REHABILITATION PSYCHOLOGY
POSTDOCTORAL FELLOWSHIP PROGRAM

We expect to offer two positions for the 2019-2021 training years. **WE ARE NOT OFFERING ADMISSION FOR THE 2018 TRAINING YEAR.**

**Accreditation Status**
The Rehabilitation Psychology Postdoctoral Fellowship at the Hunter H. McGuire VA Medical Center is fully accredited by the Commission on Accreditation of the American Psychological Association. The next site visit is scheduled for 2023.

Questions related to the program’s accreditation status should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation
American Psychological Association
750 1st Street, NE
Washington, DC 20002-4242
(202) 336-5979
http://www.apa.org/education/grad/program-accreditation.aspx

**Richmond (McGuire) VA Medical Center**
The McGuire Veterans Affairs Medical Center (VAMC) is a VISN-6 tertiary care referral center located in Richmond, Virginia. The medical center offers a full range of health care services including comprehensive outpatient care to complex inpatient services. The medical center has 427 operating beds, which includes internal medicine, surgery, neurology, physical and rehabilitation medicine, intermediate care, acute and sustaining spinal cord injury, skilled nursing home care, palliative care, and primary and secondary levels of psychology and psychiatric care programs. There are approximately 53,000 veterans enrolled at the RVAMC, including 5,600 female veterans. Nearly 50,000 veteran patients are served each year. The medical center is the host site for a Parkinson's Disease Research, Education and Clinical Center (PADRECC), Level 1 Polytrauma programming, and a Center of Excellence for Seizure Disorders.

The Psychology Section has nearly 50 doctoral level psychology staff with a wide range of specializations and theoretical orientations. In addition to traditional roles in Mental Health, staff psychologists are critical members of the Substance Abuse, PTSD, Polytrauma and TBI, Spinal Cord Injury, Geriatric/Homebased Care, Primary Care/Mental Health, and Behavioral Medicine programs. Our training program includes predoctoral practicum students, an APA-accredited predoctoral psychology internship program, and two postdoctoral fellowship programs.

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The McGuire Veterans Affairs Medical Center (VAMC) enjoys a strong and mutually beneficial affiliation with the Medical College of Virginia, Virginia Commonwealth University (MCV/VCU). Residency and fellowship programs exist in virtually every general and specialty areas of internal medicine, rehabilitation, surgery, psychiatry, psychology, and dentistry. Historically, Rehabilitation Psychology fellows are provided VCU faculty appointments because of their role in training and supervising students.

Polytrauma and Traumatic Brain Injury

The medical center acts as a tertiary care referral center for polytrauma and traumatic brain injury, and has the following programs:

- Polytrauma/Brain Injury Program (BIP)
- Defense and Veterans Brain Injury Center (DVBIC)
- Comprehensive Integrated Inpatient Rehabilitation Program (CIIRP)

The BIP and CIIRP programs are accredited by the Continuing Accreditation of Rehabilitation facilities (CARF). These programs provide interdisciplinary acute care rehabilitation for a range of individuals presenting with general rehabilitation needs, as well as those presenting with complex physical, cognitive, and mental health sequelae of severe and disabling injuries. Within BIP and CIIRP, we serve active duty and veterans referred from military treatment facilities, other Department of Veterans Affairs hospitals, and civilian hospitals.

Training Philosophy and Model

Our program is built upon a practitioner-scholar model of training. We support the view that good clinical practice is based upon understanding and practicing the science of psychology. In turn, the science of psychology is informed by the experience of working with a variety patients and supervisors and professionals from other disciplines. Our approach to training encourages clinical practice that is evidence-based and integrates the current state of scientific knowledge with the complexities of individual patients. While trainees may ultimately develop careers that emphasize one aspect of the model more than the other, our expectation is that clinicians will practice rehabilitation psychology from a scientific basis with clinical sensibility. Our philosophy also encourages trainees to develop the habit of ongoing scholarly involvement within the field. Fellows are encouraged to participate in opportunities such as journal clubs and, if inclined, supported in efforts to contribute to staff research projects. Fellows are expected to spend 25% of their time engaged in research activities.

Rehabilitation psychologists treat and study psychological problems in a variety of social, cultural and treatment settings. We see awareness of and sensitivity to cultural/diversity issues as necessary for responsible professional functioning, and we incorporate diversity training into the didactic component of our program and ongoing supervision. Understanding how these factors interact to influence a patient's desired outcomes is a critical ability for rehabilitation psychologists. Thus, our training focuses on fellows learning to assist patients in defining goals and then achieving optimal psychological, physical, and social functioning within contextual limits. Successful rehabilitation psychology fellows demonstrate the ability to integrate best-practice approaches with unique patient care needs and communicate these plans to patients and other professionals across populations, settings and problem areas.

Fellows will receive specialty training with clinical populations including acquired brain injury and acute neurologic disorders, spinal cord injury, severe physical trauma, and more chronic conditions common in aging populations such as dementia and Parkinson's disease.
Program Aim and Competencies

The objective of this postdoctoral fellowship position is to provide a unique, and relevant, practitioner-scholar training experience in rehabilitation psychology, with special emphasis on polytrauma patients and families. Rehabilitation psychologists treat and study recovery from injury, psychosocial adjustment to disability, and how individual characteristics and environmental factors interact to affect function in daily life. Training in rehabilitation psychology focuses on the practice of assisting individuals with disabilities in achieving optimal psychological, physical, and social functioning. Rehabilitation psychologists exhibit competencies in the following areas, consistent with the standards for board certification in Rehabilitation Psychology by the American Board of Professional Psychology (ABPP-RP): assessment, intervention, consultation, consumer protection, supervision, and research.

We believe that our graduating fellows should be able to provide competent assessment and appropriate interventions, consultation, and supervision in rehabilitation psychology at a level of independent practice (not requiring supervision), as well as exhibit behavior that is consistent with professional standards. Graduating fellows should possess the requisite skills to bring research and clinical literatures to bear on their applied work and to communicate their own scholarly endeavors and interests to other mental health practitioners.

Expected training outcome: Our overarching aim is to prepare fellows for independent practice with a training experience that meets the criteria to pursue board certification in rehabilitation psychology. The fellowship prepares its graduates to become licensed clinical psychologists. Graduates will also be prepared for employment providing direct patient care and/or engaged in program evaluation and improvement in health care settings. Training is consistent with the competencies outlined by ABRP (American Board of Rehabilitation Psychology) and fellows are encouraged to pursue Board Certification as a Rehabilitation Psychologist (ABPP) after graduation. Subsumed under this overarching goal are the following training competencies:

- **Competency 1:** Fellows will develop advanced independent practitioner competence as rehabilitation psychologists.
  
  Objectives for Competency 1: To ensure fellows have the knowledge and skills necessary to function independently as a rehabilitation psychologist. Fellows should demonstrate advanced practice competence in the areas of ethics and applicable state/federal regulatory provisions, consultation and supervision, professional interpersonal interaction, responsibility and self-direction, positive coping strategies, professional identification as a rehabilitation psychologist, an understanding and respect for cultural and other differences, and time management skills.

- **Competency 2:** Fellows will be competent in specified psychological and neuropsychological assessments.
  
  Objectives for Competency 2: To ensure fellows develop interview, chart review and assessment instrument selection skills (including use of objective, self-report, structured interview and neuropsychological screening instruments); to develop fellows’ ability to formulate accurate differential diagnoses; to develop fellows’ ability to generate integrated treatment plans and recommendations which reflect the interdisciplinary needs of patients; to provide clear and concise feedback (verbal and written) to referral sources, other providers, patients and families.

- **Competency 3:** Fellows will be competent in specified psychological interventions.
  
  Objectives for Competency 3: Fellows will be able to formulate case conceptualizations, treatment goals, and choose and deliver appropriate interventions. Fellows will also seek out professional writings as necessary.

- **Competency 4:** Fellows will be competent professionals in providing consultation, supervision, and teaching.
  
  Objectives for Competency 4: Fellows will be able to effectively share their knowledge of rehabilitation psychology with other healthcare professionals, other rehabilitation psychologists, and peers.
• **Competency 5:** Fellows will demonstrate professional behavior consistent with professional standards and ethical guidelines.

  Objectives for Competency 5: Fellows will demonstrate actions consistent with an understanding of professional ethics, state laws of practice, laws related to and including the American Disabilities Act (ADA), awareness and sensitivity to cultural and individual factors, and issue related to patient confidentiality and privacy.

• **Competency 6:** Fellows will be skilled in the interface between science and practice.

  Objectives for Competency 6: Fellows will demonstrate ability to apply scientific knowledge to the local clinical setting, be educated consumers of empirical research, and deliver empirically validated treatments. Fellows are expected to think critically, and to evaluate the findings of research-based knowledge within the context of practical experiences.

**Program Structure**

Postdoctoral psychology fellows time is expected to be dedicated to clinical rotations (75%) and research (25%). Fellows are expected to remain on each rotation for six months, such that each Fellow will participate in four rotations during the two-year fellowship. Two of the rotations are required. The other two 6-month rotations will be selected collaboratively by the fellow and Fellowship Director. One may either be a repeat of one of the mandatory rotations (with the fellow assuming more responsibility than in the first iteration) or a new optional rotation (e.g., Health Psychology). Fellows will identify a research interest at the beginning of the first year of the fellowship. Fellows typically spend around 45 hours per week in training activities during their fellowship.

We are currently exploring partnerships with several community organizations to provide up to 16 weeks of off-site training in related areas. As these partnerships have not yet been formalized at this time, it is not guaranteed that fellows will be able to select these experiences as part of their training, however we hope to be able to offer them.

**Training Experiences**

**Primary Rotations**

1. **TBI and Polytrauma (Required):** The RVAMC acts as a tertiary care referral center for TBI and Polytrauma. Fellows may choose to work in one or more areas of Polytrauma during this rotation. The following programs which offer rich opportunities for rehabilitation psychology fellowship training:

   **Polytrauma Rehabilitation Center (PRC):** Fellows provide neuropsychological and rehabilitation psychology services to inpatients on the 16-bed, CARF-accredited acute inpatient brain injury rehabilitation program. This program admits Veterans with acute combat injuries including TBI. These patients require a comprehensive, interdisciplinary rehabilitation program to optimally treat the complex medical, psychological, rehabilitation, and prosthetic needs of these individuals. Fellows participate in psychotherapeutic and behavioral interventions, neuropsychological evaluations, interdisciplinary rounds and meetings, and family conferences. Fellows participate in providing interventions to patients and family members, who often stay in a special residence on grounds for the duration of the inpatient rehabilitation stay.

   **Polytrauma Transitional Rehabilitation Center (PTRP):** Fellows provide neuropsychological and rehabilitation psychology services to patients in this 10-bed transitional living facility providing rehabilitation services to post-acute brain-injured residents. Residents live and receive a variety of interdisciplinary therapies on-site and in the community with the goal of the resident’s resuming independent living and participation in meaningful roles and life activities. Fellows function as a member of the interdisciplinary team, and participate in psychotherapeutic and behavioral interventions, neuropsychological evaluations, interdisciplinary treatment team meetings, and family conferences.
Polytrauma Network Site (PNS): Fellows provide a variety of psychological and neuropsychological services to outpatients in the polytrauma outpatient program including comprehensive neuropsychological evaluations, treatment planning, psychotherapy, family counseling, suicide and violence risk assessment, as well as provide behavioral health and pain management interventions. PNS patients include a large percentage of OEF/OIF Veterans with complex needs involving post-concussion syndrome (PCS), PTSD, and chronic pain. Fellows participate as part of an interdisciplinary outpatient team involving medical, rehabilitation, and mental health providers assessing and treating PCS, PTSD, pain, and other comorbid problems.

2. **Spinal Cord Injury (Required):** RVAMC is one of twenty-four VAMC specialty care centers for Spinal Cord Injury. This eighty-bed, CARF accredited program provides fellows with knowledge, skills and abilities in the following areas: Understanding of the basic physiologic changes which occur with various levels and degrees of spinal cord injury and the physical medicine, pharmacological options and adaptive/assistive equipment available; Participation on an interdisciplinary rehabilitation team; assessment of personality, emotional, and cognitive functioning in relation to veterans successful participation in rehabilitation; Provision of individual, family and group therapies to address psychosocial, sexual, vocational and pain problems arising from spinal cord injury; and understanding of basic interventions to assist with adopting healthier lifestyles (e.g., smoking cessation, substance use, weight management, recreational activates).

3. **Geriatrics (Optional):** Fellows gain knowledge, skills, and experience in providing direct psychological care to older adult Veterans in outpatient settings. Fellows may also elect to participate in Home-Based Primary Care visits as well. Fellows become knowledgeable about the unique psychological and medical issues associated with aging and with the physical, cognitive, and psychological sequelae of stroke. Emphasis is placed on psychotherapy, diagnostic interviewing, behavior management, brief cognitive evaluation, end of life issues, and factors associated with treatment and care of stroke and/or aging.

4. **Outpatient Diagnostic Testing/Psychological Consultation and Liaison Service (Optional):** Fellows provide neuropsychological assessment services to a diverse range of patients in both inpatient and outpatient settings. Fellows will enhance both brief and comprehensive neuropsychological consultation and evaluation skills while working with a wide variety of neurological and psychological disorders such as various dementias, Parkinson’s disease, stroke, MS, seizure disorders, and referral cases for uncertain diagnosis such as conversion disorder. Additionally, this facility is one of six VA Centers of Excellence providing veterans with access to specialized movement disorders services through the Parkinson’s Disease Research, Education and Clinical Center (PADRECC). Fellows have the opportunity to complete neuropsychological evaluations with PADRECC patients as well as pre-surgical evaluations for Deep Brain Stimulation surgery.

5. **Health Psychology (Optional):** Fellows will enhance knowledge and proficiency in the following areas: Assessment of specific medical patient populations (e.g., patients with chronic pain, psychophysiological disorders, sleep disorders, and being considered for organ transplants); assessment to determine psychological appropriateness of a medical procedure or elective surgery; Assessment of personality, psychopathology, and cognitive processes in relation to health problems; short-term individual psychotherapy; biofeedback and relaxation therapies; Psychological interventions related to illness adjustment issues, non-adherence to medical regimens, and unhealthy behaviors.

Below is a sample of how a fellow might choose to order his or her rotations:

**Fellow 1:**

Rotation 1 - Polytrauma (3 months PRC/3 months PTRP)
Rotation 2 – Geriatrics
Rotation 3 – SCI
Rotation 4 - Outpatient Diagnostic Testing/Psychological Consultation and Liaison Service

