competencies</b>		
1. Assessment, Diagnosis, and Intervention		
2. Consultation, Supervision, and Teaching		
3. Scholarly Inquiry - Conducting Research - Integrating Science and Practice		
4. Organization, Management, Administration, and Program Evaluation		
5. Professional, Ethical, and Legal Issues		
6. Cultural and Individual Diversity		

## APPENDIX C: Postdoctoral Fellow's Program Evaluation

**Program:** VA Advanced Fellowship Program in Mental Illness Research and Treatment

**Site:** MIRECC, VA Greater Los Angeles Health Care System

Fellow: \_\_\_\_\_ Date: \_\_\_\_\_

Evaluation (circle):    Mid (end of 1<sup>st</sup> year)    Final (end of 2<sup>nd</sup> year)

Please rate the degree to which the training program met your needs in the following areas using the scale below:

- 1      Training needs not met**
- 2      Training needs somewhat met**
- 3      Training needs adequately met**
- 4      Training needed exceeded**
- N/A**

Please discuss all of these ratings with your primary supervisor and, if at the end of the year, in your exit interviews with the Fellowship Co-Directors. If you have concerns about any aspects of the program, please give examples. Use the mid-year meeting to help revise your training plan if needed, especially with regard to areas you would like to emphasize in your continued training.

### **PROGRAM STRUCTURE**

	Rating
1. Overall organization of training program.	
2. Workload is challenging but not excessive.	
3. Training plan is meeting goals, expectations, and training needs.	
4. Expectations are clear.	
5. Reactions, concerns, and problems are addressed adequately.	
6. Adequate feedback regarding performance and progress.	
7. Adequate opportunity for skill development.	
8. Sufficient opportunity for input into training needs.	
9. Environment conducive to learning.	
10. Environment conducive to interrelationships among Fellows.	
11. Resources are adequate (e.g., space, computers, supplies).	
12. Treated in a professional manner.	
13. Effective working relationships with support staff.	
14. Adequate support and encouragement provided.	
<b>15. Overall satisfaction with Program Structure</b>	

**FELLOWSHIP DIRECTORS**

	Rating
1. Provided guidance of your postdoctoral program.	
2. Showed interest in and responded to your training needs.	
3. Available when you needed to discuss training needs, problems, questions, etc	
4. Approachable to assist in sensitive matters.	
5. Helped you anticipate professional roles as a psychologist.	
6. Responsive in handling problems that arose.	
7. Effective in communicating expectations of Postdoctoral program.	
<b>8. Overall satisfaction with Fellowship Directors</b>	

**POSTDOCTORAL SEMINAR SERIES AND OTHER DIDACTICS**

	Rating
<b>Professional Development Seminars (V-Tel seminar series)</b>	
1. Topics in professional development seminar series are applicable to one's professional development.	
2. Presenters in seminar series are knowledgeable in topic areas.	
3. Seminars contribute to overall training goals.	
<b>4. Overall satisfaction with Professional Development Seminar series</b>	
<b>Diagnostic Case Conference/Psychosis Seminar/ Other Didactics</b>	
5. Case conferences expanded knowledge of diagnostic formulation.	
6. Opportunity to participate and contribute to discussion in case conferences.	
7. Presenters in psychosis seminar series are knowledgeable in topic areas.	
8. Adequate opportunity to discuss/participate in seminars.	
9. Topics covered in psychosis seminar were sufficiently broad and expanded general knowledge in clinical research in SMI.	
10. Seminars contribute to overall training goals.	
11. Adequate opportunity to attend additional seminars, case conferences, workshops in emphasis area.	

12. Seminar series and case conferences contribute to connection with other Fellows.	
<b>13. Overall satisfaction with Case Conference/Psychosis Seminar</b>	
<b>14. Overall satisfaction with Postdoctoral Seminar Series and other didactics</b>	

### SCHOLARLY INQUIRY

	Rating
<b>Integrating Science and Practice</b>	
16. Opportunity to articulate a personal theoretical or conceptual perspective that is comprehensive and flexible, and to demonstrate understanding of a scientist-practitioner approach within that perspective.	
17. Opportunity available to demonstrating a systematic, hypothesis-driven approach to case conceptualization and treatment.	
18. Opportunity available and guidance provided as it pertains to reviewing the literature to identify empirically supported treatments for clients' problems.	
19. Opportunity to demonstrate when problems are not fully addressed by empirically supported treatments.	
20. Opportunity to incorporate data from the literature into conceptualizations and interventions for complex cases in which empirically supported interventions do not fully address the problems.	
21. Opportunity to integrate current literature, research, and theory in professional activities.	
<b>Clinical Research</b>	
22. Opportunity to develop realistic goals for research or educational activities for the year.	
23. Opportunity to demonstrate one's independent, critical thinking in research or educational projects.	
24. Opportunities to review the literature in an area of clinical interest, identifying current gaps in knowledge, and formulating testable research hypotheses or questions to address these gaps.	
25. Opportunity to formulate methods of testing hypotheses or addressing questions using experimental, quasi-experimental, and or qualitative methodology.	

