VASDHS/UCSD Psychology Clinical Research Postdoctoral Residency Program

VA San Diego Health Care System
3350 La Jolla Village Drive
San Diego, California 92161

2020 - 2021
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Introduction

The purpose of this brochure is to describe the **VASDHS Psychology Clinical Research Postdoctoral Training Program**. Our two-year postdoctoral training program is based on the clinician-scientist model. The primary goal is to train psychologists to become leading clinical researchers in high priority areas of mental health relevant to Veterans. Over the course of the two-year program, fellows are trained in clinical research and advanced clinical service delivery with state-of-the-art program administration and evaluation experiences in an interdisciplinary setting. At the end of the program, Residents are prepared for VA or university medical center careers that integrate research, clinical, training, and leadership activities.

The **VASDHS Psychology Clinical Research Postdoctoral Training Program** consists of four tracks: 1) MIRECC Advanced Fellowship Program in Mental Illness Research and Treatment (focused on schizophrenia and related psychotic disorders); 2) CESAMH Advanced Fellowship Program in Mental Illness Research and Treatment (focused on the integration of neurobiological and psychosocial science to develop, evaluate, and disseminate treatment for trauma-related disorders such as Post Traumatic Stress Disorder (PTSD) and Traumatic Brain Injury (TBI)); 3) Advanced Fellowship in Women’s Health; and 4) Interprofessional Advanced Fellowship in Addiction Treatment. All four tracks are two-year programs funded through the VA Office of Academic Affiliates. Most years there is one new psychology position in each of the tracks; on occasion a second position may be available.

Our website is located at: [http://www.sandiego.va.gov/careers/psychology_training.asp](http://www.sandiego.va.gov/careers/psychology_training.asp).

The program emphasizes training in the professional practice of general clinical psychology and clinical research, and it does not offer training in any APA recognized substantive specialty practice areas. We have received the designation of “accredited, on contingency” by the APA Commission on Accreditation, a status given to developing programs who are awaiting distal outcome data.

Questions related to the program’s accredited 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  
Phone: (202) 336-5979  
Email: apaaccred@apa.org  
Web: [www.apa.org/ed/accreditation](http://www.apa.org/ed/accreditation)
Facilities

Postdoctoral Residents are located within the VA San Diego Healthcare System (VASDHS) (http://www.sandiego.va.gov/), which is a teaching hospital adjacent to the University of California, San Diego (UCSD) campus. VASDHS provides a full range of patient care services, with state-of-the-art technology and high quality educational and research experience. The VASDHS Mental Health Care Line serves Veterans who reside in San Diego and Imperial counties and provides general and specialized inpatient and outpatient psychiatric services. There are 28 acute care psychiatry beds and 10 beds assigned to the Neurobehavioral Assessment Unit. In addition, there is a Substance Abuse Residential Rehabilitation Treatment Program (SARRTP) for Veterans with co-occurring substance use disorders and PTSD. An active outpatient Geriatric Psychiatry service also exists at the Medical Center, as well as a 20-bed Spinal Cord Injury Unit, offering inpatient and outpatient services.

In addition to the services described above, which are located in the main hospital in San Diego, there are extensive additional medical facilities and mental health programs for outpatient care at the VASDHS’s seven Community Based Outpatient Clinics (CBOCs). Mental health programs located at the Mission Valley CBOC include a General Mental Health Clinic, the PTSD Clinical Team (PCT), and a Behavioral Medicine Clinic. An additional CBOC, the Mission Gorge Clinic, houses the Center Of Recovery Education (CORE), the Family Mental Health Program, and the Wellness and Vocational Enhancement (WAVE) program. In addition, the VASDHS has other CBOCs at Chula Vista, Escondido, Oceanside, Sorrento Valley and Imperial Valley. Patient care activities in the mental health programs include psychiatric admissions, crisis service, diagnosis specific medication clinics, and individual, marital, family, and group therapies. Residents provide a full continuum of evidence based psychological services; including screenings, formal assessments, consultation, individual and group treatment, and psycho-education.

Recently a 40-bed, Veteran Residential Rehabilitation Treatment Program (RRTP), the Aspire Center, opened. This facility is aimed at promoting recovery in Veterans and provides temporary housing for Veterans who do not need inpatient care, but would benefit from rehabilitation services for an average of 60-120 days.

The mission of the VA is to provide primary care, specialty care, extended care, and related social services in the context of an integrated health care delivery system aimed at improving the health of the Veteran population. For over 65 years, VA has demonstrated an ongoing commitment to training and to the development of academic affiliations for the purpose of: 1) Training and retaining high quality VA health care providers, 2) Improving Veteran health care, and 3) Promoting an...
environment of scientific inquiry. The VA is legislatively mandated to support the training of healthcare professionals, such as psychologists, for its system and the nation.

VASDHS has one of the most active research programs in the nation. The VASDHS’s Research & Development Service is one of the largest research programs in the Department of Veterans Affairs with over $42 million in research funding, over 200 principal investigators, and nearly 700 research projects. It is home to nine special research programs, which include:

- Center of Excellence for Stress & Mental Health (CESAMH)
- Health Services Research & Development (HR&SD)
- Mental Illness Rehabilitation, Education, and Clinical Centers (MIRECC)
- VA Women’s Health Practice-Based Research Network (PBRN)
- Million Veterans Program

Most faculty in these programs have joint appointments at UCSD. VASDHS’s Research & Development Service is also affiliated with the Veterans Medical Research Foundation (VMRF) founded as a non-profit corporation in 1989 to administer additional funds for research studies. VMRF partially funds nearly 100 VA researchers and is one of the largest of 84 active VA Foundations in the nation.

The Psychology staff at the VASDHS represents one of the most academically oriented in the Department of Veterans Affairs Healthcare Systems. Currently, fully accessible by the postdoctoral residents are over 80 staff psychologists. The majority of the Ph.D. clinical psychologists hold joint academic appointments in the UCSD Department of Psychiatry. Many of the major sub-specialties of clinical psychology are represented by the staff, including neuropsychology, geropsychology, marital and family therapy, substance use disorder treatment, day treatment for chronic patients, behavioral medicine, PTSD, and related psychology research. There are complete facilities at the VA for computer-assisted psychological testing and videotaping of therapy sessions. All medical records charting and scheduling are done electronically.

Postdoctoral training in psychology is a valued and integral part of the mission of both VASDHS and the UCSD Department of Psychiatry. The mission of UCSD is to provide high quality and effective clinical care, professional training, and research. As an academic department, the UCSD Department of Psychiatry has a strong commitment to offering superb training to the next generation of clinical research scientists. Thus, since its inception, the Department has continually expanded its existing programs and created new training programs for clinical care and clinical research. Furthermore, psychologists have a strong presence in the Department, and are fully integrated into all administrative, educational, and clinical endeavors.
UCSD is one of ten campuses of the University of California (http://ucsd.edu/). UCSD curricula and programs have been singled out for top rankings in national surveys at both undergraduate and graduate levels. In terms of Federal research and developmental funding, it is currently in the top six. The UCSD Department of Psychiatry was established in 1970 and has over 200 faculty members. A primary objective of the Department of Psychiatry at UCSD is to offer an eclectic program of training that emphasizes the integration of relevant biological, psychological, family and preventive medicine, and sociological variables in the understanding of human behavior. The UCSD Department of Psychiatry is strongly integrated within the VASDHS, and together they offer a rich clinical and research environment. Many successful joint programs are currently in operation under the umbrella of an inter-agency sharing agreement. Noteworthy among these programs is a four-year Residency in General Psychiatry; a two-year Fellowship in Child Psychiatry; psychiatric fellowships in Geriatric Psychiatry, an APA-approved Joint Doctoral Program in Clinical Psychology; and an APA-approved Pre-doctoral Internship in Clinical Psychology. The mission of both the UCSD School of Medicine and the VASDHS include a strong emphasis on clinical care, professional training, and research; and both are nationally renowned for strong clinical, teaching, and research programs.

As a companion program to the VASDHS/UCSD Psychology Clinical Research Postdoctoral Training Program described in this brochure, another key resource within the VASDHS Mental Health Care Line is the Clinical Psychology Postdoctoral Residency Program, which offered 13 postdoctoral positions for the 2018-2019 training year. The latter program consists of one-year clinical positions in two APA accredited tracks--Evidence-Based Psychotherapies (EBP) and Psychosocial Rehabilitation (PSR), with rotations in Mood Disorders; Geropsychology and Home-based Care; Lesbian, Gay, Bisexual, and Transgender (LGBT) Mental Health; PTSD Clinical Teams (PCTs); PTSD/Traumatic Brain Injury (TBI); and Family Mental Health.
Qualifications, Funding, and Benefits

Requirements for consideration of admittance to the VASDHS/UCSD Psychology Clinical Research Postdoctoral Training Program include:

1) Completion of an APA-accredited doctorate in clinical or counseling psychology and an APA-accredited internship in clinical psychology
2) US citizenship (as required by VA)
3) Males born after December 31, 1959 must have registered for the draft by age 26 years (as required by VA)

Desirable qualifications include:

1) Experience using evidence-based interventions
2) Clinical Research experience
3) Career goals involving clinical-research, clinical care, and leadership
4) Dissemination activities involving evidence-based practices in university-affiliated or VA or other medical center setting
5) Recruitment of men and women from diverse demographic groups (e.g. social, economic, and cultural) is a high priority

All Residents are funded through postdoctoral stipends from the Office of Academic Affiliations (OAA) Department of Veterans Affairs. Stipends are currently $51,101 (for first year fellows) with health benefits. Funds from VASDHS Mental Health Care Line and Education Service budgets are often used to cover program needs (e.g., office and testing supplies, computers).
Training Program Structure

Training focuses on clinical research in high priority mental health issues relevant to Veteran populations. Residents in the VASDHS/UCSD Psychology Clinical Research Postdoctoral Training Program have a shared responsibility in designing and planning their residency experience in collaboration with their supervisors, and they will receive training in clinical research and provision of evidence-based clinical services and have the opportunity to develop teaching, supervision, administration, and leadership skills in interdisciplinary settings. The emphasis in this Residency program is training in academic, clinical, and health systems research and program development that build on the interests of the Resident and the particular strengths of our faculty and department.

Our program is unique in that residents devote effort both to direct clinical research and direct provision of clinical services. Residents devote up to 75% effort to clinical research, the majority of which is clinically relevant activities. The expectation for the program is that Residents will spend at least 25% in direct clinical service, such as providing assessments or conducting therapy in VA clinics or research programs. One strength of the clinical research approach is that there is time allotted for the following clinical research-specific activities:

- Developing awareness of pressing clinical/research priorities within the VA.
- Developing skills in grant writing.
- Learning to navigate the landscape of career development awards.
- Developing advanced skills in mental health research methodology and statistical analyses; scientific writing and presentation; and research ethics in mental health research; in order to understand the best evidence-based approach to clinical research and treatment.
- Participating didactics that address an array of topics ranging from advanced research methodologies, professional writing, and research ethics.
- Giving formal presentations of their clinical research findings.

The VASDHS/UCSD Psychology Clinical Research Postdoctoral Training Program requires a two-year commitment from about September 1 of the first year to about August 31 of the second year. Residents work a 40-hour week thereby completing 2,080 hours of supervised training per year, which is well above the minimum of 1,500 postdoctoral Supervised Professional Experience (SPE) hours required for Psychology licensure in California. The VASDHS is a Business and Professions Code (BPC) Section 2910 exempt setting whereby all hours related to clinical care including clinical research can be counted as SPE for licensure in California. General office hours are 8:00 a.m. 4:30 p.m. Monday
through Friday; any deviation from this schedule must be approved by the primary supervisor and Director of Training. There are 10 federal holidays, 13 sick leave days, and 13 annual leave days per year. There are no part-time Residents.

Each Resident is assigned to work with a primary clinical-research mentor who will work with the Resident, the Program Training Director, specific Track Director, and delegated clinical supervisor(s) in developing, implementing, and overseeing of the Resident’s training plan. If the primary research mentor is a not a clinical psychologist, the Resident will also be assigned a Clinical Psychologist mentor.

The training program begins with an orientation week in which Residents are oriented to the VASDHS and receive an introduction to their clinical practice and clinical research placements. Orientation includes overview of policy and procedures (including Due Process and Grievances), competency objectives, and evaluation procedures. VASDHS requires Residents to participate in New Employee Orientation (NEO). Trainees must also complete a 90-minute online training that is intended to take the place of all the hospital annual mandatory training modules. The site can be accessed through the VA Intranet at: http://vaww.va.gov/oaa/mandatory.asp.

During the orientation period, the supervisors and mentors and Residents evaluate the trainee’s strengths and weaknesses and develop an individualized training plan for the residency year. This plan outlines the Resident’s responsibilities, including the proportion of time devoted to each training activity. Every Resident must have a training plan approved by the Program Training Director by the end of the first month of training.

The VASDHS/UCSD Psychology Clinical Research Postdoctoral Training Program also allows an opportunity for “supervised supervision” of psychology interns, practicum students and graduate and undergraduate students; formal presentations and lectures to academic, medical, and community audiences; and program administration and leadership training.

Residents who successfully complete our program meet the following requirements:

- Minimum of 2 publications submitted for publication by completion of program
- Successful completion (via formal evaluation with supervisor) of clinical service placements
- Completion of requisite hours
• Scores of “C” (Competency Achieved) on all skills in each competency domain and at least a rating of “A” (Advanced Competency) in three specific skills related to career goals by completion of year 2.
• Successful completion (via formal evaluation with research mentor) of clinical research
• Successful completion of required didactics (via formal evaluation of preceptor / supervisor)
• Maintenance of consistently professional and ethical conduct in professional setting throughout duration of training (via formal evaluation with research mentors and clinical supervisors)

A developmental training approach will be used for training in clinical research and practice in which learning objectives are accomplished primarily through experiential learning under supervision and mentoring by the Resident’s mentor/supervisors. A Resident’s clinical training follows a progression from observing supervisor modeling, to participating in activities with direct observation by the supervisor, to increasingly autonomous, albeit monitored and supervised, clinical service delivery. Thus, in the beginning of the training program, clinical cases are less complex and increase in amount and complexity as the training programs progresses. Similarly, clinical research training progresses from more closely supervised, structured activities to independently (but supervised) conduct of all aspects of the research enterprise.

Under certain circumstances, a fellow may petition to graduate from the program in less than 24 months. If a fellow receives a grant or job offer, a successful outcome that is consistent with the program goals, and if he or she must initiate the grant or begin the job within months of his/her end date, the fellow may petition to graduate early. The petition process will be as follows:

1. Fellow will provide a written request to graduate early that includes the notice of grant award or job offer and the start date.
2. Fellow will provide documentation that MLA’s have been achieved, including an evaluation by the supervisor.
3. The fellow’s request will be reviewed by the Track Directors, who will determine if the fellow has successfully completed the MLA’s and if he/she will be allowed to leave the program prior to 24 months.
Specific Programs

The overall structure of each of the four tracks of the VASDHS/UCSD Psychology Clinical Research Postdoctoral Training Program is the same, but each has a different content focus. The focus of each clinical research fellowship is described below:

Women’s Mental Health Fellowship (Ariel Lang, PhD, Director Psychology Training): The overall goal of the Advanced Fellowship in Women’s Health is to provide interdisciplinary training to Clinical Psychology Residents to prepare them for careers as independent women’s healthcare specialists. Through a combination of clinical, research, and teaching experiences, cross-disciplinary training opportunities, and supervision from women’s health specialists, Residents will be prepared for a career in the VASDHS that integrates clinical, research, and leadership activities related to women’s health. Specifically, the fellowship provides clinical and clinical research training that: 1) Prepares Residents to provide coordinated, comprehensive, and evidence-based clinical care for women Veterans; 2) Teaches Residents how to translate the scientific literature into sound, evidenced-based practice for women Veterans, 3) Instructs Residents in the evaluation and dissemination of evidence-based practices; and 4) Provides mentored teaching and leadership experiences to impart skills and knowledge that will allow the Residents to ultimately serve as advanced clinicians and clinical researchers, advocates, educators, and mentors in the field of women’s mental health within the VA system.

MIRECC (Barton W. Palmer, PhD, Director Psychology Training): The VASDHS MIRECC Psychology Residency track is part of the mission of the MIRECC at VASDHS (in partnership with the Greater Los Angeles VA and the Long Beach VA) is to improve the long-term functional outcome of patients with chronic psychotic mental disorders, including schizophrenia, schizoaffective disorder and psychotic mood disorders. We approach this mission through an integrated program of research, education, and clinical programs aimed at translating findings from the research laboratory into improved clinical care. A primary goal of the MIRECC-sponsored Psychology Residency track position is to train psychologists to become leading clinical researchers in psychosis and other major mental illnesses. The fellowship combines individual mentored research and clinical training with state-of-the-art educational experiences.
CESAMH (Laurie Lindamer, PhD, Director Psychology Training): The goal of the CESAMH Advanced Fellowship Program in Mental Illness Research and Treatment is to launch the careers of Residents to be independent clinical researchers and leaders who conduct research in integrated neurobiological and psychosocial science to develop, evaluate and disseminate treatment for trauma-related conditions to optimize the well-being and functioning of Veterans. CESAMH’s scope of research ranges from basic science, psychophysiology, and genetics through pharmacological and psychosocial interventions and their implementation. With this strength in multidisciplinary, translational research, CESAMH provides an ideal setting in which to train psychologists to become highly productive clinical researchers and leaders.

Interprofessional Advanced Fellowship in Addiction Treatment (Tamara Wall, PhD, Track Co-Director): The over goal of the Interprofessional Advanced Fellowship in Addiction Treatment is to develop leaders with vision, knowledge, and commitment to develop, implement, teach, and evaluate addiction treatments to improve healthcare for Veterans and the nation. VASDHS, with UCSD as our affiliate, is one of seven VA facilities/systems that was selected by the VA Office of Academic Affiliations (OAA) based on having excellent clinical programs and a commitment to interprofessional training in substance abuse and addiction treatment. The Addiction Treatment Coordinating Center (ATCC) for the VA’s Interprofessional Advanced Fellowship in Addiction Treatment is located at the VA Pittsburgh Healthcare System. The ATCC, is the education, coordination, and dissemination resource for all seven fellowship sites. Residents participate in local addiction-related curriculum as well a unique two-year seminar curriculum in interdisciplinary addictions research developed by the ATCC.
Supervision

Residents receive at least four hours of supervision per week, and at least two of these hours are individual supervision with a qualified psychologist. At least one hour of weekly individual supervision comes from the primary clinical supervisor, and one from the primary clinical research mentor (if the research mentor is a CA-licensed psychologist). Additional individual supervision comes from secondary supervisors, who may be selected for individual cases or projects or to provide regular supervision throughout the year, and may include group supervision. Individual supervision involves direct observation of clinical care or use of video/audio recording. Supervision assignments are documented in each resident’s individualized training plan.

Residents also have an opportunity for training in providing supervision by spending one hour per week supervising the clinical work of a psychiatry resident, clinical psychology intern, clinical psychology practicum student, or other trainee, in order to gain experience supervising others. The clinical psychology resident’s primary supervisor will supervise this supervision experience. We offer 6 hours of training in “Supervision in Clinical Psychology” at the beginning of the training year that will meet the California, Board of Psychology requirement for training in supervision.
1. **Postdoctoral Residency Professional Development Seminar**  
   **When:** first Wednesday of the month from 2-3pm  
   All residents are required to attend the Postdoctoral Residency Professional Development Seminar in their 1st year. This is a combined seminar that includes the one-year clinical postdoctoral Residents. It meets monthly for 60 minutes for the entire training year and focuses on professional development issues. It is led by Stephanie Orbon, Ph.D.

2. **Clinical Mental Health Research Seminar**  
   **When:** third Wednesday of the month from 8:30-9:30  
   All residents are required to attend the Clinical Mental Health Research Seminar. It covers topics important to the conduct of clinical research and serves as a mechanism for fellows to provide feedback to the program. It is led by Laurie Lindamer, Ph.D. and Tammy Wall, Ph.D.

3. **Laws and Ethics Seminar**  
   **When:** Usually during September or October  
   All residents are also required to attend a Laws and Ethics Seminar. The 2-hour ethics portion of the seminar covers: 1) code of conduct, 2) avoiding ethical complaints, 3) patient-therapist relationship issues, 4) record keeping guidelines, 5) forensic issues, and 6) research ethics. The 2-hour legal portion of the seminar covers: 1) informed consent, 2) HIPPA, 3) confidentiality, 4) reporting laws, and 5) an individual's access to their own medical record. It is organized by the VA psychology training directors, including Sandra Brown, Ph.D., ABPP, Amy Jak, Ph.D., ABPP, Ph.D., ABPP, Autumn Backhaus, Ph.D., and Laurie Lindamer, Ph.D.

4. **Substance Use Disorders Seminar**  
   **When:** Wednesdays @ 1pm  
   All residents are required to attend the Substance Use Disorders Seminar (unless they already have fulfilled this California licensure requirement). This seminar meets weekly for 60 minutes for a total of 15 meetings. The content of the seminar covers the areas to meet the California Board of Psychology licensure requirement on the evaluation and treatment of alcohol and substance use disorders. It is organized by Ryan Trim, Ph.D.

5. **Cultural Diversity Seminar**  
   **When:** 2nd Wednesday of each month  
   All residents are required to attend a Cultural Diversity Seminar. This seminar meets on the 2nd Wednesday of the month for 60 minutes (from 2-3 pm). It incorporates didactic presentations with case
presentations by Residents. Potential topics are decided by the seminar leader with input from the Residents and include: cultural competence in psychotherapy, assessment and treatment of lesbian, bisexual, gay, transsexual (LGBT) clients, assessment and treatment of persons with disabilities, acculturation models for various ethnic minority groups, and diversity issues in the supervisory relationship. The Cultural Diversity Seminar is led by Kiara Wesley, PhD.

Fellows are expected to achieve competence in multiple domains of clinical and research training. The following seminars are offered to assist in building competence in several of these domains and can be incorporated as needed into each fellow’s individual training plan. Note that some seminars also fulfill CA licensing requirements.

1. **V-Tel Core Didactic Series Seminar**  
   **When:** 1st & 3rd Wednesdays from 10am-12pm  
   This seminar serves as the primary seminar for the MIRECC and CESAMH fellows. Fellows are linked to other sites participating in the VA Advanced Fellowship Program in Mental Illness Research and Treatment by means of a monthly Video Teleconference (V-Tel) seminar hosted by the Fellowship Hub Site (Palo Alto VA). This seminar provides an in-depth overview of key topics in mental health research and clinical practice by experts in the field. Each site contributes to one or more of the V-Tel seminars, and the associated modules, in which they have significant expertise. *This seminar is mandatory for MIRECC, CESAMH, and Women’s Health Fellows;* it is optional for all other Residents. Additional supplemental V-Tel seminars are also offered by the Advanced Fellowship Program in Mental Illness Research and Treatment in biostatics, grant preparation, and manuscript writing, which are optional for all Residents.

2. **Addiction Treatment Coordinating Center Fellows’ Curriculum Call**  
   **When:** 1st Wednesday @ 11am-12:30pm  
   This is a monthly teleconference call that includes presentations on state-of-the-art research and practice in addictions for all interprofessional fellows from the seven Addictions Fellowship sites. This seminar provides an in-depth overview of key topics in addictions research and clinical practice by experts in the field. This seminar is *mandatory for Residents in the Advanced Fellowship in Addictions* and is open to all other Residents. It is organized by the Addiction Treatment Coordinating Center (ATCC) located at the VA Pittsburgh Healthcare System.

3. **Women’s Mental Health Teleconference Training Series**  
   **When:** 2nd Thursday @ 3pm  
   This is a monthly teleconference call that includes presentations on state of the art research and practice in women’s health by each of the Women’s Health fellowship sites. Topics include, but are not limited to interpersonal trauma sequelae and treatment issues; sexual dysfunction; lesbian, bisexual and transgender
issues in mental and medical care; behavioral medicine for eating disorders; obesity; chronic pain; homelessness in women Veterans; and postpartum depression and chronobiological basis of mood disorders specific to women. This seminar is required for residents in the Advanced Fellowship in Women's Health and is open to all other residents.

4. VASDHS PTSD Seminar
   When: Fridays @ 3pm This seminar is jointly run by the VAHSDC PTSD clinics (MST&IPT, PCTs) and includes training in evidenced based assessment and treatment of posttraumatic distress; research presentations on trauma risk, outcomes and treatment issues; and case discussions and consultations. This seminar is required for residents in the Advanced Fellowship in Women's Health and is open to all other residents.

In addition, the following seminars are optionally available to all fellows:

1. UCSD/VASDHS Biobehavioral Addictions Research Seminar
   When: 2nd & 4th Wednesday @ 4pm
   Professional development and research presentations facilitated by addictions research faculty.

2. UCSD Psychiatry Department Grand Rounds
   When: 4th Tuesday @ 8am
   Range of topics from molecular biological approaches for psychiatric disorders to public policy implications of psychiatry.

3. UCSD Biological Psychiatry and Neuroscience Fellowship Seminar
   When: Thursdays @ 1pm
   Recent advances in biological psychiatry and neurosciences and professional development topics.
Core Competencies

Core competencies are those skill sets that are essential to all practicing academic psychologists. Residents are expected to develop expertise in the core competencies by the end of the program. The core competencies address the professional psychological competencies, skills, abilities, proficiencies and knowledge in the content areas outlined in the APA Standards of Accreditation (SoA). The core competencies are the same in all four programs, and are listed below:

**Goal 1: Assessment, Diagnosis, and Intervention:** Residents will develop advanced competencies in the use of empirically derived treatments and systemic means of psycho-diagnostic and neuropsychological evaluation of patients.

**Goal 2: Consultation, Supervision, and Teaching:** Residents will gain advanced skills in delivering consultation to inter-professional teams, develop advanced skills in the supervision of psychology trainees including interns and practicum students; gain experience providing psycho-education to patients, family members and providers; and gain experience presenting clinical research findings.

**Goal 3: Scholarly Inquiry:** Residents will acquire competencies in several aspects of clinical research and scholarships. Key competency areas are discussed below.

   a) **Integration of Science and Practice:** Residents will learn to utilize the scientific literature to guide their clinical practice, and will use "lessons learned" from clinical practice to foster and shape their scientific hypotheses. Residents will learn to use their emerging competencies in clinical science to identify solutions to emerging clinical problems they encounter in practice and will systematically evaluate the effectiveness of their clinical work (e.g., monitoring patient outcomes).

   b) **Conducting Clinically Informed Research:** Residents will gain advanced skills in conducting clinical-research pertinent to the mental health needs of today’s veterans.

**Goal 4: Organization, Management, Administration, and Program Evaluation:** Residents will gain experience pertinent to organizational management and administration pertinent to the career development of clinical psychologists and scientists. Residents may choose additional training experiences that facilitate the development of advanced competencies in program evaluation.

**Goal 5: Professional, Ethical, and Legal Issues:** Residents will become competent (as appropriate for an entry level professional) in professional and collegial conduct, knowledge of the ethical guidelines of clinical psychology, and those ethical guidelines that govern the appropriate conduct of human subjects.
research. They will also become appropriately familiar with the wide array of legal issues pertinent to the proper conduct of clinical psychology and human subjects related research.

**Goal 6: Cultural and Individual Diversity Issues:** Residents will further develop their awareness and appreciation of cultural and individual differences and will attain cultural competence regarding the delivery of mental health services to a diverse cadre of veterans.

**Goal 7: Confidence and Professional Identity:** Residents will develop a strong professional identity and confidence and professional demeanor commensurate with their entry-level status in the profession.
Opportunities for Working with Diverse Patient Populations and for Developing Multicultural Competence

The program is organized and administered in such a way that respect for and understanding of cultural and individual diversity of faculty, staff, residents and consumers is fundamental and a core part of training at the VASDHS. Recent census data for San Diego County can be found here. As can be seen in these data, 22% of San Diego residents are under age 18 and 13.4% are over the age of 65. Women represent 49.7% of the population. 46% of the San Diego population self identifies as White non-Hispanic. The largest minority group is Hispanic or Latino (33.5%). 23.5% of residents indicated they were foreign born.

VASDHS serves, all adult age groups, Veteran cohorts, and ethnic/racial/cultural backgrounds, as well as both females and males. The Veteran population, itself, also represents a unique cultural within our community. Thus, residents receive training and experience working with this culture, as well as how the Veterans culture interacts with other aspects of diversity. There are 249,594 Veterans in San Diego County and in fiscal Year 2017, VASDHS served 83,014 Veterans. 22,238 of those Veterans were seen in mental health clinics for a total of 168,944 mental health visits. Veterans served within VASDHS mental health clinics were 84% male. With respect to age, 3% were under age 25, and 21% were age 65 or older. 47% were White non-Hispanic, 17% Hispanic, 14% African American, 9% Asian, 2% Hawaiian/Pacific Islander, and 1% American Indian. With respect to Veteran culture, the Navy represents the most frequent branch of service, and Persian Gulf Era Veterans (which includes Iraq and Afghanistan Veterans) is the largest cohort at 61%. As with the UCSD setting, the specific demographics of the patients seen at VASDHS differs slightly from clinic to clinic.

Each resident will receive training regarding sensitivity to issues of cultural and individual diversity, through the 10-12-week seminar dedicated to such topics, as they are discussed when appropriate in other seminars, and through ongoing consultation with research mentors and clinical supervisors. Supervisors are encouraged to make discussion of such issues an integral part of case conceptualization and treatment strategy development, and this competence is part of the formal evaluation of residents and supervisors. Prior to graduation, each resident is required to write about an important cultural diversity experience during the year including what they learned and how they benefited from supervision. Each resident also completes the California Brief Multicultural Competence Scale at the beginning and the end of the training period to assess the change in their level of cultural competence.

Evaluation Process

Supervisors and Residents are expected to exchange feedback routinely as a part of the supervisory process; the evaluation procedures are meant to formalize this continuous information flow. It is the responsibility of the
Program Directors and supervisors to ensure that evaluation occurs in a timely and constructive fashion, but Residents are encouraged and expected to take an active role. To that end, it is essential that Residents understand the philosophy and logistics of evaluation as they begin training. The Program Directors review the overall evaluation process with each Resident, and each individual supervisor reviews competencies for the specific track at the beginning of the training period.

Residents complete a self-assessment of their own skills and knowledge for each core competency at the beginning of the training year. Strengths and weaknesses that emerge from this self-assessment, as well as the Resident’s application materials, are discussed with supervisors and are considered in the development of the Resident’s individualized training plan. Residents complete additional self-assessments and supervisors complete competency-based evaluations of Residents at mid-year and end-of-year for each of the two years. The mid-point evaluations are intended to serve as a progress report for Residents to increase self-awareness and awareness of supervisor’s perceptions, discrepancies between self-ratings and supervisor ratings, and to help Residents focus on specific goals and areas of needed improvement as training progresses. We use a developmental rating scale to evaluate resident competencies. The minimum threshold expected of residents in order to graduate from the program is a rating of “competent” in all skills with at least a rating of “advanced competency” in three skills of their choice by the end of the training program. In the event that a supervisor suspects that a Resident is not meeting critical competencies, Due Process procedures are in place to work towards resolution of the problem. The Due Process procedure is reviewed in detail with Residents at the beginning of the Fellowship.

Residents provide a written evaluation of each supervisor (including primary clinical supervisor, research mentor, and other supervisors when applicable) at the end of the program.

As part of a continual quality improvement plan, the Program Directors conduct a self-study with Residents at mid-year and at the conclusion of each training year. The areas reviewed are balance of activities (clinical, teaching, research), amount, and quality of supervision, adequacy of facility resources, and professional relationships between the Residents and other healthcare professionals. The findings and minutes are distributed to the entire faculty for review and action when appropriate.

Application and Selection Process

Each applicant is asked to submit the following materials via the APPA CAS portal:

1. A brief statement of interest (maximum 2 pages), with the following: i) the special emphasis program you are applying to and why; ii) a brief summary of educational, clinical and research experiences relevant to the specific area of interest; iii) a summary of your training needs and goals for the
residency; and iv) a statement of your career goals. If you are applying to more than one track, please submit a separate letter of interest for each area.

2. A current curriculum vitae or resume.
3. Three letters of reference, including at least one from a past clinical supervisor and at least one from a past research supervisor.

Materials should be submitted via the APPA CAS by 11:59 PM EST (8:59 PST) pm on December 1, 2019. Applicants should be available for interview on Friday, January 24, 2020. Other interview dates and phone interviews may also be possible. Late applications will be considered only for positions are not filled by applicants who applied by the deadline.

Selection of residents is done by our Postdoctoral Selection Committee (consisting of the training director, programs directors, and supervisors for each emphasis area) with input from other psychologists in each emphasis area using the following criteria (not in order of priority): 1) quality and scope of scholarship, as indicated partially by research, conference presentations, and publications; 2) breadth and quality of previous general clinical training experience; 3) breadth, depth, and quality of training experience in the specific area of emphasis; 4) relationship between clinical and research interests/experience of the applicant; 5) evidence of accomplishments, 6) thoughtfulness of information provided in the cover letter, 7) goodness of fit between the applicant's stated objectives and the training program and medical center's resources, 8) strength of letters of recommendation from professionals who know the applicant well. The top three applicants in each emphasis area are invited to interview with the track director, program directors, primary supervisor, and other faculty. The applicants are reassessed based on their interviews using similar criteria to those stated above, with the opportunity to obtain further and clarifying information as needed, as well as an assessment of interpersonal skills. Final admission and hiring of residents is dependent on VASDHS Human Resources Service approval, which includes a federal background check, physical examination, and education/credential verification.

The program is an Equal Opportunity Employer. Our commitment to diversity includes attempting to ensure an appropriate representation of individuals along many dimensions, including (but not limited to) gender, sexual orientation, age, ethnic/racial minorities, and persons with disabilities. We provide a supportive and encouraging learning environment for students, regardless of ethnic background or physical needs, and applicants from diverse backgrounds are encouraged to apply.

The program has nondiscriminatory policies and operating conditions and avoids any actions that would restrict program access and participation. In recent years, California state law and University of California policy have prohibited the specific inclusion of race/ethnicity factors in the recruitment of staff and faculty. More recently, however, the University has initiated an Equal Opportunity/Affirmative Action Program to increase faculty and staff diversity with some success. There is no discrimination in faculty hiring and retention.
practices, resident recruitment and selection processes, or patient eligibility criteria concerning access to the various evaluation and treatment programs.
Contacting Mental Health Care Line

The VASDHS Mental Health Care Line Administration is open for business Monday through Friday, 8AM-4:30PM Pacific Standard Time, except on Federal holidays. The Psychology Training Program can be reached at the following address and contact information:

VASDHS Mental Health Care Line Training Programs (116B)
VA San Diego Healthcare System
3350 La Jolla Village Dr
San Diego, CA 92161
Telephone: (858) 552-8585 x3870
Email: vafellowship@ucsd.edu

Questions related to the program's accredited 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
Phone: (202) 336-5979 / Email: apaaccred@apa.org
Web: www.apa.org/ed/accreditation
Department of Veterans Affairs Onboarding of Health Professions Trainees

The Department of Veterans Affairs (VA) adheres to all Equal Employment Opportunity and Affirmative Action policies. As a Veterans Health Administration (VHA) Health Professions Trainee (HPT), you will receive a Federal appointment, and the following requirements will apply prior to that appointment

1. **U.S. Citizenship.** HPTs who receive a direct stipend (pay) must be U.S. citizens. Trainees who are not VA paid (without compensation-WOC) who are not U.S. citizens may be appointed and must provide current immigrant, non-immigrant or exchange visitor documents.

2. **U.S. Social Security Number.** All VA appointees must have a U.S. social security number (SSN) prior to beginning the pre-employment, on-boarding process at the VA.

3. **Selective Service Registration.** Male applicants born after 12/31/1959 must have registered for the Selective Service by age 26 to be eligible for U.S. government employment, including selection as a paid or WOC VA trainee. For additional information about the Selective Service System, and to register or to check your registration status visit https://www.sss.gov/. Anyone who was required to register but did not register before the age of 26 will need to apply for a Status Information Letter (SIL) and request a waiver. Waivers are rare and requests will be reviewed on a case by case basis by the VA Office of Human Resources Management. This process can take up to six months for a verdict.

4. **Fingerprint Screening and Background Investigation.** All HPTs will be fingerprinted and undergo screenings and background investigations. Additional details about the required background checks can be found at the following website: http://www.archives.gov/federal-register/codification/executive-order/10450.html.

5. **Drug Testing.** Per Executive Order 12564, the VA strives to be a Drug-Free Workplace. HPTs are not drug-tested prior to appointment, however are subject to random drug testing throughout the entire VA appointment period. You will be asked to sign an acknowledgement form stating you are aware of this practice. See item 8 below.

6. **Affiliation Agreement.** To ensure shared responsibility between an academic program and the VA there must be a current and fully executed Academic Affiliation Agreement on file with the VHA Office of Academic Affiliations (OAA). The affiliation agreement delineates the duties of VA and the affiliated institution. Most APA-accredited doctoral programs have an agreement on file. More information about this document can be found at https://www.va.gov/oaa/agreements.asp (see section on psychology internships). Post-degree
programs typically will not have an affiliation agreement, as the HPT is no longer enrolled in an academic program and the program is VA sponsored.

7. **TQCVL.** To streamline on-boarding of HPTs, VHA Office of Academic Affiliations requires completion of a Trainee Qualifications and Credentials Verification Letter (TQCVL). An Educational Official at the Affiliate must complete and sign this letter. For post-graduate programs where an affiliate is not the program sponsor, this process must be completed by the VA Training Director. Your VA appointment cannot happen until the TQCVL is submitted and signed by senior leadership from the VA facility. For more information about this document, please visit [https://www.va.gov/OAA/TQCVL.asp](https://www.va.gov/OAA/TQCVL.asp)

   a. **Health Requirements.** Among other things, the TQCVL confirms that you, the trainee, are fit to perform the essential functions (physical and mental) of the training program and immunized following current Center for Disease Control (CDC) guidelines and VHA policy. This protects you, other employees and patients while working in a healthcare facility. Required are annual tuberculosis screening, Hepatitis B vaccine as well as annual influenza vaccine. *Declinations are EXTREMELY rare.* If you decline the flu vaccine you will be required to wear a mask while in patient care areas of the VA.

   b. **Primary source verification of all prior education and training** is certified via the TQCVL. Training and Program Directors will be contacting the appropriate institutions to ensure you have the appropriate qualifications and credentials as required by the admission criteria of the training program in which you are enrolled.

8. **Additional On-boarding Forms.** Additional pre-employment forms include the Application for Health Professions Trainees (VA 10-2850D) and the Declaration for Federal Employment (OF 306). These documents and others are available online for review at [https://www.va.gov/oaa/app-forms.asp](https://www.va.gov/oaa/app-forms.asp). Falsifying any answer on these required Federal documents will result in the inability to appoint or immediate dismissal from the training program.

9. **Proof of Identity per VA.** VA on-boarding requires presentation of two source documents (IDs). Documents must be unexpired and names on both documents must match. For more information visit: [https://www.oit.va.gov/programs/piv/_media/docs/IDMatrix.pdf](https://www.oit.va.gov/programs/piv/_media/docs/IDMatrix.pdf)

Additional information regarding eligibility requirements (with hyperlinks)

Selective Service website outlining the requirements, benefits and penalties of registering vs. not registering: https://www.sss.gov/Registration/Why-Register/Benefits-and-Penalties

Additional information specific suitability information from Title 5 (referenced in VHA Handbook 5005 – hyperlinks included):

(b) **Specific factors.** In determining whether a person is suitable for Federal employment, only the following factors will be considered a basis for finding a person unsuitable and taking a suitability action:

1. Misconduct or negligence in employment;
2. Criminal or dishonest conduct;
3. Material, intentional false statement, or deception or fraud in examination or appointment;
4. Refusal to furnish testimony as required by § 5.4 of this chapter;
5. Alcohol abuse, without evidence of substantial rehabilitation, of a nature and duration that suggests that the applicant or appointee would be prevented from performing the duties of the position in question, or would constitute a direct threat to the property or safety of the applicant or appointee or others;
6. Illegal use of narcotics, drugs, or other controlled substances without evidence of substantial rehabilitation;
7. Knowing and willful engagement in acts or activities designed to overthrow the U.S. Government by force; and
8. Any statutory or regulatory bar which prevents the lawful employment of the person involved in the position in question.

(c) **Additional considerations.** OPM and agencies must consider any of the following additional considerations to the extent OPM or the relevant agency, in its sole discretion, deems any of them pertinent to the individual case:

1. The nature of the position for which the person is applying or in which the person is employed;
2. The nature and seriousness of the conduct;
3. The circumstances surrounding the conduct;
4. The recency of the conduct;
5. The age of the person involved at the time of the conduct;
6. Contributing societal conditions; and
7. The absence or presence of rehabilitation or efforts toward rehabilitation.
Postdoctoral Program Information and Outcomes (IR-c-23)

Postdoctoral Program Admissions

Date Program Tables are updated:

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 intern selection and practicum and academic preparation requirements:

| The VASDHS Psychology Clinical Research Postdoctoral Training Program is a 2-year postdoctoral training program based on the clinician-scientist model. The primary goal is to train psychologists to become leading clinical researchers in high priority areas of mental health relevant to Veterans. Over the course of the 2-year program, fellows are trained in clinical research and advanced clinical service delivery with state-of-the-art program administration and evaluation experiences in an interdisciplinary setting. At the end of the program, Residents are prepared for VA university medical center careers that integrate research, clinical, training, and leadership activities. The VASDHS/UCSD Psychology Clinical Research Postdoctoral Training Program consists of four tracts: 1) MIRECC Advanced Fellowship Program in Mental Illness Research and Treatment (Focused on schizophrenia and related psychotic disorders); 2) CESAMH Advanced Fellowship Program in Mental Illness Research and Treatment (focused on stress and trauma disorders such as Post Traumatic Stress Disorder (PTSD) and Traumatic Brain Injury (TBI)); 3) Advanced Fellowship in Women’s Health; and 4) Interprofessional Advanced Fellowship in Addiction Treatment. All four tracts are 2-year programs funded through the VA Office of Academic Affiliates. |

Describe any other required minimum criteria used to screen applicants:

| 1) Complete of an APA-accredited doctorate in clinical or counseling psychology and an APA-accredited internship in clinical psychology; 2) US citizenship (as required by VA); and 3) males born after 12/31/59 must have registered for the draft by age 26 years (as required by VA). Desirable qualifications include experience using evidence-based interventions, and career goals involving clinical-research, clinical care, and leadership and dissemination activities involving evidence-based practices in university-affiliated or VA or other medical center setting. Recruitment of men and women from diverse demographic groups (e.g. social, economic, and cultural) is a high priority. |

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### Financial and Other Benefit Support for Upcoming Training Year*

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount/Yes/No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Stipend/Salary for Full-time Residents</td>
<td>$51,101</td>
</tr>
<tr>
<td>Annual Stipend/Salary for Half-time Residents</td>
<td>NA</td>
</tr>
<tr>
<td>Program provides access to medical insurance for resident?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>If access to medical insurance is provided:</td>
<td></td>
</tr>
<tr>
<td>Trainee contribution to cost required?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Coverage of family member(s) available?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Coverage of legally married partner available?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Coverage of domestic partner available?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Hours of Annual Paid Personal Time Off (PTO and/or Vacation)</td>
<td>13 days</td>
</tr>
<tr>
<td>Hours of Annual Paid Sick Leave</td>
<td>13 days</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/No</td>
</tr>
<tr>
<td>Other Benefits (please describe):</td>
<td></td>
</tr>
</tbody>
</table>

*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>2015-2018</th>
<th>PD</th>
<th>EP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total # of residents who were in the 3 cohorts</td>
<td>24</td>
<td></td>
</tr>
<tr>
<td>Total # of residents who remain in training in the residency program</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>Community mental health center</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Federally qualified health center</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Independent primary care facility/clinic</td>
<td></td>
<td></td>
</tr>
<tr>
<td>University counseling center</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Veterans Affairs medical center</td>
<td>9</td>
<td></td>
</tr>
<tr>
<td>Military health center</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Academic health center</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Other medical center or hospital</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Psychiatric hospital</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Academic university/department</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Community college or other teaching setting</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Independent research institution</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Correctional facility</td>
<td></td>
<td></td>
</tr>
<tr>
<td>School district/system</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Independent practice setting</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Not currently employed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Changed to another field</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other (Family Leave =1)</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Unknown</td>
<td></td>
<td></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.