**Fellow 2:**

Rotation 1 - SCI
Seminars
Fellows are expected to participate in and lead seminars. Educational opportunities are available both in the RVAMC and through Virginia Commonwealth University (VCU). We have a very active multicultural and diversity education series for trainees at all levels. Numerous Grand Rounds presentations from a variety of medical and psychological disciplines are presented from departments of Physical Medicine and Rehabilitation, Polytrauma, SCI, Mental Health, Geriatrics, and Neurology. Fellows are also asked to lead one or more seminars for the psychology internship program which has a year-long didactic series. Weekly attendance at Physical Medicine and Rehabilitation grand rounds, 1 hour per week, offered jointly through the VA and the medical school affiliate is an expectation for fellows throughout their training. In addition, fellows are expected to attend monthly TBI/Polytrauma grand rounds which is a national presentation conducted by videoteleconference, also 1 hour. There is a recurring SCI, 8 module, 2 hours each didactic series offered by the Chief, SCI program, and a weekly polytrauma didactic series while rotating on these rotations. A specific, monthly didactic dedicated to core competencies in rehabilitation psychology is required, as are monthly case conferences. Fellows spend 2 hours per week in required didactic activities. A comprehensive reading list developed by Division 22 of the American Psychological Association, available at http://www.div22.org/educ_read.php serves as a reference point for outside reading.

Fellows will receive 2 hours of individual supervision per week by their rotation supervisor and Fellowship Director (1 hour each). Between clinical supervision hours and opportunities for didactics fellows will receive at least 4 hours of structured learning activities per week. This supervision can be used to fulfill licensure requirements in the Commonwealth of Virginia.

Requirements for Completion
In order for Fellows to successfully complete the program, they must:

1. Successfully meet or exceed expectations in competencies set based on the goals of the fellowship described above.

2. Not be found to have engaged in any significant ethical transgressions.

Training Program Evaluation: The Fellows will complete formal rating scales after each six months rotation to indicate their satisfaction with the training experiences and outcomes, quality of supervision provided, didactic experiences, research involvement, and facilities and resources available. The Fellowship training director will review the Fellows’ satisfaction ratings and take reasonable steps to address any areas of concern.

Stipend and Benefits
The fellowship program offers a full-time stipend of $43,201 for fellowship year-one, and approximately $45,536 for year-two. Stipend for the second year is approximated because CY-2018 cost-of-living adjustments have yet to be announced. Benefits include: 13 days of vacation, up to 13 days of sick leave, authorized, paid leave for conferences, and health insurance. The Federal Tort Claims Act covers professional liability for services provided as a DVA employee for those trainees acting within their scope of practice.

Administrative Policies and Procedures
This program supports and adheres to Equal Employment Opportunity policies and the Americans with Disabilities Act. Applications from racial, ethnic, and sexual minorities and women are strongly encouraged. No applicant will be discriminated against on the basis of race, color, creed, religion, sex, place of national origin, or
age. We do not require self-disclosure. We actively recruit potential fellows from diverse backgrounds. Our full diversity recruitment and retention plan is available upon request to the fellowship director.

**Fellow’s evaluation of program**

We will review and revise our training goals and objectives, as well as review fellows’ views of our program, through the following mechanisms:

1. Bi-monthly training meetings, in which results of evaluations and exit interviews are discussed.

2. Private, scheduled meetings with the Training Director and staff involved in training.

3. Fellows’ evaluation of Supervisors, completed at the end of each training quarter. Fellows complete evaluations of supervisors rating them in key areas of supervision. They discuss and show supervisors these forms at the completion of their rotation. Both Fellows and supervisors sign off on these forms.

4. Fellow evaluation of our overall program, completed every six months. At the outset of the fellowship, the Director of Training explicitly tells Fellows that he is available to meet with them at any time to discuss the training program and receive feedback. The Training Director requests formal evaluations of the program and shared group experiences every six months. Fellows are asked to individually rate the different components of the program using a standard evaluation form. The Training Director reviews these evaluations with the Fellows, guides them in finding effective ways of describing their concerns, shares the written evaluations concerning specific supervisors with those supervisors in private, and shares the feedback concerning the overall program with the Training Committee.

5. Fellow meetings with the Training Director to discuss these evaluations and follow-up on issues of concern.

6. Separate exit-interviews with the Training Director and the Chief Psychologist at completion of fellowship. Exit-interviews are non-evaluative and the information and impressions shared will be presented anonymously to the Training Committee, to promote improvements in our program.

**Program’s evaluation of Fellow**

The performance and progress of Fellows and the effectiveness of the postdoctoral training program will be evaluated with multiple criterion measures throughout the training year and upon completion of the training program. Methods of evaluation will include the use of rating scales and interviews with the Fellows, their supervisors, and affiliated staff members.

Fellow Evaluation - The Fellows, their respective mentors, and other supervisors will complete rating scales with regard to each Fellow’s performance at the end of months 3, 6, 9, and 12 of each training year. Fellows will be rated on their level of competence in the core areas of the goals described above. The Fellow will meet with the supervisors to review the quarterly ratings and to discuss goals for further development. The Director of Training will receive copies of the evaluations and will meet with each Fellow to review the performance ratings and provide any additional guidance or recommendations.
Application & Selection Procedures

WE ARE NOT ACCEPTING APPLICATIONS FOR THE 2018 TRAINING YEAR.

This fellowship uses the APPA CAS (APPIC Psychology Postdoctoral Application) for all applications, consistent with VA Policy. This program also plans to adhere to the APPIC Selection Process Guidelines. You can find more information can be found at the APPIC website.

Eligibility

Please see all eligibility requirements at the VA’s psychology training website eligibility page: http://www.psychologytraining.va.gov/eligibility.asp

Application Procedures:

Click on the following link to access the APPA CAS (APPIC Psychology Postdoctoral Application). Complete the basic demographic, education, clinical training information and transcripts required of all applicants for all APPA CAS programs. Select the appropriate program. Different programs may have unique requirements including cover letters and work samples that can be uploaded. APPA CAS allows you to request letters of recommendation electronically which are then uploaded by the letter writer (Note: APPA CAS refers to letters of recommendation as "Evaluations"). The specific requirements for the Richmond McGuire Rehabilitation Psychology Postdoctoral Fellowship Program are indicated below as well as within the APPA CAS system. More explicit instructions can be found within APPA CAS.

ONCE YOU HAVE SUBMITTED ALL DOCUMENTS, PLEASE EMAIL Thomas.Campbell4@va.gov SO WE CAN CONFIRM TO YOU THEY HAVE BEEN RECEIVED AND THE APPLICATION IS COMPLETE.

Please submit the following application materials:

1. A cover letter that includes in detail the following elements:
   a. Previous clinical, educational and research experience in generalist core competencies.
   b. Any previous clinical, educational and research experience in rehabilitation psychology.
   c. A description of your career goals and the way in which the Fellowship will advance them.
2. Curriculum Vitae
3. Official transcripts from graduate school (including date of doctoral degree if awarded). If the doctoral degree has not yet been awarded, we will require an official transcript with awarding date before admission to the Program.
4. Three letters of recommendation, including:
   a. One from your Dissertation Chair noting the status of your dissertation and anticipated completion date;
   b. One from an internship supervisor; and
   c. One from a clinical or research supervisor who is especially familiar with your clinical or research work.
5. A rehabilitation psychology-related work sample that has been de-identified according to HIPAA Standards.

We are not accepting applications for the 2018 training year.

We expect to offer appointments to two fellows for the 2019-2021 training years. Please note that after a selection has been made, the selected candidate will still be required to pass the regular VA employment screening process which may include a criminal background check and a urine drug screen. Selected candidates who do not complete or successfully pass this process, or who do not complete program requirements for graduation with a Ph.D. or Psy.D. will not be able to begin the fellowship.
Questions regarding the program may be directed to Dr. Thomas Campbell at Thomas.Campbell4@va.gov or at 804-675-5000 x2362.

**Training Staff** (* indicates a graduate of the fellowship*)

**Jennifer Cameron,** Ph.D., 2008, University of Alabama at Birmingham
Licensed Clinical Psychologist, Commonwealth of Virginia
Clinical Duties: Primary Care Mental Health.
Research Interests: Health Psychology.

**Thomas Campbell,** Ph.D. 2008, Virginia Commonwealth University
*Board Certified in Rehabilitation Psychology*
Licensed Clinical Psychologist, Commonwealth of Virginia
Clinical Duties: Neuropsychologist, PRC
Training Duties: Director of Postdoctoral Fellowship Training
Research Interests: TBI and PTSD, effort and negative response bias in neuropsychological assessment, psychological sequelae of torture
Faculty appointments: Adjunct and Affiliate Professor in Psychology, Clinical Assistant Professor in Physical Medicine and Rehabilitation, Virginia Commonwealth University.

**Suzzette Chopin,** Ph.D. 2013, Virginia Commonwealth University
Licensed Clinical Psychologist, Commonwealth of Virginia
Clinical Duties: Rehabilitation Neuropsychologist, PTP
Training Duties: Supervisor, Rehabilitation Psychology Didactic Coordinator
Research Interests: Complementary and Integrative Medicine
Faculty appointments: Affiliate Professor in Psychology, Virginia Commonwealth University.

**Michael Ellwood,** Ph.D., 1991, Virginia Commonwealth University
Licensed Clinical Psychologist, Commonwealth of Virginia
Clinical Duties: Provide assessment, psychological testing, psychotherapy, behavioral therapy, and family therapy for newly injured and long-term Spinal Cord Injury patients as part of an interdisciplinary treatment team. Also provide patient and staff education, and assessment and treatment for patients in the SCI outpatient clinic. Director of Training for Psychology, member of Goal Sharing Committee and SCI CARF Committee
Research Interests: Health Psychology in relation to SCI, depression, pain and smoking.
Faculty appointments: Adjunct Assistant Professor in Psychology, Virginia Commonwealth University.

**Michelle M. Emrich,** Psy.D. 2008, Spalding University, Louisville, KY
Licensed Clinical Psychologist, Commonwealth of Virginia
Clinical Duties: Health psychologist providing consultation-liaison services, pre-surgical and pre-organ transplant evaluations and targeted health behavior interventions as part of an interdisciplinary team within varied specialty care clinics.
Academic/Faculty Affiliations: None currently
Leah Farrell-Carnahan, PhD, 2009, Virginia Polytechnic Institute and State University
Licensed Clinical Psychologist, Commonwealth of Virginia
Clinical Duties: Dr. Farrell-Carnahan’s clinical activities are centered in the Veterans’ Integrated Pain clinic (VIP Clinic). In this interdisciplinary setting, she conducts assessment and evidence-based treatment (i.e., Motivational Interviewing, Motivational Enhancement Therapy, Cognitive Behavioral Therapy for Insomnia, Cognitive Processing Therapy, Prolonged Exposure Therapy) for issues affecting Veterans with chronic pain (i.e., sleep disturbance, addiction, health behavior change, post-traumatic stress). Research Interests: Motivational Interviewing, remote-delivery of evidence-based treatments, e-health, m-health, problematic substance use, insomnia, health behavior change
Faculty Appointments: Affiliate Assistant Professor, Department of Physical Medicine and Rehabilitation, Virginia Commonwealth University School of Medicine.

Rebecca Fromme, Ph. D. 2000, State University of New York at Buffalo, Buffalo, New York
Licensure: New York Licensed Clinical Psychologist
Clinical Duties: Psychologist for Home Based Primary Care.
Faculty Appointments: Adjunct Assistant Professor in Psychology, Virginia Commonwealth University.

Sharon Funari, Ph.D., 2008, Virginia Commonwealth University, Richmond, Virginia
Licensed Clinical Psychologist, Commonwealth of Virginia
Clinical Duties: Psychologist for the outpatient Polytrauma Network Site. Provide psychotherapy services to individuals and families; Consult with interdisciplinary Polytrauma team in order to provide holistic care to veterans and their families. Provide supervision to doctoral interns and practicum students.
Faculty Appointments: Affiliate Professor in Psychology, Virginia Commonwealth University.

*Meghan Geiss, Ph.D. 2013, University of Memphis, Memphis, TN
Licensed Clinical Psychologist, Commonwealth of Virginia
Clinical Duties: Rehabilitation Neuropsychologist, Mental Health Service Line
Research Interests: TBI, Sleep Disorders
Faculty appointments: Affiliate Professor in Psychology, Virginia Commonwealth University.

Eugene Gourley, Ph.D. 1998, Virginia Commonwealth University, Richmond, VA
Licensed Clinical Psychologist, Commonwealth of Virginia
Clinical Duties: Rehabilitation Neuropsychologist, Polytrauma Network Site
Research Interests: Neuropsychology, TBI
Faculty Appointments: Affiliate Professor in Psychology, Virginia Commonwealth University

Craig Helbok, Ph.D., 2005, West Virginia University, Morgantown, WV
Board Certified in Clinical Health Psychology
Clinical Duties: Primary Care Mental Health
Research Interests: Primary Care Mental Health
Patricia Jones, Ph.D. 1995, Georgia State University
Licensed Clinical Psychologist, Commonwealth of Virginia
Clinical Duties: Psychologist on Polytrauma Transitional Rehabilitation Program. Duties include providing diagnostic evaluations to all patients admitted to program, providing individual, family, and marital therapy, provide group psychotherapy, attend IDT meetings and other patient care related meetings (behavioral rounds, family conferences, etc.), participate on steering committee, participate on national conference meetings regarding PTRP, program development, etc.
Research interests: Outcome studies regarding role of family in the recovery process from TBI.
Faculty Appointments: Previous adjunct role at VCU as supervisor affiliated with VCU’s Counseling and Psychological Services & Development (CPSD).

Jennifer Menzel Lumpkin, Psy.D., 2005, Indiana University of Pennsylvania, Indiana, PA
Board Certified in Rehabilitation Psychology
Licensed Clinical Psychologist, Commonwealth of Virginia
Postdoctoral Fellowship in Neuropsychology and Rehabilitation Psychology at Virginia Commonwealth University (VCU) Medical Center, 2005-07
Clinical duties: Neuropsychologist for the Mental Health Service, Consultation and Liaison Service, and Spinal Cord Injury Unit. In addition to completing neuropsychological evaluations, I also conduct individual psychotherapy with individuals with a variety of Axis I disorders as well as conduct group psychotherapy with individuals who identify as gay, lesbian, bisexual, and/or transgendered (GLBT)
Research Interests: Traumatic brain injury, depression following traumatic brain injury
Faculty appointments: Adjunct Assistant Professor in Psychology, Virginia Commonwealth University.

Scott McDonald, Ph.D. 2006: Virginia Commonwealth University
Licensed Clinical Psychologist, Commonwealth of Virginia
Clinical Duties: Neuropsychologist, SCI
Research Interests: SCI, TBI and PTSD
Faculty appointments: Adjunct Assistant Professor in Psychology, Virginia Commonwealth University.

Brian Mutchler, Psy.D., 1999, Indiana University of Pennsylvania
Licensed Clinical Psychologist, Commonwealth of Virginia
Clinical Duties: Provide assessment, psychological testing, psychotherapy, behavioral therapy, and family therapy for newly injured and long-term Spinal Cord Injury patients as part of an interdisciplinary treatment team. Also provide patient and staff education, and assessment and treatment for patients in the SCI outpatient clinic. Member of the IRB and appointed to the VAMC R&D Committee and chairs the CQI committee for SCI/D.
Research Interests: Health Psychology in relation to SCI, depression, pain and smoking
Faculty appointments: Adjunct Assistant Professor in Psychology, Virginia Commonwealth University

**Board Certified in Rehabilitation Psychology**

Licensed Clinical Psychologist, Commonwealth of Virginia

Clinical duties: Associate Chief Mental Health Service Line, Supervisory Clinical Psychologist RVAMC; Director of Polytrauma Post-doctoral Psychology Fellowship.

Research Interests: Health Psychology/behavioral lifestyle management, PTSD, TBI

Faculty Appointments: Assistant Professor, Departments of Psychology and Physical Medicine and Rehabilitation at Virginia Commonwealth University.

**Brian Reiner**, Psy.D., 2011, Regent University, Virginia Beach, V.A.

Licensed Clinical Psychologist, Commonwealth of Virginia

Clinical Duties: Outpatient neuropsychological assessments and psychotherapy for the Compensated Work Therapy Program (CWT) and the Polytrauma Network Site Program (PNS), and the Service Member Transition Advanced Rehabilitation (STAR) program. Inpatient neuropsychological assessments and psychotherapy for the Service Member. Transitional Advanced Rehabilitation Program (PNS).

Research Interests: Alternative Medicine, Mindfulness

Faculty appointments: Adjunct Assistant Professor in Psychology, Virginia Commonwealth University.

**Meghan Rooney**, Psy.D. Antioch New England Graduate School

Licensed Clinical Psychologist, Commonwealth of Massachusetts

Clinical duties: Clinical coordinator of the Veteran’s Integrative Pain Center. Provide assessment, psychological testing, behavioral therapy, family therapy and trauma work including EMDR for veterans in chronic pain as part of an interdisciplinary treatment team. Former Director of Operations for the National Tele-mental Health Center (NTMHC), I have experience in program development at the local, regional and national level and continue to be keenly interested in the intersection of mental health and technology.

Research Interests: Trauma and Chronic Pain; Integration of technology and mental health;

Career Faculty Appointments: Instructor in Psychiatry, Harvard Medical School; Assistant professor, Yale University School of Medicine

**Kathryn Wilder Schaaf**, Ph.D. 2010 Virginia Commonwealth University

Licensed Clinical Psychologist, Commonwealth of Virginia

Clinical Duties: Rehabilitation Psychologist, PRC

Research Interests: TBI and PTSD, Family needs after TBI

Faculty appointments: Affiliate Professor, Virginia Commonwealth University.
Cathy Williams-Sledge, Psy.D. 1997, Virginia Consortium Program in Clinical Psychology
Licensed Clinical Psychologist, Commonwealth of Virginia
Clinical duties: Provide assessment, psychological testing, psychotherapy, behavioral therapy, and family therapy for newly injured and long-term Spinal Cord Injury patients as part of an interdisciplinary treatment team. Also provide patient and staff education, and assessment and treatment for patients in the SCI outpatient clinic. Provide assistance and support for the SCI Peer mentoring program and oversee the SCI Smoking Cessation Program.
Research Interests: Smoking Cessation in SCI; Depression and Pain in SCI.
Faculty appointments: Assistant professor, Department of Psychology, Virginia Commonwealth University
Richmond, Virginia

An historic city and Virginia’s capital, Richmond offers an attractive array of leisure, cultural, and social opportunities not usually found in mid-sized cities. Beautiful neighborhoods juxtaposed to modern high rises with striking architecture set the stage for the numerous cultural, educational and recreational events befitting its nearly 200,000 citizens (approximately 1,000,000 in the metro area). Nationally recognized for its vitality and new economy, Richmond’s diversified employment base extends from chemical, food and tobacco manufacturing to cutting edge biotechnology, semiconductors and high-tech fiber production. The city consistently ranks among “Best Places to Live and Work in America” in several national publications.

Bisected by the James River, its numerous parks and woodlands offer the chance for solitude in nature as well as outdoor sports such as mountain biking and kayaking even when close to the city center. Richmond is a Top 10 finalist in Outside Magazine’s 2012 “Best Towns Ever” contest. Richmond is proud to support several first-class museums, three prominent universities, a symphony, the American Youth Harp Ensemble, professional ballet and opera companies, and numerous theater groups and art galleries. For example, the Virginia Museum of Fine Arts is receiving guests from around the nation in Spring 2011 as it is the only museum on the East Coast to host the “Picasso: Masterpieces from the Musée National Picasso, Paris” exhibition as it travels on a seven-city international tour. Richmond also hosts the annual Richmond Folk Festival, a free festival featuring live performances by some of the world’s greatest folk musicians.

Richmond annually hosts the XTERRA off road triathlon’s East Coast Championship, hosted the 2012 Veteran’s Wheelchair Games, and will host the UCI Road World Championship of cycling in 2015.

While offering easy access to the Atlantic Ocean and the Chesapeake Bay, Appalachian Mountains as well as being only 90 minutes south of Washington, D.C., Richmond also features countless pastimes right at home. Trendy boutiques, varied bistros and restaurants, numerous sports and entertainment attractions, outdoor pursuits among one of the nation’s largest river park systems, and a treasure trove of historic landmarks provide opportunities for nearly endless learning and relaxation.

Learn more about the city of Richmond, Virginia at: http://www.vcu.edu/richmond/ and http://www2.richmond.com/
REQUIRED POST-DOCTORAL RESIDENCY PROGRAM TABLES

Date Program Tables are updated: **8/28/2017**

Postdoctoral Program Admissions

Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program’s policies on resident selection and practicum and academic preparation requirements:

We seek applicants who have a sound clinical and scientific knowledge base from their academic program and internship; strong entry-level professional skills in standard assessment, intervention, and research techniques; and the personal characteristics necessary to function well as a doctoral-level professional in a medical center environment. Our selection criteria focus on all aspects of the application materials, with particular emphases placed upon background training and experience and an applicant’s articulation of training goals and professional aspirations. We seek the best fit between applicants and our training program. The McGuire VA Medical Center in which our training program resides is an Equal Opportunity Employer; we are committed to ensuring a range of diversity among our training classes, and we actively recruit and select candidates representing different kinds of programs and theoretical orientations, geographic areas, ages, racial and ethnic backgrounds, sexual orientations, disabilities, and life experiences.

Describe any other required minimum criteria used to screen applicants:

**Eligibility:** Applicants must meet the following prerequisites to be considered for our postdoctoral training program:

1. Completion of doctoral degree, including defense of dissertation, from a clinical or counseling psychology doctoral programs accredited by the American Psychological Association (APA) or the Canadian Psychological Association (CPA) before the start date of the residency
2. Completion of an APA-accredited psychology internship program
4. Matched postdoctoral residents are subject to fingerprinting, background checks, and a urine drug screen.
5. Male applicants born after 12/31/1959 must have registered for the draft by age 26

*** Failure to meet these qualifications could nullify an offer to an applicant.
## Financial and Other Benefit Support for Upcoming Training Year*

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Annual Stipend/Salary for Full-time Residents</strong></td>
<td>$43904*</td>
</tr>
<tr>
<td><strong>Annual Stipend/Salary for Half-time Residents</strong></td>
<td>NA</td>
</tr>
<tr>
<td>Program provides access to medical insurance for resident?</td>
<td>Yes</td>
</tr>
<tr>
<td>If access to medical insurance is provided Trainee</td>
<td></td>
</tr>
<tr>
<td>contribution to cost required?</td>
<td>Yes</td>
</tr>
<tr>
<td>Coverage of family member(s) available?</td>
<td>Yes</td>
</tr>
<tr>
<td>Coverage of legally married partner available?</td>
<td>Yes</td>
</tr>
<tr>
<td>Coverage of domestic partner available?</td>
<td>Yes</td>
</tr>
<tr>
<td>Hours of Annual Paid Personal Time Off (PTO and/or Vacation)</td>
<td>See “Other Benefits” below</td>
</tr>
<tr>
<td>Hours of Annual Paid Sick Leave</td>
<td>See “Other Benefits” below</td>
</tr>
<tr>
<td>In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?</td>
<td>Yes</td>
</tr>
</tbody>
</table>

*Note. Salary increases to $45,423 for Fellows in their second year

Other Benefits (please describe)

Residents are entitled to 10 federal holidays and earn sick leave and vacation days at a rate of four hours of each per two-week pay period. Residents are encouraged to use all of their annual leave before completion of the training year. Unused sick leave may be applied to future federal employment. Additional leave may be approved for attendance at conferences and workshops or other continuing education activities. Postdoctoral residents are not covered by Federal Employee retirement and are not eligible for federal life insurance benefits but are eligible for health insurance benefits.

* Note. Programs are not required by the Commission on Accreditation to provide all benefits listed in this table.
# Initial Post-Residency Positions

(Provide an Aggregated Tally for the Preceding 3 Cohorts)

<table>
<thead>
<tr>
<th>2011-2017*</th>
<th>PD</th>
<th>EP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total # of residents who were in the 3 cohorts</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>Total # of residents who remain in training in the residency program</td>
<td>0</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Setting</th>
<th>PD</th>
<th>EP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community mental health center</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Federally qualified health center</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Independent primary care facility/clinic</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>University counseling center</td>
<td>NA</td>
<td>1</td>
</tr>
<tr>
<td>Veterans Affairs medical center</td>
<td>NA</td>
<td>3</td>
</tr>
<tr>
<td>Military health center</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Academic health center</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Other medical center or hospital</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Psychiatric hospital</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Academic university/department</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Community college or other teaching setting</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Independent research institution</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Correctional facility</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>School district/system</td>
<td>NA</td>
<td>1</td>
</tr>
<tr>
<td>Independent practice setting</td>
<td>NA</td>
<td>1</td>
</tr>
<tr>
<td>Not currently employed</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Changed to another field</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Other</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Unknown</td>
<td>NA</td>
<td>NA</td>
</tr>
</tbody>
</table>

Note: “PD” = Post-doctoral residency position; “EP” = Employed Position. Each individual represented in this table should be counted only one time. For former trainees working in more than one setting, select the setting that represents their primary position.

*Note: We are a two-year fellowship. These years represent the previous three cohorts.