26. Opportunity to independently carry out or provide oversight for all activities necessary to conduct a small scale research project.	
27. Opportunity to analyze clinical research data.	
<b>Technical Skills</b>	
28. Opportunity to summarize clinical research ideas via both written and oral modalities.	
29. Opportunity to develop written skills as they relate to describing research findings in poster presentations at national conferences.	
30. Opportunity to develop skills in writing manuscripts for submission to peer-review journals or other avenues of dissemination.	
31. Opportunity to develop skills in writing manuscripts for peer-review journals.	
<b>Grant Writing</b>	
32. Opportunity and guidance provided in developing grant writing skills.	
<b>33. Overall satisfaction with training in Scholarly Inquiry</b>	

### **ASSESSMENT AND INTERVENTION**

	Rating
<b>Assessment</b>	
1. Opportunity and training provided in clinical/diagnostic interviewing using the SCID.	
2. Opportunity and training provided in formulation and consideration of differential diagnoses.	
3. Opportunity and training provided to develop and enhance symptom rating skills.	
4. Opportunity to present case presentations of diagnostic interviews during case conference seminar.	
5. Opportunity to evaluate different assessment approaches.	
6. Opportunity to freely identify and acknowledge areas of uncertainty on certain diagnostic criteria.	
7. Opportunity to administer new clinical or cognitive tests or paradigms.	
8. Opportunity to interpret findings from tests administered as part of a research protocol or clinical assessment.	
<b>9. Overall satisfaction with Training in Assessment</b>	
<b>Intervention</b>	
10. Opportunity to work with patients and demonstrate the ability to establish a therapeutic alliance and working relationship.	

11. Opportunity to attend to the process and content of a patient's interpersonal interactions.	
12. Opportunity and training provided on implementing one or more psychosocial interventions such as social cognition skills training according to fidelity standards.	
<b>13. Overall satisfaction with Training in Intervention</b>	

### **SCIENTIFIC PRESENTATIONS / TEACHING**

	Rating
<b>Scientific Presentations</b>	
1. Opportunity and training provided for developing research writing skills as they apply to presenting research background, methodology, and summary of findings for conference presentations.	
2. Opportunity and training provided for developing skills in delivering oral presentations of clinical research findings at local meetings and national conferences.	
<b>3. Overall satisfaction with Training in Scientific Presentations</b>	
<b>Teaching</b>	
6. Opportunity to develop basic supervision skills.	
7. Opportunity to identify one's own needs and goals as a supervisor.	
8. Opportunity to teach colleagues and trainees in areas of expertise.	
<b>9. Overall satisfaction with Training in Scientific Presentations and Teaching</b>	

### **PROFESSIONAL, ETHICAL, AND LEGAL ISSUES**

	Rating
1. Opportunity to demonstrate professional responsibility: e.g., is on time for appointments, documents clinical work in a timely way, is prepared for supervision, follows program procedures, is self-directed and able to function independently within the scope of competence.	
2. Opportunity to demonstrate emotional maturity in professional contexts by tolerating ambiguity and anxiety and considering the views of others, even in charged situations.	
3. Opportunity to evaluate one's own level of competency and limitations when working with patients.	
4. Opportunities to respond to feedback from supervisors and other professionals with constructive action or changes.	
5. Opportunity to demonstrate the knowledge of self and the impact of	

self on the conduct of therapy and other professional activities.	
6. Opportunity to demonstrate ability to exercise sound judgment as a professional.	
7. Opportunity to develop professional identity as a “Psychologist.”	
8. Opportunity to interact with other psychologists, trainees, and professionals from other disciplines.	
9. Opportunity to demonstrate awareness of APA ethical guidelines and ethical issues that arise in professional activities.	
10. Opportunity to demonstrate ability to think critically about ethical issues.	
11. Opportunity to demonstrate behavior consistent with APA ethical guidelines.	
12. Opportunity to demonstrate knowledge and awareness of legal issues pertaining to professional activities as a psychologist.	
<b>13. Overall satisfaction with training in Professional Issues</b>	

**CULTURAL AND INDIVIDUAL DIVERSITY**

	Rating
1. Opportunity to gain knowledge and demonstrate awareness of APA Guidelines on Multicultural Education, Training, Research, Practice, and Organizational Change for Psychologists.	
2. Opportunity for training and gaining knowledge of cultural and other diversity issues and of how these affect needs in the clinical setting.	
3. Opportunity to Incorporate and apply knowledge of cultural and other diversity issues in assessment and intervention.	
4. Opportunity to Incorporate and apply knowledge of cultural and other diversity issues in consultation, supervision, and teaching.	
5. Opportunity to Incorporate and apply knowledge of cultural and other diversity issues in organizational/administrative activities.	
6. Opportunity to Incorporate and apply knowledge of cultural and other diversity issues in scholarly activities.	
<b>7. Overall satisfaction with Training in Ethics and Diversity Issues</b>	



