

VA San Diego Healthcare System/University of California San Diego Interprofessional Fellowship in Psychosocial Rehabilitation and Recovery Oriented Services (PSR Fellowship)

2024-2025 Program Brochure

Veterans Affairs San Diego Healthcare System (VASDHS)
3350 La Jolla Village Drive (116B)
San Diego, California 92161

VA



U.S. Department of Veterans Affairs

VA San Diego Healthcare System



CENTER OF RECOVERY EDUCATION



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Dear Applicant,

Thank you for your interest in the VA San Diego/UC San Diego PSR Fellowship program. I am glad that you are considering our program for your training. Our PSR Fellowship is currently in its 16th year of providing exceptional advanced training to mental health trainees committed to serving Veterans with serious mental illness (SMI), specifically those diagnosed with psychotic disorders. We have trained nearly 60 fellows from the fields of psychology, social work, vocational rehabilitation, occupational therapy, psychiatry, clinical pastoral education, and nursing. Our trainees have advanced to rewarding careers in a variety of settings.

We are very proud to have played an instrumental role in the American Psychological Association's recognition of SMI as a formal specialty in psychology in 2019. This will likely prove to be a watershed moment resulting in standardization of training and improved care for people with SMI. By joining us, you can be part of this exciting and important movement.

PSR fellows are an integral part of our award-winning, CARF-accredited Psychosocial Rehabilitation & Recovery Center, the Center of Recovery Education (CORE). The CORE family is a diverse group of talented and kind clinicians and scientist-practitioners who are deeply committed to serving Veterans with psychosis. We are committed to delivering high-quality, culturally sensitive evidence-based practices, developing and evaluating new practices, and disseminating best practices both on an individual level with our Veterans, and more broadly to the community through trainings, presentations, and publications.

Our fellowship provides high-caliber, challenging training that propels fellows into exciting and meaningful careers that make a positive difference in the world. If you are committed to growing in SMI and Veteran care, thriving in a stimulating multidisciplinary environment, and welcome the opportunity to exercise your creativity and cultivate your leadership abilities, the San Diego PSR Fellowship program is the place for you.

Please contact me at viara.quinones@va.gov and Jessica.McGovern@va.gov with any questions. On behalf of the PSR Fellowship and CORE team, I wish you all the best in your career, and we look forward to reviewing your application.

Very Respectfully,

Viara Quiñones, PhD
Director of Training

Our Staff



Rev. Shelia E. Crabb, DMin, BCC-MH
Chaplain, ACPE Certified Educator
Candidate (CEC)

Specialties: Spiritual care for mental health



Vanessa Girard, LCSW*

Social Worker, Local Recovery
Coordinator

Specialties: Grief; suicide prevention;
homeless and dually diagnosed Veterans



Eric Granholm, PhD
Psychologist, VASDHS Impact Unit 8
Chief, UCSD Psychiatry Professor

Specialties: Co-developer of Cognitive
Behavioral Social Skills Training
(CBSST) and mobile digital interventions
for psychosis; administration and
leadership



Nathan Nguyen, MS, CRC

Vocational Rehabilitation Counselor

Specialties: Supported Employment;
vocational rehabilitation in early
psychosis; clinic health & safety



Michelle Kirby, MDiv
Chaplain, ACPE Certified Educator,
VASDHS CPE Program Director

Specialties: Spiritual care for mental
health & addiction/recovery; LGBTQ+



Viara Qui?ones, PhD*

Psychologist, CORE Program Manager,
PSR Fellowship Training Director, UCSD
Assistant Clinical Professor

Specialties: Psychosis training; cultural
informed care; dual-diagnosis; somatic
comorbidities; leadership and
professional development



Jessica McGovern, PhD
Psychologist, PSR Fellowship Training
Associate Director

Specialties: Psychosis evidence-based
therapies (EBTs), Trauma EBTs, co-
occurring social and anxiety related
disorders, LGBTQ+ affirming care,
Dialectical Behavioral Therapy, and
Compensatory Cognitive Skills Training



Fiza Singh, MD

Psychiatrist, CORE Medical Director,
UCSD Psychiatry Associate Clinical
Professor

Specialties: Recovery-oriented
psychiatric medication management;
EEG neurofeedback in psychosis;
training of psychiatry fellows



Michael Madrid, MSN, MBA
CORE Registered Nurse, EPIC Program
Coordinator

Specialties: Medication management;
community integration and development;
early psychosis intervention and care
coordination



Nani Jenson, PsyD

Psychologist, PSR Clinical Supervisor

Specialties: Grief, trauma, substance
use, justice, and forensic psychology



Emily Treichler, PhD

Research Psychologist, UCSD
Psychiatry Assistant Professor

Specialties: Developer of Collaborative
Decision Skills Training intervention for
SMI

* Former VASDHS/UCSD PSR Fellows

Recruitment of an additional licensed social work supervisor is currently underway and expected to be complete before the 2024-2025 PSR Fellowship training year.

Introduction

The purpose of this brochure is to describe the VA San Diego Healthcare System (VASDHS)/University of California San Diego (UCSD) Interprofessional Fellowship Program in Psychosocial Rehabilitation and Recovery Oriented Services (**PSR Fellowship**). The VASDHS/UCSD PSR Fellowship was established under the leadership of Eric Granholm, Ph.D. in 2007, and is part of [a national program](#) composed of nine VA sites, coordinated by the VISN 5 Mental Illness Research, Education, and Clinical Center (MIRECC) in Baltimore, Maryland. The broad purpose of the PSR Fellowship program is to develop future mental health leaders with vision, knowledge, and commitment to transform mental health care systems in the 21st century by emphasizing functional capability, rehabilitation, and recovery of individuals with serious mental illness. The VASDHS/UCSD PSR Fellowship offers a **major area of study in serious mental illness (SMI)** to clinical psychology, social work, vocational rehabilitation, chaplaincy, nursing, and/or psychiatry graduate fellows. At least 90% of fellow time will be devoted to training in psychosocial rehabilitation of people managing symptoms of psychosis, at the outpatient CARF-accredited VASDHS Psychosocial Rehabilitation & Recovery Center throughout the training year and Veterans at the VASDHS inpatient psychiatry unit at least during a 12-week mini rotation. For psychology fellows, the fellowship will likely serve as excellent preparation for board certification (ABPP) in SMI. For chaplains, the fellowship is excellent preparation for Mental Health specialty certification; they are expected to receive 4 units of Clinical Pastoral Education (CPE) concurrently with their PSR training. For vocational rehabilitation specialist and counselors, the fellowship clinical opportunities may be modified for fellows that are interested in accumulating some of the Licensed Professional Clinical Counselor (LPCC) supervision hours.

Training for clinical psychology fellows in the VASDHS/UCSD PSR Fellowship program is based on the scientist-practitioner model, focused on creating a foundation in the delivery and dissemination of evidence-based clinical practices. Psychology fellows of the PSR Fellowship are formally a part of and adhere to the guidelines of the larger [VASDHS/UCSD Clinical Psychology Postdoctoral Residency Program](#), which has been accredited by the American Psychological Association since 2010. This brochure describes the PSR Fellowship program for **all disciplines**. At the end of the PSR Fellowship program, all fellows are prepared for VA or university medical center careers that integrate clinical, training, scholarly and leadership activities. The fellowship emphasizes training in professional practice, specifically the provision of psychosocial rehabilitation services. Fellows will learn to deliver high quality clinical care, to be critical contributors to and consumers of the scientific literature, and to let each of these areas inform the other.

The VASDHS/UCSD PSR Fellowship program was recognized as an “exemplary training site” in SMI with a **Certificate of Commendation** from Division 18 of the American Psychological Association (APA) in 2017 and in 2018 won the APA Division 18 **President’s Excellence in Training Award** “in recognition as an outstanding psychology training program, preparing learners to provide recovery-oriented, evidence-based services to adults diagnosed with serious mental illness.” Our curriculum was included in a [petition](#) to the APA that resulted in the approval of [SMI as a post-doctoral specialty](#) in 2019.

Facilities

PSR fellows provide clinical services within the [VASDHS](#) Mental Health Care Line. They work primarily at the **Center of Recovery Education (CORE)**, the VASDHS's CARF-accredited [Psychosocial Rehabilitation and Recovery Center](#) that is co-located at the Rio Clinic in Mission Valley (psychosocial rehab and psychotherapeutic services) and the VA medical center in La Jolla (psychiatry services). CORE was awarded the 2017 **Jeffrey Christopher Memorial Award** by the San Diego County Wellness and Recovery Summit “for excellence in improving the quality of life and connection to care for the people who live with mental health challenges and their families.”

The VASDHS Mental Health Care Line spans multiple service locations throughout San Diego County. The VASDHS medical center is a modern 400-bed general medical and surgical center situated adjacent to the UCSD campus and is closely affiliated with the Department of Psychiatry within the UCSD School of Medicine. The close university affiliation facilitates the program's scientist-practitioner training model as fellows may choose to become involved in research or training activities occurring at both the VA and the university campuses.

The VASDHS has approved medical residency training programs including medicine, surgery, anesthesia, neurology, pathology, psychiatry, radiology, and audiology. The medical staff is augmented by outstanding physicians, dentists, nurses, consultants, research investigators, and other attending practitioners in various specialties. There are over 2,000 full- and part-time professional and administrative staff members.

The VASDHS Mental Health Care Line has extensive inpatient and outpatient mental health facilities. The second floor of the Medical Center, for instance, is almost exclusively inhabited by mental health (psychology, psychiatry, social work, nursing, occupational therapy, and pharmacy) services. There are also 28 acute care psychiatry beds, including 14 psychiatric intensive care beds and 10 beds assigned to the Neurobehavioral Assessment Unit. In addition, there is a Substance Abuse Residential Rehabilitation Treatment Program (SARRTP) and comprehensive aftercare program for veterans with substance use disorders and their families.

Across the county, there are extensive medical and mental health services in the Community Based Outpatient Clinics (CBOCs). For instance, mental health programs located at the Mission Valley CBOC include a posttraumatic stress disorder (PTSD) Clinical Team (PCT), a Behavioral Health Interdisciplinary Program (BHIP; a general mental health clinic), and a Primary Care Mental Health Integration (PCMHI) Team. The **Rio Clinic** (Mission Valley Annex) houses CORE, the Wellness and Vocational Enhancement (WAVE) program, Mental Health Intensive Case Management (MHICM), and the Family Mental Health Community of Practice. In addition, the VASDHS has CBOCs in Chula Vista, Oceanside, and Escondido. The ASPIRE Center is a residential rehabilitation program (domiciliary) for Veterans with PTSD who are at risk for homelessness.

Veterans with a wide range of mental illnesses and behavioral problems are offered care in the VASDHS Mental Health Care Line, including those with serious mental illness, such as schizophrenia and bipolar disorder, other mood disorders, psychiatric problems stemming from medical illnesses, PTSD, substance use disorders, sexual trauma, interpersonal trauma, somatoform disorders, personality disorders, and a wide range of family and interpersonal

problems. Across locations, veteran care activities include psychiatric admissions, crisis intervention services, medication clinics, and individual, couple, family, and group therapies.

The VASDHS Psychology Service, which is part of the Mental Health Care Line, is focused on providing evidence-based assessments and treatments to improve the emotional and cognitive well-being of Veterans. It is an academically oriented service that shares the VA mission of excellence in clinical care, training, and clinically focused research. Currently accessible to the fellows are numerous part-time and full-time doctoral-level clinical psychologists, as well as psychiatrists, social workers, nursing staff, psychology technicians, vocational rehabilitation counselors, occupational therapists, peer support specialists, and administrative support staff. Many of the major sub-specialties of clinical psychology are also represented on the staff, including neuropsychology, geropsychology, couple therapy, substance use disorder treatment, behavioral medicine, posttraumatic stress disorder, and related psychology research. There are resources for computer-assisted psychological testing and videotaping of therapy sessions. All medical records charting and scheduling is completed electronically.

Other key resources within the VASDHS include the [VISN 22 Mental Illness Research, Education and Clinical Center \(MIRECC\)](#) and the [VA Center of Excellence in Stress and Mental Health \(CESAMH\)](#). MIRECCs were established by Congress in 1997 with the goal of bringing best practices in mental health care into the clinical settings of the VA. MIRECCs conduct research, produce clinical educational programs and products, and enhance clinical treatment to Veterans. The mission of our VISN-22 MIRECC at VASDHS (in partnership with the West Los Angeles VA and Long Beach VA) is to improve the long-term functional outcome of patients with chronic psychotic disorders, including schizophrenia, schizoaffective disorder, and psychotic mood disorders. CESAMH was established at the VASDHS in 2007 as one of three Centers of Excellence to meet the increasing need for research and education into psychological health effects of deployment, combat injury, and other stressors that have important mental health consequences for the growing veteran population. These Centers of Excellence are interdisciplinary in nature and are largely modeled after the MIRECCs. CESAMH's mission is to understand, prevent, and heal the effects of stress, including stress-related disorders, i.e., PTSD and Traumatic Brain Injury. CESAMH is multi-disciplinary and its scope of research ranges from basic science, psychophysiology, and genetics through pharmacological and psychosocial interventions and their implementation. With strength in translational research, the VASDHS MIRECC and CESAMH each provide ideal settings for providing fellows opportunities to engage in clinical research and dissemination activities.

[UCSD](#) is one of nine campuses of the University of California. 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 universities. The [UCSD Department of Psychiatry](#) was established in 1970 and has over 130 full-time 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

Geropsychiatry, an APA-accredited Joint Doctoral Program in Clinical Psychology; and an APA-accredited internship and postdoctoral residency 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.

Program Admissions

The VASDHS/UCSD PSR Fellowship aims to recruit four fellows each year from the disciplines of psychology, social work, chaplaincy, and vocational rehabilitation, nursing, and/or psychiatry¹. Psychology fellows in the PSR Fellowship would occupy up to two of the one-year postdoctoral positions offered by the VASDHS/UCSD Clinical Psychology Postdoctoral Residency Program, which also offers positions in the following other emphasis areas: Mood, Trauma, Anxiety, and General Mental Health (Behavioral Health Interdisciplinary Program (BHIP)); BHIP and Primary Care Mental Health Integration with an Emphasis in Lesbian, Gay, Bisexual, Transgender (LGBT) Mental Health; Family Mental Health Community of Practice (FMHCP) & BHIP; Home-Based Primary Care; Outpatient PTSD Treatment Team Rotations; Psychosomatic/Behavioral Medicine rotations; and 28-day Substance Abuse Rehabilitation and Recovery Program (SARRTP). Further details on these positions can be found in the brochure on the [website](#) for the clinical psychology postdoctoral fellowship program. **Psychology applicants may apply to both the PSR Fellowship program and any of these other positions/emphasis areas if desired.**

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:

Requirements for consideration are: 1a) **Psychology applicants:** completion of an APA-accredited doctorate in clinical or counseling psychology, which includes completion of one's dissertation (proof of completion of all requirements for the doctorate may be required, e.g., transcript showing completion or a letter from the Director of Training) and an APA-accredited internship in professional psychology; 1b) **Other applicants:** completion of a postgraduate degree (MD, PhD, RN, MSW, MA, MS, MDiv); 1c) **Chaplain applicants:** Must have also completed four units of Clinical Pastoral Education from a CPE program accredited by the US Department of Education. 2) US citizenship (as required by VA); and 3) Males born after December 31, 1959 must have registered for the draft by age 26 years (as required by VA). Desirable qualifications include a commitment to and some experience working with people with SMI, and career goals involving clinical, research, leadership and dissemination activities involving evidence-based practices in university-affiliated, VA or other medical center settings. Recruitment of individuals from diverse social and economic backgrounds and diverse cultural and demographic groups is a high priority. All fellows are funded through stipends from the Department of Veterans Affairs Office of Academic Affiliations (OAA). Stipends come with health benefits plus co-pay and are currently **\$58,571** for post-doctoral psychology fellows, **\$45,831** for post-masters social work, vocational rehabilitation, and

¹ Recruitment of disciplines other than psychology, social work, chaplaincy, and vocational rehabilitation is TBD at press; please contact PSR Fellowship leadership (viara.quinones@va.gov; Jessica.McGovern@va.gov) to inquire before applying.

chaplaincy fellows, **\$53,865** for post-masters nursing fellows, and equivalent to the salary of fellows at our affiliate UCSD for psychiatry residents; stipends are at least comparable to others both locally and nationally. Of note, Fellows are not eligible to contribute to either the VA Thrift Savings Plan (TSP) and/or VA retirement funds due to the nature of their type of appointment within the system. Funds from VASDHS Psychology and Education Service budgets, as well as funds from the UCSD Psychiatry Education Training Council, are used to cover program needs (e.g., office and testing supplies, computers, copying educational materials, publication of program brochures, etc.) and select program activities (e.g., food during program orientation and welcome events).

Describe any other required minimum criteria used to screen applicants: None

Financial and Other Benefit Support for Upcoming Training Year

| | | |
|--|--|--|
| Annual Stipend/Salary for Full-time Fellows | \$58,571 for postdoctoral psychology; \$45,831 for post-masters social work/voc rehab/chaplain; \$53,865 for post-masters nursing; equivalent to psychiatry residents for MDs* | |
| Annual Stipend/Salary for Half-time Fellows | None | |
| Program provides access to medical insurance for trainee? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| If access to medical insurance is provided: | | |
| Trainee contribution to cost required? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Coverage of family member(s) available? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Coverage of legally married partner available? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Coverage of domestic partner available? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Hours of Annual Paid Personal Time Off (PTO and/or Vacation) | 104 | |
| Hours of Annual Paid Sick Leave | 104 | |
| In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/fellows in excess of personal time off and sick leave? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Other Benefits (please describe): 11 paid federal holidays. All Paid Personal Time Off and Sick Leave is accrued over the course of the year at a rate of 4 hours per pay period (pay periods are every two weeks). | | |

Post-Residency Positions

The following table outlines the current positions (as of October 2021) of fellows who completed the PSR Fellowship program during the 2017-2020 training years, which included fellows from psychology, social work, vocational rehabilitation, and occupational therapy. The Clinical Psychology Postdoctoral Residency Program [brochure](#) outlines post-residency positions for

clinical psychology fellows only across that whole program (i.e., PSR and the other psychology positions).

| | |
|--|--------------------|
| Total # of fellows who completed fellowship in the 7 cohorts | 25 |
| Total # of fellows who remain in training in the residency program | 6 |
| Current Position | No. Fellows |
| Veterans Affairs medical center | 15 |
| Other medical center or hospital | 0 |
| Academic university/department | 1 |
| Community mental health center | 0 |
| Correctional facility | 0 |
| Independent practice | 1 |
| School district/system | 0 |
| Other | 2 |
| Not currently employed | 0 |

Training Program Structure

Training focuses primarily on clinical assessment and evidenced-based psychosocial rehabilitation and treatment of psychotic and comorbid disorders within a multidisciplinary setting. Additionally, the program allows an opportunity for program evaluation and research, as well as teaching and dissemination through direct, mentored supervision of junior trainees (for psychology fellows when available), and formal presentations and lectures to academic, medical, and community audiences. The program is designed to offer a broad range of experiences to develop a number of core professional competencies (described below) that build on the interests of the fellow and the particular strengths of our faculty and department. Fellows have a shared responsibility in designing and planning their residency experience in collaboration with their mentoring committee. The residency requires a **365-day commitment, from the beginning of September 2023 to the end of August 2024.**

Fellows work a **40-hour work week**, thereby completing 2,080 hours of supervised professional experience (SPE) across the training year. All of these hours are counted as SPE for psychology licensure in California; therefore, the total is well above the minimum of 1,500 postdoctoral SPE hours required for psychology licensure in California. **Social work fellows who intend to get licensed in California are assured they will accrue hours providing the different types of experience required by the Board of Behavioral Sciences for LCSW licensure:** clinical, non-clinical, and supervision. All PSR fellows (regardless of discipline) are expected to spend **a minimum of 16 hours per week conducting direct clinical services with Veterans** (corresponding to the “clinical” activities requirement for California LCSW licensure; 750 hours overall as the minimum). Prospective fellows are expected to consult with the state board where they intend to pursue licensure regarding specifics pertaining to professional experience requirements.

General office hours are **8:00am – 4:30pm Monday through Friday**; a request for an alternate schedule must be approved by the primary supervisor and Director of Training. If approved, the

timekeeper must be notified so that the fellow's tour can be changed in the VA Time & Attendance System (VATAS). **PSR fellows typically spend most of their time at the Rio Clinic in Mission Valley (8989 Rio San Diego Drive, 92108).** All fellows will spend one day per week at the La Jolla Medical Center (3350 La Jolla Village Drive, 92161) during their 3-month inpatient unit rotation. Fellows may also spend Tuesday afternoons at La Jolla to attend seminars by the psychology postdoctoral residency program (all of these are required for psychology fellows but only one is required for other fellows). Chaplain PSR fellows spend one day per week in La Jolla for CPE didactics and supervision throughout the year.

There are **11 federal holidays, 13 sick leave days, and 13 annual leave days.** There are no part-time fellows.

The 12-month training year begins with an **orientation month** in which fellows are oriented to the VASDHS and receive an introduction to CORE. Orientation includes an overview of policy and procedures, competency objectives and evaluation procedures. VASDHS requires fellows to participate in an abbreviated New Employee Orientation (NEO), typically lasting less than 4 hours. Trainees also must complete a 90-minute online training that is intended to take the place of all the hospital annual mandatory training modules.

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

Training includes: 1) **supervised clinical experiences** with Veterans on a multidisciplinary treatment team (primarily the outpatient CORE program, but also a mini-rotation on the inpatient psychiatry unit, approx. 65-80% effort, including face-to-face clinical hours, preparation for clinical efforts, and if desired for psychology fellows, provision of supervision to junior trainees* or a peer support specialist); 2) **didactics and training activities** (approx. 15% effort, including weekly seminars and receipt of clinical supervision); and 3) **research/dissemination activities** (variable effort, up to 20%).

*Supervision training will depend on the recruitment of junior trainees (e.g., psychology practicum student) for the training year.

PSR fellows are expected to:

- Collaborate with and directly provide services to people with serious mental illness (mainly psychotic disorders)
- Conduct evidence-based assessments and deliver evidence-based psychosocial rehabilitation practices and treatments relative to their disciplines, such as cognitive behavioral therapy for psychosis, social skills training, illness management and recovery, Dialectical Behavioral Therapy, and supported employment
- Participate in the CORE and inpatient psychiatry interprofessional treatment teams
- Attend required seminars and trainings
- Conduct research/program evaluation and disseminate evidence-based services through the Education Dissemination Project and other outreach efforts
- Assist with clinic administration.

A developmental training approach will be used for the clinical training in which learning objectives are accomplished primarily through experiential clinical learning under supervision and mentoring by the fellow's supervisors. A fellow's clinical training follows a progression from observing supervisor modeling (*in vivo* service delivery and role plays in supervision), to delivering services with direct observation of fellow-delivered services by the supervisor and/or with supervisor and fellow as co-therapists, to increasingly autonomous, albeit monitored and supervised, service delivery. In the beginning of the training year, caseloads are lower, with increasing intensity as the year progresses.

Training Curriculum

The goal of the residency is to train fellows to deliver evidence-based and recovery-oriented PSR services for people diagnosed with psychotic disorders, disseminate these approaches, and develop and critically evaluate new approaches. Moreover, PSR Fellowship program fellows learn to function in leadership positions on interprofessional teams working with veterans with SMI.

The rationale for focusing on evidence-based psychosocial rehabilitation services is that veterans and other consumers of mental health treatment deserve access to treatments that are known to be effective. Dissemination of evidence-based approaches is critical because many mental health providers do not have access to or do not avail themselves of such training. Fellows will be prepared to help other mental health professionals appreciate the value of evidence-based care and train their colleagues to deliver such care. Fellows learn to deliver evidence-based services in a recovery model context, including developing personalized functioning goals and participating actively in treatment by choosing from a menu of treatment program opportunities, including inpatient and outpatient services, medication management, vocational skills development, psychoeducation, social skills training, illness management and recovery, cognitive/behavioral therapy, substance use/dual-diagnosis treatment, and community integration resources. The goal is to both reduce symptoms and improve quality of life in Veterans with SMI. Finally, fellows learn to be good consumers of the scientific literature to keep their clinical practice state-of-the-art.

Clinical Training

Clinical training in the PSR Fellowship occurs primarily at CORE, at the Rio Clinic in Mission Valley. All PSR fellows also complete a mini-rotation on the inpatient psychiatry unit at the La Jolla medical center (1 day per week for 12 weeks). This clinical training model provides experiences with key integrated PSR services across both outpatient and inpatient settings. All PSR fellows assist Veterans in developing and following recovery plans and provide a full continuum of evidence based psychosocial rehabilitation services including screenings, formal assessments, consultation, individual and group treatment, and psychoeducation. See the *Summary of PSR Fellow Duties* on p24-25 for details. **The primary clinical supervisors for the fellowship are currently Shelia Crabb, D.Min., Vanessa Girard, LCSW, Christina Holsworth, MS CRC, Jessica McGovern, PhD, Nani Jenson, PsyD, and Patrick Sullivan, LCSW. Additional supervision for certain clinical activities may be provided by Neal Doran, PhD (Chief of the Psychology Service), Viara Quiñones, PhD (CORE Program Manager), Fiza Singh, MD (CORE Medical Director), and Emily Treichler, PhD (Recruitment of a LCSW primary supervisor is currently underway and will be finalized before the**

commencement of the 2024-2025 PSR Fellowship class. Dr. Granholm will be transitioning to full-time UCSD Psychiatry Professor during the 2024 training year.)

Research/Dissemination Training & the Education Dissemination Project

PSR fellows are required to design, implement, and disseminate an **Education Dissemination Project** (sometimes referred to as the “research/dissemination project.” This project will be overseen by a project mentor selected by the fellow from the supervisors in the CORE program. The [PSR Fellowship hub site](#) describes the scope of the project as follows:

Fellows are required to develop and implement an “Education Dissemination Project” in order to enhance the education of health professionals and the quality of care provided to veterans at their respective fellowship sites. The projects enhance the psychosocial rehabilitation beyond the training site. The projects focus on a variety of dissemination efforts such as developing continuing education or research conferences for health professionals, curricula for health professions training programs, patient education materials, or clinical demonstration projects. Fellows are also encouraged to take leadership roles by developing didactic projects and disseminating educational materials through a variety of efforts (e.g., planning regional invitational meetings, developing a training website) in order to educate health professionals and advance psychosocial rehabilitation training and collaboration.

Fellows spend **up to 20% of their time (1-8 hours per week) on the Education Dissemination Project (EDP)**. The fellow and their primary supervisor, along with input from the project mentor will determine the amount of time designated for the project based on its scope, intensity, and time required to execute the project as part of the fellow’s training plan. Should a project take less time than was originally anticipated a change in the training plan should occur. Some fellows elect to spend additional hours on research outside the 40-hour week. The project is intended to be limited in scope so that it may be achieved within the training period and supports the focus area. Some examples include developing a treatment manual, developing a training to be delivered to other professionals, implementing a new intervention and conducting program evaluation of outcomes, involvement in an ongoing clinical research program, writing a research article using preexisting data, writing a review paper or case study, or writing a grant. Fellows can also develop a project from existing data in one of many federally-funded labs. One example might be evaluating client satisfaction and other key outcomes before and after implementation of an intervention designed or adapted by the fellow (e.g., a group in which Veterans with psychosis learn mindfulness skills and deploy these skills to manage symptoms and enhance pleasure while attending musical events in the community). Training in dissemination occurs with one’s project mentor. The nature of this project will be determined in collaboration with the supervision team and documented in the training plan. **Fellows will be asked to present their individual projects at the UCSD Judd Symposium (typically during April of each year) and may pursue the opportunity to present their projects at other national conferences as well.**

Fellows are also strongly encouraged to submit to present, either individually or as a group, at one outside conference that the VA typically funds for PSR fellows, which will likely be the National Alliance on Mental Illness (NAMI) Convention in the summer of

2024. This presentation can be either their Education Dissemination Project or another presentation in the area of psychosocial rehabilitation of people with SMI.

The [PSR Fellowship website](#) lists examples of EDPs. Examples of EDPs by past VA San Diego PSR fellows include:

- *Telehealth Satisfaction and Serious Mental Illness*
- *Community Conversations about Mental Illness*
- *Service & Leadership Team (SALT): Developing a Novel Intervention to Increase Community Engagement and Empowerment for Veterans with Psychosis Spectrum Disorders*
- *Integrating Recovery-Oriented Care Principles into Inpatient Nursing Education Curricula*
- *Leave No One Behind: Caring Cards to and from Veterans*
- *Demystifying Psychosis: Changing Misconceptions of Psychosis Among Mental Health Providers*
- *Mindful Music Appreciation and Community Engagement*
- *Compassion Focused Therapy for Dual Recovery*
- *Teaching Spanish to Veterans with Psychiatric Disabilities: A Creative Approach to Rehabilitation and Recovery*
- *Journaling to Promote Recovery in Veterans with Psychosis*

Diversity Training

Each fellow will receive training regarding issues of ***cultural and individual diversity***. Issues related to cultural and individual diversity are covered in the Clinical Psychology Postdoctoral Fellowship Program's Diversity Seminar specifically but are also discussed across seminars, including in the PSR Fellowship-specific PSR Seminar. Issues related to cultural diversity are included in the evaluation forms filled out by the fellows concerning their supervisors, and supervisors are encouraged to make discussion of such issues an integral part of case conceptualization and treatment strategy development. Each fellow also completes a measure of multicultural competency at the beginning and the end of the training year to assess the change in their level of cultural competence.

Supervision

All PSR fellows receive **at least 4 hours of supervision per week**, and at least 2 of these hours are individual supervision; for psychology fellows, these are with 2 psychologists licensed in California; for other fellows, at least one of the supervisors is from the same discipline as the fellow. At least one hour of weekly individual supervision comes from the primary supervisor (for psychology fellows, this is a CA-licensed psychologist; for social work fellows, it is a CA-licensed social worker). Additional individual supervision comes from secondary supervisors who may be selected for individual cases, to provide supervision of group treatments throughout the year, or as an Education Dissemination Project mentor. Individual supervision involves direct observation of clinical care or review of services using video/audio recordings at least once per evaluation period. Trainees also have group supervision for each group they co-facilitate, and for Supported Employment supervision. Supervision assignments are documented in the fellow's training plan.

Psychology fellows who wish to pursue licensure in the State of California must complete the most current Supervision Agreement form (e.g., from the California Board of Psychology, or BOP) with their primary supervisor at the beginning of the training year. This form will be

retained by the primary supervisor until the end of the training year, at which point it will be submitted to the BOP with a completed copy of the most current Verification of Experience Form. These forms are available through the licensing board (e.g., [California Board of Psychology website](#)). Supervisors of fellows from other disciplines will similarly complete and sign any relevant licensure forms. For all fellows, the onus is on the fellow to present the appropriate forms to their supervisors.

Licensing boards in some states, including California, may require that supervised clinical hours be documented on a weekly basis throughout the year. Each fellow is responsible for maintaining this documentation and ensuring that it will satisfy the licensing board requirements of the state(s) in which he/she is interested in becoming licensed. Fellows who wish to pursue licensure in a state other than California are encouraged to determine that state's licensure requirements prior to beginning the fellowship and to comply with that state's regulations regarding postgraduate supervised professional experience. While the Training Director(s) will attempt to support fellows' efforts, **it is each fellow's responsibility to ensure that the correct licensure forms are completed, and most current licensing law requirements are met for licensure in the state where the fellow plans to practice.**

A developmental training approach will be used in which learning objectives are accomplished primarily through experiential clinical learning under supervision and mentoring by the fellow's supervisors. Training considerations take precedence over service delivery. Generally, a fellow's training will follow a progression from observing supervisor modeling to increasingly autonomous, albeit monitored and supervised, service delivery using direct live observation of fellow service delivery and videotape/audiotape of sessions, rather than relying only on narrative reports.

Finally, psychology fellows may have an opportunity for **training in providing supervision** by supervising the clinical work of a clinical psychology practicum student if one is recruited, or possibly a psychiatry resident or peer support specialist. We offer a seminar on clinical supervision, typically at the beginning of the training year. Training in providing supervision may also be available to social work fellows if a social work intern is recruited in CORE for the training year.

Seminars

PSR fellows have a total of **10 formal didactics** available to them that are provided by the PSR Fellowship program and the Clinical Psychology Postdoctoral Residency Program. As described below, all 10 are required for **psychology** fellows. Fellows from **other disciplines** are required to attend 5 of the didactics but are welcome to attend any of the others as well. Fellows from these disciplines are encouraged to review the content and schedules for the 5 optional didactics in conjunction with their supervisors and attend those topics that are relevant to their clinical work and professional development. In addition to the didactics listed below, **chaplain fellows** will also attend trainings required by the CPE training program. The days shown below are from the 2022-23 training year and subject to change.

Seminars required for all PSR fellows (regardless of discipline):

1. **Safety and Assault Prevention Training:** This one-time training typically occurs at the start of the training year and is focused on ways to maintain safety in clinical contexts.
2. **Laws and Ethics Seminar:** The ethics portion of this one-time seminar covers content such as: 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 legal portion of the seminar covers content such as: 1) informed consent, 2) HIPPA, 3) confidentiality, 4) reporting laws, and 5) an individual's access to their own medical record. It
3. **PSR Seminar/Peer Consultation:** This seminar meets twice per month for 60 minutes throughout the entire training year. One session per month is dedicated to presentations pertaining to the recovery model and delivery of recovery-oriented evidence-based psychosocial rehabilitation interventions for people with psychotic disorders. In the other session, clinical supervisors facilitate a peer consultation session for fellows to consult on their therapy/counseling cases. This seminar is organized by the PSR Fellowship Training Director.
4. **PSR Fellowship Didactic Webinar:** This seminar series is held online on the 2nd Wednesday of each month for 90 minutes and is attended by fellows in all nine VA PSR fellowship programs nationally. The seminar, therefore, offers an opportunity to interact and learn from experiences of local fellows, as well as fellows around the country via a web- and phone-based medium. Topics include (but are not limited to) education dissemination projects across sites, professional development issues, and/or site-specific recovery, psychosocial rehabilitation efforts.
5. **Cultural Diversity Seminar:** This seminar meets once per month (2nd Tuesday) as well as during orientation week, for 60 minutes each meeting. The objective for this seminar is for fellows to learn to integrate a culturally competent perspective comprised of knowledge, skills, and awareness.

Required for *Psychology* PSR Fellows, Optional for Other PSR Fellows:

1. **Supervision in Clinical Psychology Seminar:** This two-hour seminar meets on one occasion. The goal of the seminar is to prepare fellows to deliver high-quality supervision during their training year. It is organized by the VA psychology postdoctoral training directors.
2. **Professional Development Seminar:** This seminar meets once per month (1st Tuesday of the month) for 60 minutes for the entire training year and focuses on professional development issues.
3. **Clinical Psychology Postdoctoral Residency Seminar** (3rd Tuesday of each month): This seminar meets monthly for 60 minutes for the entire training year. This seminar provides the opportunity for the fellows in this training program to participate in professional development activities specific to their career objectives.
4. **Substance Use Disorders Seminar** (required for psychology fellows 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 required areas to meet the California Board of Psychology licensure requirement on the evaluation and treatment of alcohol and other substance use disorders.
5. **Evidence-Based Practices Seminar** (Tuesdays from mid-January to mid-May): This seminar provides multi-hour training in evidence-based practices commonly utilized within the VA mental health system.

Other Educational Opportunities for Fellows

Professional Consultation and Mentorship

Professional consultation and mentorship are available through multiple sources. Any member of the program staff will be happy to offer, or help connect fellows with, consultation for the purpose of professional growth. Potential sources of consultation include VA mental health careline staff or by university-affiliated faculty members.

Diversity Resources

The [UCSD Department of Psychiatry Chair's Advisory Committee on Diversity Issues](#) welcomes trainee members to join in promoting diversity, equity, and inclusion in the Department. The committee meets monthly on the first Monday and subcommittees meet in the interim, and their website outlines many diversity-related resources available to trainees and staff. Fellows who would like more information or to join can contact the Committee Chair, Lisa Eyler (lteyler@ucsd.edu).

The committee created a new feature on the department website – the "[Diversity Corner](#)". This part of the website will feature quarterly rotating content with the goal of providing a glimpse into diversity-related events in our department as well as stimulating general discussion of diversity-related topics. The Diversity Committee has also started a listserv to disseminate noteworthy manuscripts related to diversity. Fellows are encouraged to contact Carol Franz (cfranz@ucsd.edu), to be added to the email list, as well as to suggest a topic or manuscript for consideration for "Diversity Reads."

The **VA Psychology Training Council's Multicultural and Diversity Committee** has multiple resources that may be of interest. One is a "diversity discussions" listserv. Once per month an article is sent out and discussion about the topic is invited. Every month or so there is also a consultation call advertised on the listserv.

Academic Resources

Fellows needing academic resources will have access to the **UCSD library system** as well as the **VA's medical library**.

- The UCSD library system will be available electronically through a desktop computer located in the fellows' VA La Jolla (Building 1) bullpen.
- The VA medical library provides access to several research databases (e.g. PsycINFO, PubMed, etc.) and also offer interlibrary loan services.

The UCSD Department of Psychiatry offers **Grand Rounds** once a month on Tuesdays from 8:00-9:30am. Fellows are encouraged to attend, as interested. The schedule can be found [here](#). Grand Rounds presentations can be accessed virtually through the Department website above. For live streaming, log on a few minutes before a presentation. To view an archived presentation, click on the "archived" option up at the top of the page.

The [UCSD Psychiatry & Education Training \(PET\) Council](#) offers a **Professional Development Lecture Series** accessible to all trainees and faculty. In the 2021 – 2022 training year, the lecture series was scheduled for the 3rd Thursday of each month, 12:30 – 1:30pm and available online. As this series is not a part of fellows' standard schedules, they must speak with their supervisor(s) if they hope to attend any of the talks in this series and should be aware that

changes to their schedule (which may require 60 days' notice) may be required. A recent outline of topics is listed below:

Other educational and training resources offered by the UCSD Department of Psychiatry can be found [here](#). This website also has valuable information on academic software site licenses and other professional development resources.

The UC San Diego School of Medicine offers an **Educational Development and Evaluation seminar series**, in which instruction in academic teaching methodologies is offered. Course listings and RSVPs are available [here](#).

The **VA Psychology Training Council (VAPTC)** has created a library of psychology training didactic modules. This library includes resources (PowerPoint slide presentations with detailed speaker notes, directed readings, and quizzes) for didactic and/or seminar presentations on a variety of topics. The broad categories include consultation, leadership and management, psychological intervention, psychological assessment, supervision, teaching, and science. Trainees will have access to an intranet site for these resources.

The [UCSD Teaching + Learning Commons](#) works with graduate students and postdocs to develop active, engaged classroom materials that promote student learning. It also has a large collection of courses on teaching.

Diversity, Equity, & Inclusion (DEI)

The program is organized and administered in such a way that respect for and understanding of cultural and individual diversity of faculty, staff, fellows and Veterans/consumers is fundamental to and a core part of training at the VASDHS. We employ Tervalon and Murry-Garcia's concept of cultural humility (1998)¹ as a practice that "incorporates a lifelong commitment to self-evaluation and self-critique, to redressing the power imbalances in the patient-physician dynamic, and to developing mutually beneficial and non-paternalistic clinical and advocacy partnerships with communities on behalf of individuals and defined populations."

We provide a supportive and encouraging learning environment for all persons. Our commitment to diversity includes attempting to ensure an appropriate representation of individuals along many dimensions, including gender, sexual orientation, age, religious, ethnicity/race, and (dis)abilities in our trainees and faculty. Our program contains Tervalon and Murray-Garcia's three elements of cultural humility: 1) We model the "ability to maintain an interpersonal stance that is other-oriented (or open to the other) in relation to aspects of cultural identity that are most important to the person (Hook, et al, 2013)²; 2) We invite the trainees to join any of the several VASDHS and UCSD committees which are actively addressing aspects of structural racism and other inequities; and 3) We provide opportunities for trainees to engage stakeholders and to participate in partnerships to advocate for diversity, equity, and inclusion.

Demographic Information for San Diego County and VASDHS

¹ Tervalon, M., Murray-Garcia, J. (1998). Cultural humility versus cultural competence: A critical distinction in defining physician training outcomes in multicultural education. *Journal of Health Care for the Poor and Underserved*, 9, 117-125.

² Hook, J.N. et al. (2013). Cultural humility: Measuring openness to culturally diverse clients. *Journal of Counseling Psychology*, 60(3), 353-366.

San Diego County is [ethnically diverse](#). Less than half of the San Diego population self identifies as White non-Hispanic (34.7%). The largest group of people of color is Hispanic or Latino (40.3%), and 23.5% of Fellows indicated they were foreign born. Those that identified as female represent 49.9% of the population. 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 group within our community. Thus, Fellows receive training and experience working with this culture, as well as how the Veterans culture interacts with other aspects of diversity. There are 261,009 Veterans in San Diego and Imperial County, and in fiscal Year 2021, VASDHS served 84,572 Veterans. More than 25,000 of those Veterans were seen in mental health clinics for a total of about 200,000 mental health visits. Veterans served within VASDHS mental health clinics were 81% male. With respect to age, 2% were under age 25, and 21% were age 65 or older. 45% were White non-Hispanic, 19% Hispanic, 17% 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 74%.

Each fellow will receive training regarding sensitivity to issues of cultural and individual diversity. Issues related to cultural and individual diversity are covered in a special bi-weekly seminar and are discussed in the PSR seminar and other seminars. Issues related to cultural diversity are included in the evaluation forms filled out by the fellows concerning their supervisors, and supervisors are encouraged to make discussion of such issues an integral part of case conceptualization and treatment strategy development. Each fellow also completes an evaluation of multicultural competence at the beginning and the end of the training year to assess the change in their level of cultural competence.

DEI Training Program Activities: VASDHS Mental Health Care Line and UCSD Committees

The VASDHS Mental Health Care Line recently reconstituted the Diversity Action Committee, a group that meets twice monthly to report on the progress of subcommittees and to present CME seminars. Currently active subcommittees consist of EConsults (CPRS request for consultation on diversity-related clinical issues), LC3 (LGBTQ+ Clinical Care Committee), Outreach, Quality Improvement, and Training and Didactics. Trainees are welcome to participate. Examples of the CME seminars include Dr. Faith Prelli presenting on “Antiracism in Clinical relationships Accountability Model” and Dr. Nia Billings discussing “Implicit Attitudes Toward People with Disabilities.”

The CORE program also has a Diversity Committee that fellows are encouraged to join; the committee hosts regular meetings and topics in the PSR seminar and oversees implementation of the CORE Cultural Competence & Diversity Plan.

The UCSD Department of Psychiatry has a long-standing Chair’s Advisory Board on Diversity that meets monthly and includes about 20 subcommittees, which include workgroups for each Gender, LGBTQ+, and (Dis)Ability focus; a separate subcommittee each on Attracting, Retaining, and Elevating BIPOC staff, trainees, and faculty; a group focused on Mechanisms to facilitate community engagement and advocacy; a workgroup on educational programs/workshops on structural inequality, systemic racism, and police brutality; a subcommittee on Clinical Service Diversity & Serving people of color and low-income clients;

and other DEI topics. The Diversity Committee also sponsors seminars on implicit Bias and allyship, hosts a yearly Cultural Celebration, awards a Diversity Champion faculty and trainee.

DEI Training Program Activities: Stakeholder Engagement and Advocacy

The VASDHS Mental Health Care Line host and annual Mental Health Summit on issues related to Veterans and caregivers that is open to the public and brings together multiple stakeholder groups. Trainee are encouraged to attend, and CME are available for faculty.

Professional advocacy is a topic in the Diversity Seminar and this year UCSD will present a panel discussion on Incorporating Advocacy into Professional Life that will be part of orientation.

Equal Opportunity Employer

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, Fellow recruitment and selection processes, or patient eligibility criteria concerning access to the various evaluation and treatment programs.

Core Competencies

Core competencies (or standards of practice) are those skill sets that are essential to all practicing clinicians. Fellows are expected to develop expertise in the core competencies of their respective discipline by the end of the training program. For **psychology** fellows, the PSR Fellowship follows the core competencies of the VASDHS/UCSD Clinical Psychology Postdoctoral Residency Program, which address the professional psychological competencies, skills, abilities, proficiencies and knowledge in the content areas outlined in the APA *Standards of Accreditation (SoA)*. For fellows from **other disciplines**, the PSR Fellowship broadly follows these same content areas but specific competencies within them differ by discipline. Fellows are assigned supervisors from their own disciplines and have discipline-specific evaluations to ensure that they develop expertise relevant to their disciplines. **Chaplain fellows** will be evaluated in part using formal CPE training program evaluations.

- I. **Psychological Assessment, Diagnosis, and Consultation:** By the end of the fellowship, fellows should be able to formulate a multi-axial diagnosis by integrating data from a variety of sources, including clinical interview, family history, medical history, mental status examinations, and psychological testing data. All fellows must demonstrate expertise in psychological assessment. By the end of the fellowship, the fellow should be able to develop a testing battery to answer a specific referral question, administer and score a wide variety of psychological tests in a standardized fashion, interpret test data, integrate test data with history and other sources, write a report that clearly answers the referral question, and provide clear, relevant, treatment recommendations. All fellows must be able to assist consumers and other providers in formulating treatment plans and setting attainable treatment goals, as well as linking consumers with needed resources to achieve them.

II. General Principles of Evidenced-Based Interventions: All fellows are expected to understand and demonstrate an advanced understanding and application of psychotherapeutic techniques common to all theoretical approaches including empathy, rapport, relationship building, and history-taking, and must become proficient in the procedures involved in specific individual and group evidence-based practices relevant to their position and rotations.

III. Rehabilitation and Recovery: The goal of psychiatric rehabilitation is to enable individuals to transcend limits imposed by mental illness, social barriers, internalized stigma and second-class personhood, so that the individual can achieve their goals and aspirations in living, learning, working and socializing roles. To this end, fellows must instill hope in verbal communication, make encouraging statements regarding an individual's potential for recovery, and promote hopefulness for recovery, including identifying strengths. Fellows must emphasize treatment choices and participation in the healthcare process and integrate the use of community resources and entitlement programs into treatment planning and goal achievement. Fellows must also communicate with family members, friends, neighborhood and other natural community supports when appropriate to support efforts to change and goal attainment.

IV. Laws and Ethics: Postdoctoral fellows must demonstrate sound professional clinical judgment and behavior in the application of assessment and intervention procedures with individuals; familiarity with and understanding of professional and legal standards in professional psychology, and a thorough working understanding of APA ethical principles and standards.

V. Cultural Diversity: are expected to demonstrate expertise in cultural diversity. Cultural and ethnic issues cut across all core competency areas. Fellows develop expertise in cultural diversity and culturally responsive mental health care through exposure to a multiethnic staff and Veteran population, through coursework, case conceptualization discussions, clinical supervision, and consultation. By the end of the fellowship, fellows are expected to 1) identify cultural/ethnic issues relevant to the case; 2) explain how these issues affect psychiatric presentation, psychological test data, response to staff and treatment interventions, and 3) modify assessment/treatment approach based on supervisory and consultant input. The VASDHS has a culturally diverse patient population, which ensures adequate contact to develop skills in this area.

VI. Supervision: Fellows receive supervision and are provided opportunities to supervise other providers (e.g., clinical psychology interns and practicum students), under the guidance of their own supervisor. Fellows come to supervision prepared to discuss cases, including but not limited to providing video- or audiotape of sessions and using theoretical framework to describe a case, assessment or treatment plan. Fellows seek supervision for complex cases and communicate in a professional manner with supervisors and supervisees. Open discussion and acceptance of constructive feedback during supervision is essential to the learning process.

VII. Clinical Research/Dissemination Skills: Fellows receive training in program evaluation and clinical research. These include the following skills: a) formulating testable hypotheses / identifying a service need; b) designing and carrying out a research/program evaluation project; c) presenting findings to other professionals.

VIII. Organization, Management and Administration: Fellows must use time-management

skills to maintain an efficient practice, comply with program and local facility policies and procedures that support training and patient care, and complete administrative tasks that support training and patient care, to function as effective practitioners.

IX. Interprofessional Practice: Fellows receive training in interprofessional practice including clarity regarding roles, approaches, and resources. Fellows develop expertise in interprofessional practice through teamwork and communication. By the end of the fellowship, they are expected to collaborate effectively with other professionals in practice and in research.

Evaluation Process

Supervisors and fellows 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 Training Director and supervisors to ensure that evaluation occurs in a timely and constructive fashion, and fellows are encouraged and expected to take an active role. To that end, it is essential that fellows understand the philosophy and logistics of evaluation as they begin training. The Training Director will review the overall evaluation process during initial orientation processes, and each individual supervisor should review exit competencies for the specific position at the beginning of the year.

In collaboration with their supervisors, fellows will 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 fellow's application materials, will be used to develop a training plan. Supervisors will complete competency-based evaluations of fellows at mid-year and end-of-training. The mid-point evaluations are intended to be a progress report for fellows to increase self-awareness and awareness of supervisors' perceptions, discrepancies between self-ratings and supervisor ratings, and to help the fellow focus on specific goals and areas of needed improvement as training progresses. Fellows are rated as "having a problem," "progressing well" (consistent with where they would be expected to be given their training) or having developed competence in each rated area. In the event that a supervisor suspects that a fellow is not fulfilling critical competencies, **Due Process** procedures are in place to work towards resolution of the problem is possible. The Due Process procedure is reviewed in detail with fellows at the beginning of the year.

Chaplain fellows will additionally complete quarterly evaluations in the CPE program.

Fellows will also be asked to provide a written evaluation of each supervisor at end- of-training. Fellows and supervisors are expected to discuss their feedback of each other to facilitate mutual understanding and growth.

As part of a continual quality improvement plan, the Training Directors of both the Clinical Psychology Postdoctoral Training Program and PSR Fellowship training program will conduct self-studies (i.e., feedback sessions) with fellows at mid-year and at the conclusion of each training year. The areas reviewed are caseload mix and volume, balance of activities (clinical, teaching, research), amount and quality of supervision, adequacy of facility resources, and professional relationships between the fellows and other healthcare professionals. The findings and minutes are distributed to the entire faculty for review and action when appropriate.

The PSR Fellowship hub site also administers a feedback survey to PSR fellows nationally at the middle and end of the training year.

Summary of PSR Fellow Duties

The following table summarizes the duties of a PSR fellow in detail. These duties are from the 2024-2025 training year and subject to change.

| Duty | Explanation | Requirements |
|--|--|---|
| Serve as Recovery Coach | Assist Veterans in CORE in developing and following Recovery Plans | All fellows serve as recovery coaches. |
| Provide individual assessment and psychosocial rehabilitation services | <p>Services will vary depending on fellow’s discipline and may include the following, with an emphasis on attaining competence in evidence-based practices:</p> <ul style="list-style-type: none"> ▪ Assessments (e.g., biopsychosocial diagnostic intake assessments, psychological testing, vocational assessments) ▪ Psychotherapy (including CBT for psychosis) ▪ Spiritual counseling (for chaplains) ▪ Supported Employment (SE) ▪ Community inclusion support ▪ Crisis intervention (e.g., suicide assessment and safety planning) ▪ Case management ▪ Consult (referral) screening (psych & SW only) | All fellows conduct individual services relevant to their discipline. VR fellow carries at least 10 SE cases; others carry at least 1. |
| Provide group-based psychosocial rehabilitation services | <p>Services will vary depending on fellow’s discipline and may include the following, with an emphasis on attaining competence in evidence-based practices:</p> <ul style="list-style-type: none"> ▪ Community engagement and inclusion groups ▪ Psychoeducational groups (e.g., IMR) ▪ Whole Health groups ▪ Psychotherapy & skills training classes (e.g., CBT, SST, DBT) ▪ Wellness groups (e.g., Wellness Planning) ▪ Spirituality groups | All residents run groups (Illness Management & Recovery, Social Skills Training (SST) or Cognitive Behavioral Social Skills Training, and Wellness Recovery Action Plan are all required for all disciplines; CBT for psychosis additionally required for psychology and social work). All residents must pursue SST certification. |
| Complete a mini rotation on inpatient psychiatry unit (2 South) | <ul style="list-style-type: none"> ▪ Facilitate 2 weekly groups (PRRC Bridging Group & ACT) ▪ Conduct CORE intakes for Veterans on unit when needed (psych & SW fellows only) ▪ Conduct other assessments (e.g., psychological / neuropsychological, vocational, spiritual) or short-term counseling or recovery coaching, as needed ▪ Occasionally attend staff meetings to conduct CORE outreach/provide consultation about recovery-oriented care | All fellows complete an inpatient rotation, 3 months each @ 1 day per week. |

| | | |
|----------------------------------|---|---|
| | <ul style="list-style-type: none"> Attend monthly treatment team and recovery meeting | |
| Conduct outreach activities | Educational trainings in the principles and strategies of psychosocial rehabilitation and recovery-oriented services for other staff and/or trainees, at VASDHS/UCSD and/or elsewhere | All fellows conduct at least 1 outreach activity. |
| Conduct scholarly activity | Spend up to 8 hours per week designing and implementing an Education Dissemination Project (EDP, as described above) either alone or as a group project with other San Diego PSR fellows and disseminating its results. | All residents complete a project, present it at least at UCSD Judd Symposium & national PSR Fellowship webinar. Submission to NAMI conference strongly encouraged. |
| Assist in clinic administration | Assist with clinic administration tasks, e.g., maintenance of CARF standards. | All fellows assist with admin as needed. |
| Attend supervision and didactics | Attend individual supervision (with 2 supervisors), group supervision (including team meeting) and attend required didactics, as described in Training Manual | All residents attend the didactics required for their discipline (including CPE didactics for chaplain resident). |
| Provide supervision | Psychology fellows only: May provide vertical supervision to a junior trainee or peer support specialist, if desired and one is available. | No requirement; optional. |

Application and Selection Process

To apply for the PSR Fellowship, applicants should submit the following:

1. A brief **statement of interest** (maximum 2 pages), with the following:
 - a) For psychology applicants, the emphasis area to which you are applying (i.e., PSR only or PSR and other position(s)), including a rank ordering of your preferred rotations. Please describe why you are applying to each emphasis area.
 - b) A brief summary of educational, clinical and research experiences relevant to recovery oriented PSR of people with SMI, and any other specific area(s) of interest.
 - c) A summary of your training needs and goals for the fellowship.
 - d) A statement of your career goals.
2. A **current curriculum vitae or resume**.
3. **Three letters of reference**, preferably from clinical and research supervisors.

Psychology applicants applying during Phase 1 should submit these materials via the APPA CAS portal at <http://www.appic.org/About-APPIC/Postdoctoral/APPA-Postdoc-Application-Information> by 8:59pm PST/11:59pm EST on **December 1, 2023**. Interview invitations for psychology candidates are expected to be sent out by **December 20, 2023** and interviews will be conducted virtually by **January 29-30, 2024**.

Chaplain applicants should submit an ACPE application to Michelle.Kirby@va.gov with the subject "PSR Fellowship application," and additionally include the PSR Fellowship requirements of a statement of interest and 3 letters of reference, as described above, by **February 9, 2024**. Please see the CPE program website for more information about the CPE application: <https://www.va.gov/san-diego-health-care/work-with-us/internships-and-fellowships/clinical->

[pastoral-education/](#). Please attempt to send all documents as attachments in the fewest number of emails as possible. Letters of recommendation can be emailed by the candidate; they do not need to come from the reference directly.

Applicants from other disciplines (social work, vocational rehabilitation, nursing, psychiatry) should email their application materials to Jessica.McGovern@va.gov with the subject, "LAST NAME-DISCIPLINE (i.e., SW, VR, RN, MD) PSR Fellowship Application" by **February 9, 2024**. Please attempt to send all documents as attachments in the fewest number of emails as possible. Letters of recommendation can be emailed by the candidate; they do not need to come from the reference directly.

Interviews for candidates other than psychology will occur virtually between **February – March 2024**.

For **social work candidates**, offers will be made on the national PSR Fellowship social work uniform notification date of **March 14, 2024 between 9:00am-12:00pm PST via telephone** and these candidates will be expected to respond with their decision within 2 hours of receiving an offer.

Offers for other disciplines may occur after that date, until those positions are filled. Applications from candidates other than psychology (and Phase 2 psychology applicants, if applicable) will be accepted until all positions are filled.

Selection of all PSR fellows is done by the PSR Fellowship Training Director and supervisors, and for psychology candidates additionally applying to other emphasis areas, our Postdoctoral Selection Committee (consisting of the Training Director and supervisors for each emphasis area), with input from other staff members using the following criteria (not in order of priority):

1. Breadth and quality of previous general clinical training experience
2. Breadth, depth, and quality of training experience in recovery-oriented PSR for people with SMI, and any other specific areas of emphasis
3. Quality and scope of scholarship, as indicated partially by research, conference presentations, and publications
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 applicants will be invited to interview (virtually) with the PSR Fellowship Training Director, supervisors, and other relevant faculty. During the interviews, 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 fellows are 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, fellow recruitment and selection processes, or patient eligibility criteria concerning access to the various evaluation and treatment programs.

Program Modifications Due to COVID-19

Current facility information and guidance can be found at the VA San Diego Healthcare System (VASDHS) COVID-19 link:

<https://dvagov.sharepoint.com/sites/VHAVASDDirector/c19/SitePages/Home.aspx>.

Training policies and processes are made in conjunction with VASDHS and Mental Health Care Line guidance, as well as information from OAA, APA, APICC, CA Board of Psychology, and current best practices from national training programs.

Hospital staff and trainees have currently transitioned back to working onsite and providing a combination of in person and virtual care, with in-person care is the most common mode of treatment in outpatient clinics. Training seminars are currently being delivered in person. Clinical meetings occur in a mix of in person and online settings. All hospital staff and patients/visitors are currently required to wear a medical grade face mask at all times in patient care areas and optional in all non-clinical areas. All staff and visitors are screened for COVID-19 symptoms and medical grade masks are distributed at all entrances to the hospital.

COVID-19 Vaccine Mandate: All VA staff, volunteers, contractors, and trainees are required to be fully vaccinated against COVID-19. Proof of vaccination is required prior to the start of the training year.

Current policies are subject to change in accordance with changes to federal, state, and local policies.

Contact Information

For questions about the VASDHS/UCSD PSR Fellowship program, please contact:

Viara Quiñones, PhD and Jessica McGovern, PhD

PSR Fellowship Training Leads

Email: Viara.Quinones@va.gov and Jessica.McGovern@va.gov (please email with questions first and include the words “PSR Fellowship” in your subject line)

Dr. McGovern is the point of contact between DEC 2023-JUN 2024.

Telephone: (619) 228-8001

Website: <https://www.va.gov/san-diego-health-care/work-with-us/internships-and-fellowships/psychology-internship-and-fellowship-programs/#va-interprofessional-fellowshi>

PSR Fellowship national website:

https://www.mirecc.va.gov/visn5/training/interprofessional_fellowship_program.asp

For questions regarding the broader VASDHS / UCSD Clinical Psychology Postdoctoral Residency Program, please contact:

Natalie Castriotta, PhD or Emily Wilhite, PhD

Clinical Psychology Postdoctoral Residency Program Director of Training and Associate Director of Training, respectively

Email: natalie.castriotta@va.gov or emily.wilhite@va.gov

Web: <https://www.va.gov/san-diego-health-care/work-with-us/internships-and-fellowships/psychology-internship-and-fellowship-programs/#psychology-clinical-research-p>

For questions from chaplain applicants regarding the Clinical Pastoral Education (CPE) program, please contact:

Rev. Michelle Kirby, MDiv

VASDHS CPE Program Director

Email: michelle.kirby@va.gov

Telephone: (858) 642-3496

Web: <https://www.va.gov/san-diego-health-care/work-with-us/internships-and-fellowships/clinical-pastoral-education/>

Questions related to the psychology postdoctoral residency program's accreditation status should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation

American Psychological Association

740 1st Street, NE

Washington, DC 20002

Phone: (202) 336-5979

Email: apaaccred@apa.org

Web: www.apa.org/ed/accreditation