**Comments about any of the above rating areas (expand space if needed or use additional pages):**

\_\_\_\_\_  
Fellow

\_\_\_\_\_  
Date

\_\_\_\_\_  
Primary Supervisor

\_\_\_\_\_  
Robert S. Kern, Ph.D.  
Training Co-Director, VAGLAHS MIRECC

\_\_\_\_\_  
Michael F. Green, Ph.D.  
Training Co-Director, VAGLAHS MIRECC

### Alumni's Ratings of Our Training Program's Effectiveness in Meeting Goals 1-7

Competency	Number Surveyed	Mean Response
Goal 1: Scholarly Inquiry – clinical research in serious mental illness		
Goal 2: Intervention – e.g., social cognition skills training, CBT		
Goal 3: Assessment - SCID and symptom rating measures; cognitive and social cognitive assessment; other specialized areas of assessment (e.g., electrophysiology, fMRI)		
Goal 4: Scientific Presentations/Teaching		
Goal 5: Professional, Ethical, and Legal Issues		
Goal 6: Cultural and Individual Diversity Issues		
Goal 7: Confidence and Professional Identity		

- 1 - Strongly Disagree
- 2 - Disagree
- 3 - Neither Agree nor Disagree
- 4 - Agree
- 5 – Strongly Agree

# Appendix D

## Overview of Fellowship Eligibility and Selection Process

### Eligibility Criteria:

The Psychology Fellowship Program in Mental Illness Research and Treatment offered through the VA Greater Los Angeles Healthcare System MIRECC provides comprehensive, high-quality, trainee-oriented training for clinical and counseling psychology graduates who have received a doctoral degree from an APA-accredited doctoral program and who also have completed an APA-accredited internship. Because of Congressionally-mandated requirements, only United States citizens are eligible for postdoctoral positions. As stated above, we also require that, prior to beginning the postdoctoral experience, Fellows will have attained a high level of accomplishment in generalist training and some focused training in the emphasis area they have selected.

### Selection Process:

1. Applications are received.
2. Applications are reviewed and organized by the Fellowship Co-Director.
3. Approximately the top 50% of applicants (per rating on attached applicant rating form) are offered interviews with the Co-Directors.
4. Applications are shared with the Co-Directors.
5. Applicants are ranked (using attached rating form) by the Co-Directors.
6. Applicant rankings are discussed by the Co-Directors; discrepancies in rankings are discussed and resolved.
7. Top ranked applicant is made an offer.

### Factors guiding our Selection Criteria:

- \*Prior clinical and research training
- \*Evidence of scholarly productivity
- \*Fit with MIRECC areas of emphasis and interests
- \*Demonstrated evidence of potential for independence in clinical research
- \*Interpersonal qualities of applicant

**VA MIRECC ADVANCED FELLOWSHIP PROGRAM  
IN MENTAL ILLNESS RESEARCH AND TREATMENT  
APPLICANT RATING FORM**

Applicant \_\_\_\_\_

Graduate Program \_\_\_\_\_

Reviewer's Name \_\_\_\_\_

**ACADEMIC PROGRAM AND PERFORMANCE**

SUPERIOR    EXCELLENT    ACCEPTABLE    MARGINAL    WEAK

COMMENTS (Areas of clinical interest, research interests, letters of recommendations, research and clinical productivity):

DISSERTATION STATUS:

PUBLICATIONS:

PRESENTATIONS:

**PREVIOUS CLINICAL EXPERIENCE**

SUPERIOR    EXCELLENT    ACCEPTABLE    MARGINAL    WEAK

COMMENTS (Types and amount of clinical experience, theoretical orientation, assessment experience, therapy experience, training settings)

Previous VA experience:

**COMPATIBILITY WITH WEST LA PROGRAM**

SUPERIOR    EXCELLENT    ACCEPTABLE    MARGINAL    WEAK

COMMENTS [Interests compatible with post-doctoral positions (e.g., SMI, PTSD, cognitive rehabilitation), desire to work in a public health and/or VA setting, scientist-practitioner orientation]

Special Factors or Skills: \_\_\_\_\_

Overall rating for written application

SUPERIOR	EXCELLENT	ACCEPTABLE+	ACCEPTABLE	MARGINAL	WEAK
1	2 3	4	5	6	7

**VA MIRECC ADVANCED FELLOWSHIP PROGRAM  
IN MENTAL ILLNESS RESEARCH AND TREATMENT  
APPLICANT INTERVIEW RATING FORM**

APPLICANT \_\_\_\_\_

PROGRAM \_\_\_\_\_

DATE OF INTERVIEW \_\_\_\_\_

INTERVIEWER \_\_\_\_\_

Circle a category **and** a specific number:

DEFINITELY ACCEPT	ACCEPT+	ACCEPTABLE	MARGINAL	WEAK		
1	2	3	4	5	6	7

\_\_\_\_\_  
Strengths:

Areas of relative weakness:

Dissertation status/interest in research/publications:

Readiness for fellowship:

Compatibility with WLA:

Interpersonal Qualities:

General Comments: