VA Advanced Fellowship Program in Mental Illness Research and Treatment at the Capitol Health Care Network Mental Illness Research, Education, and Clinical Center
http://www.mirecc.va.gov/visn5/research/fellowship.asp

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The VA Advanced Fellowship Program in Mental Illness Research and Treatment at the Capitol Health Care Network (VISN 5) Mental Illness Research, Education, and Clinical Center (MIRECC) has two 2-year fellowship positions: one position for a Physician Fellow from psychiatry, neurology, radiology, internal medicine, or other areas of medicine and one position for a Psychologist/Allied Health Fellow from clinical psychology, counseling psychology, social work, nursing, or pharmacy.

Our program trains fellows to become successful researchers whose work increases access to effective mental health services for all Veterans who need them. People living with mental health conditions face stigma, discrimination, poverty, homelessness, lack of access to health care, and health disparities that are enormous barriers to recovery. We are clinician researchers who are committed to addressing this through innovative applied research and resource development. Our research program addresses some of the most important mental health services research priorities within VA: evaluating peer-delivered mental health services to support their implementation and dissemination; determining effective strategies for engaging Veterans in mental health services and ensuring that those services are personally meaningful; developing interventions that promote holistic and self-directed recovery and by addressing the intersections of gender, age, Veteran identity and other social identities with mental health and healthcare; actively involving Veterans who may benefit from specialized mental health services; and working towards reducing suicide through better identification of and engagement with those at highest risk.

Fellows develop independent programs of research that address these and other high priority areas. We actively mentor and support fellows in writing and obtaining mentored early career investigator awards including VA Career Development and NIH K Awards (6 awards in the last 7 years) in areas of great importance to VA and Veteran mental health. Fellows devote time to supervised delivery of mental health services, both to identify important clinical questions and to experience the challenges and successes related to translating scientific findings into their practice. Didactic offerings offer focused learning in biostatistical methods, health informatics, and grant writing alongside opportunities to develop and apply knowledge to support the equity and empowerment of people living with mental health conditions. Fellows spend approximately 65% of their time in research-related research and clinical activities, 25% in clinical service and training activities, and 10% in didactic and administrative activities. We are committed to supporting diversity and seek applications from candidates representing different geographic areas, ages, gender identities, racial and ethnic backgrounds, sexual orientations, disabilities, disciplines, and life experiences.

Established in 2003, we are part of the national VA Advanced Fellowship Program in Mental Illness Research and Treatment. Our Center is located at the Baltimore VA Medical Center and is affiliated with the University of Maryland School of Medicine, making it an outstanding collaborative and interdisciplinary setting. Detailed information can be found on the national MIRECC website at http://www.mirecc.va.gov/mirecc_fellowship.asp and at the VISN 5 website at http://www.mirecc.va.gov/visn5/research/fellowship.asp/.

Candidate Requirements

A successful candidate will have graduate training in applied research in mental health and recovery, will have actively participated in research with resultant presentations and publications, will demonstrate a commitment to the scientist-practitioner model, will have training in empirically supported treatments for mental illness, and will demonstrate a commitment to serving Veterans. We are especially interested in applicants who want to develop research in evidence-based service delivery for Veterans experiencing early episode psychosis; the intersection of mental illness and substance use disorders; mental illness and aging; stigma and treatment engagement; sleep, circadian science, and mental health recovery; and applications of measurement-based care to improve outcomes for Veterans living with mental illness.
Physician applicants must have completed ACGME-accredited training, be board eligible or board certified, and have an active, unrestricted U.S. to practice. International medical graduates must also have a current visa and an ECFMG certificate that is valid indefinitely. Applicants on a J-1 visa must also have current ECFMG sponsorship. Eligible psychologists and allied health professionals must be U.S. citizens. Psychologist applicants must have graduated from an American Psychological Association (APA) or Canadian Psychological Association (CPA) accredited doctoral program in clinical or counseling psychology (or be on track to complete graduate training prior to beginning fellowship) and must have completed an APA- or CPA-accredited internship. For eligibility requirements for other Allied Health disciplines, contact Dr. Sherry Beaudreau at Sherry.Beaudreau@va.gov or Dr. Nathan Hantke at hantke@ohsu.edu.

Application Procedures

Applications are being accepted now through December 1, 2023. We will review completed applications and extend interview invitations during late December 2023 and early January 2024. Offers will be extended in late January and early February 2024. All applicants should submit (1) A letter of interest that outlines career goals, research interests, and goodness of fit with our program; (2) A current curriculum vitae; (3) Official graduate transcripts; (4) A signed letter from your graduate program that lists date of dissertation proposal, anticipated or actual date of dissertation defense, and anticipated or actual date of graduation; (5) Three signed letters of recommendation, one of which must be from an internship supervisor. Psychologist applicants should submit these materials through the APPA CAS portal (http://appic.org/AAPI-APPA/APPA-Postdoc-Application-Information). Please email questions to Dr. Bennett at Melanie.Bennett@va.gov.

Program Structure and Training Experiences

Fellows develop independent programs of research that address these and other high priority areas. We actively mentor and support fellows in writing and obtaining mentored early career investigator awards including VA Career Development and NIH K Awards (6 awards in the last 7 years) in areas of great importance to VA and Veteran mental health. Fellows devote time to supervised delivery of mental health services, both to identify important clinical questions and to experience the challenges and successes related to translating scientific findings into their practice. Didactic offerings offer focused learning in biostatistical methods, health informatics, and grant writing alongside opportunities to develop and apply knowledge to support the equity and empowerment of people living with mental health conditions. Fellows spend approximately 65% of their time in research-related research and clinical activities, 25% in clinical service and training activities, and 10% in didactic and administrative activities.

Fellows establish individual goals and timelines in collaboration with their mentors at the beginning of the Fellowship program. Within this individualized program, there is a core set of research, service delivery, and educational activity goals that fellows work to achieve during their involvement with the program. Successful completion of these goals indicates that Fellows demonstrate competency in the research, educational, and clinical activities listed below. Mentors assess the progress of each Fellow at regular intervals.

Research Training

Fellows work with a mentoring team to develop their research interests in line with the mission of the VA. As part of this process fellows will review the literature and define a specific research question within the field of serious mental illness, and then design a pilot project aimed at collecting data to inform their chosen line of research. The pilot project allows fellows to learn through doing how to accomplish all regulatory requirements, lead a research team, work with data management and analysis staff, and use pilot data to support a grant submission. Fellows have the opportunity to work with the Administrative Data Sub-Unit of the Research Core to answer questions related to VA service use in the VAMHCS and VISN 5. Fellows lead and contribute to writing papers and all write a grant application.

For many fellows, their research activities involve service delivery, including the development and testing of new assessment measures, intervention programs, and training tools. Fellows’ research often yields clinical products such as treatment manuals, new measures, and clinical training protocols. Fellows often work with Veterans, family
members, and VA mental health clinicians to develop and test new tools and treatments. Fellows’ research routinely contributes to the improvement of clinical services within the VAMHCS.

Clinical Training

**Clinical Training In the VHA.** Clinical training in the VA offers an excellent opportunity to work within the largest integrated health service system in the country. VA is often at the forefront of health care and mental health care innovation in the United States. Some examples: Our long-standing electronic medical record allows for seamless and integrated care – you can see all the health care your patients have received and easily communicate with their other providers. Veterans have access to interdisciplinary care with all kinds of programming, from social work, to physical therapy, to help with housing, and more. VA has long centered recovery-oriented care in mental health. We are the largest employer of Peer Specialists in the country. We have successfully integrated mental health providers into traditionally medical settings like primary care and nursing homes.

Additionally, in contrast to a societal narrative that characterizes Veterans as a uniform population conforming to certain broad stereotypes, Veterans are a diverse and varied group of individuals. Both people of color and lower income/socioeconomic status individuals are overrepresented in VA healthcare. A large cohort of older adults are served in the VA; however, younger individuals are increasingly enrolling in VA care, including a growing number of women. Transgender individuals are also overrepresented in VA health care, and the VA is at the forefront of establishing progressive and open policies regarding non-discriminatory health care for these individuals. In addition, Veterans receiving services in the VA, on average, have more complex medical and psychiatric symptom presentations than the general population. Clinical work in the VA, then, is challenging and rewarding, as we address intersecting social, medical, and psychiatric concerns, leveraging the resources of a interdisciplinary and multifaceted service system.

This is not to say that there aren’t significant gaps to address – this is where our fellows come in. By engaging in direct clinical service delivery experiences of their choosing, our training offers fellows the unique opportunity to engage in research informed practice and practice informed research in a way that it integrated and intellectually enriching. And, because VA clinical innovations historically have set an example for the rest of the country, our clinical research moves health care forward.

**Clinical Training Opportunities in the Fellowship.** Fellows are encouraged to identify supervised experiences that are of interest to them and to create a clinical training plan that meets their personal goals and integrates well with their research interests. Our MIRECC maintains close collaborative relationships with mental health programs across the VA Maryland Health Care System. Building on these, we can help place fellows in clinical experiences that are tailored to their interests and training needs.

Our fellowship offers a range of clinical training opportunities that encompass the development of both generalized clinical competencies and specific training in the assessment and treatment of SMI, as desired by fellows. Clinical experiences are graduated in complexity over the course of the training program; over time, fellows are exposed to more complex cases and increased responsibility for more aspects of a Veteran’s overall care needs. All fellows’ clinical training experiences are supervised by licensed clinical psychologists who are experts in evidence-based practices for Veterans with SMI. Because our fellowship prepares fellows to serve as experts in evidence-based and recovery-oriented care for individuals with SMI, fellows also can develop and provide consultation, tools, and training to direct service providers on these topics.

**Potential settings** include inpatient psychiatry, outpatient mental health, substance abuse treatment service, trauma service, psychosocial rehabilitation (both outpatient and residential), mental health intensive case management, primary care-mental health integration, neuropsychiatry, sleep clinic, pain clinic, caregiver support, family intervention team, and more. **Training opportunities** include learning evidence-based practices for Veterans with SMI; administering qualitative and quantitative assessments and providing feedback; providing individual and group interventions; receiving supervision from experienced clinical psychologists; adapting interventions to overcome implementation barriers; learning to provide supervision to trainees via a tiered supervision model; interfacing with a diverse inter-professional team that includes psychiatry, psychology, social work, nursing, and peer support services;
providing consultation and/or clinical didactics to service providers; developing and disseminating assessment, intervention, and training materials for use in direct service delivery; providing (supervised) clinical supervision to junior trainees, including learning supervisory concepts, providing direct clinical supervision, and receiving supervision of that supervision; using the empirical literature to enhance patient care by incorporating evidence-based approaches into assessment, treatment planning, treatment implementation, and evaluation of treatment outcomes; and, training in complex ethical and legal issues regarding service provision to individuals with SMI and applying this knowledge to clinical decision-making with specific patients.

**Interfacing with the MIRECC Clinical Core.** The VISN 5 MIRECC’s Clinical Core focuses on activities at both national and local levels to support our mission of putting recovery into clinical practice, offering fellows additional opportunities to receive gold standard training, implement evidence-based practices, and participate in training efforts.

At the national level, we are a major hub site for the VA National Social Skills Training (SST) program. SST is a recovery-oriented, evidence-based practice for individuals with serious mental illness. The program has trained, to date, over 1042 VA staff across the country, including 90 Peer Specialists, 48 Master Trainers, and 273 fellows of different disciplines across the VA system.

At the local level, our Clinical Core partners with clinical programs and staff at the VAMHCS and in VISN 5 to support recovery-oriented and evidence-based clinical services for Veterans with mental illness. We are committed to fostering collaborative and mutually beneficial relationships among researchers, clinicians, Veterans, and others who share this important mission. Fellows participate in Clinical Core projects that intersect with their research and clinical interests, such as working on clinical program needs assessments, training VA mental health staff in evidence-based practices for Veterans living with SMI, and adapting interventions to the needs of these Veterans.

**Activities to Enhance Fellows’ Competence as Educators**

Fellows participate in the MIRECC’s Education Core and ongoing educational activities within the Center. These include creating and delivering presentations, webinars, and dissemination materials that educate clinicians, Peer Specialists, Veterans with SMI, family members, and community providers on topics related to working with individuals with SMI and the Fellows’ areas of expertise. To further support Fellows’ transition to independent researchers and clinicians, fellows have opportunities to mentor psychology externs and interns in clinical or research activities.

**Didactics**

Fellows participate in didactics and career development activities that ensure that our fellows are immersed in an atmosphere of training that values excellent clinical care, high quality (and mission critical) clinical research, and appropriate integration of science and practice. Fellows attend bi-monthly structured didactics provided by the Fellowship Hub Site that address advanced research methodologies, professional writing, biostatistics, and research ethics. Fellows also have access to additional didactic series to enhance the clinical training they receive, including the VA Inter-Professional Fellowship Program in Psychosocial Rehabilitation (PSR) and Recovery Seminar Series (for which our MIRECC is the Hub Site) and the VISN 5 PTSD and Neuropsychology Fellowships. To support career development, first year Fellows attend a professional development seminar that brings together VAMHCS psychology Fellows in trauma, neuropsychology, and HIV/HEP C care. Facilitated by a clinical psychologist with no direct supervisory relationship with the Fellows, this seminar meets bi-monthly and is used to review career trajectory, career goals, training goals, and their progress toward licensure and independent practice. Our affiliation with the University of Maryland School of Medicine offers access to a variety of seminars, grand rounds presentations, lectures, and trainings.

**Requirements for Completion**

Fellows develop individualized training plans. Those pursuing academic research careers should be competitive for the academic employment market in terms of numbers of publications, teaching and supervision experience, ability to collect research data, and plans to submit grant applications in their field of study including VA Career Development...
Awards or NIH K-Awards. Fellows pursuing careers that will involve service delivery, administration, policy development, and/or education/training will be ready to pursue entry-level leadership roles in the VA healthcare system and/or other academic institutions that integrate research such that the above activities are grounded in the empirical literature. In such cases, fellows will be prepared to serve as expert in serious mental illness and to develop programming or policy that will serve to enhance the services provided to these individuals.

Fellows are evaluated twice yearly in seven areas:

**Scholarly Inquiry and Clinical Research**: Fellows will pursue a program of clinical research with guidance from a team of mentors. Fellows will become proficient in the process of developing research ideas and communicating these ideas for various scholarly purposes.

**Application of Current Scientific Knowledge to Clinical Practice**: Fellows will develop competency in the administration of measures for clinical assessment and diagnosis as well as in the use of empirically supported treatments. Opportunities exist for Fellows to gain competence in neuropsychological evaluation.

**Consultation, Supervision, and Teaching**: Fellows will gain advanced skills in clinical consultation, clinical-research supervision, and teaching through experiences that allow him/her to interact within his/her area of expertise and knowledge with Veterans, MIRECC investigators, research staff, and mental health treatment teams. Opportunities exist for Fellows to work with junior trainees in psychology and family members.

**Organizational Management and Administration**: Fellows will gain experience in organizational management and administration pertinent to their career development and clinical research program. Fellows may choose training experiences that facilitate the development of advanced competencies in program evaluation.

**Professional Conduct, Ethics, and Legal Matters**: Fellows will become competent (as appropriate for an entry-level professional) in professional and collegial conduct, knowledge of the ethical guidelines of clinical assessment, diagnosis and delivery of interventions and services. Fellows will also become competent in their knowledge of guidelines that govern the appropriate conduct of human subjects research, and they will become appropriately familiar with the wide array of legal issues pertinent to the proper conduct of clinical psychology and human subjects related research.

**Cultural and Individual Diversity Issues**: Fellows will further develop their awareness, appreciation, and handling of cultural and individual diversity in conceptualizing, preparing, and executing research and clinical work. This will include adding to their cultural competence regarding the design, delivery and evaluation of mental health services for a diverse range of Veterans and families.

**Confidence and Professional Identity**: Fellows will develop a strong professional identity and confidence and professional demeanor commensurate with their entry-level status in the profession.

Our program has serious mental illness as its area of emphasis. As such, all stated program goals will address issues related to serious mental illness in some way (development, treatment, service design, program implementation, etc.). While Fellows can pursue research and clinical experiences that are not specifically focused on serious mental illness during their training, all Fellows will engage in research and clinical activities that are directly related to this area of emphasis.

Fellows are rated using the following indicators:

1 = Trainee does not demonstrate basic competency (below postdoc entry level expectations). Intensive supervision needed and remedial plan required.

2 = Trainee demonstrates basic Competency at the postdoc entry level. Further growth necessary. A remedial plan may be needed.
3 = Trainee demonstrates an intermediate level of competency. Performance is acceptable, but further growth is necessary.

4 = Trainee demonstrates an intermediate to advanced level of competency, typical of postdocs at the end of the training program. Performance demonstrates skillfulness.

5 = Trainee demonstrates consistently advanced level of competence, well beyond that which is expected for trainees at the end of the training program. Performance demonstrates capacity for independent practice.

N/O = Not Observed

The Minimum Levels of Achievement for the four evaluation time-points during the fellowship are:

6-month evaluation. All competency items should be rated as a 2 or higher. If a competency item is rated as a 1, then a remedial action plan is required for that item. A remedial action plan may be developed for items rated at a 2.

12-month evaluation. All competency items should be rated as a 3 or higher. If a competency item is rated as a 1 or 2, then a remedial action plan is required for that item. Any remedial action plan initiated prior to this date must be progressing well in the estimation of the Director in order to successfully move forward in the fellowship in good standing.

18-month evaluation. All competency items should be rated as a 3 or higher AND 50% of items should be rated as a 4 or higher. If a competency item is rated as a 1 or 2, then a remedial action plan is required for that item. Any remedial action plan initiated prior to this date must be completed as determined by the Director in order to successfully move forward in the fellowship in good standing.

24-month evaluation. All competency items will be rated at the level of 5. There will be no 1-4 ratings. Any remedial action plan initiated prior to this date must be completed in order to successfully complete the fellowship program.

Facility and Training Resources

The VA is organizationally comprised of 23 Veteran’s Integrated Service Networks (VISNs). VISN 5, the VA Capitol Health Care Network, serves the state of Maryland, the District of Columbia, and the greater Martinsburg West Virginia area. VISN 5 includes four VA Medical Centers: Baltimore VAMC, Perry Point VAMC, Washington, D.C. VAMC, and the VAMC in Martinsburg, West Virginia. The VAMCs at Baltimore and Perry Point are incorporated within the VA Maryland Healthcare System (VAMHCS); the MIRECC is housed within the VAMHCS.

MIRECCs are VA-based centers that are multidisciplinary centers focused on improving the provision of health care to veterans suffering from mental illness. This goal is achieved through basic, clinical, and applied research and by improving the understanding of mental health service outcomes through education and training of personnel and the development and implementation of improved mental health services, delivery models, and systems. The mission of the VISN 5 MIRECC is to maximize recovery and community functioning for Veterans with mental health disorders through treatment development and implementation, community partnership, and service evaluation and enhancement. This goal is achieved by implementing evidence-based clinical programs and practices for the treatment of Veterans with mental health disorders, conducting research that leads to the development and evaluation of novel treatment strategies, developing and providing educational and training programs to enhance dissemination of evidence-based clinical programs and practices throughout the VA system of care. In support of this mission, the VISN 5 MIRECC supports a sophisticated research infrastructure including secretarial and administrative services, a biostatistics core, an assessment group, expertise in human subjects’ research, and ample computer, office, and videoconferencing equipment. The VISN 5 MIRECC provides a variety of research and administrative services to MIRECC investigators and fellows, thereby enhancing the scientific quality of the work and reducing the costs of
individual projects. The MIRECC provides laboratory and assessment space, computer facilities, and expertise and consultation that will aid in project organization and administration. The Biostatistics Core provides consultation in statistical analysis, database technology, and data management to MIRECC investigators. Of particular importance to the Consortium are the MIRECC subunits on Subject Recruitment and VA Regulatory Compliance, staffed with experts to assist MIRECC investigators in coordinating recruitment of participants and complying with all human subjects’ regulations at the local, VISN, and national levels. In addition, fellows can learn and access ongoing consultation in qualitative research methods thought interaction with the MIRECC Qualitative Core and Mixed Methods Core which hosts didactic and consultation activities to providing ongoing education and support in qualitative methodology. Many investigators deliver research-based interventions via tele-health and have developed IRB-approved study procedures for these types of interventions. MIRECC investigators maintain a large portfolio of VA and NIH grants and conduct treatment dissemination programs for VA on social skills training and family psychoeducation. In addition, VISN 5 MIRECC investigators play a role in mental health services at the VAMHCS, sitting on leadership committees and participating in program evaluation and planning groups. The VISN 5 MIRECC has also developed effective referral relationships with clinical staff in the VAMHCS mental health care clinics.

The VISN 5 MIRECC is located in downtown Baltimore, close to the Baltimore VA Medical Center, the University of Maryland Baltimore (UMB), and the University of Maryland Medical Center. UMB is the professional campus of the University System of Maryland and one of three major research universities in the state. The Schools of Medicine, Pharmacy, Dentistry, Law, Nursing, and Social Work are assembled on a 32-acre site in downtown Baltimore. UMB ranks in the top ten percent of institutions receiving federal funding from the National Institutes of Health and qualifies for Carnegie Classification as both a research institution and a specialized medical institution. The Health Sciences Library at UMB is a recognized leader in state-of-the-art information technology, with six levels and 190,000 square feet in which it houses 400,000 volumes and approximately 20,000 print and e-journal titles all of which can be accessed using the online catalog, and which also provides access to the resources of 15 other libraries in the University System of Maryland. It provides access to computerized literature search bases (e.g. Medline, PsycINFO, Neuroscience Citation Index, etc.). Many of the journals can be accessed on-line from various full-text services. Co-located with UMB is the University of Maryland Medical Center, the main hospital of the University of Maryland Medical System (UMMS). UMMS is a multi-hospital system with academic, community, and specialty services reaching every part of the state.

The VISN 5 MIRECC has active collaborations with the Department of Psychiatry at the University of Maryland School of Medicine with extensive communications and a strong working relationship across institutions. The Department of Psychiatry is home to Divisions and Centers which house resources that fellows can utilize to enhance their training. Most MIRECC investigators have dual appointments within the Department, either in the Division of Psychology or the Division of Psychiatric Services Research. Other departmental centers and investigators that can be utilized by fellows to enhance their training including the Maryland Psychiatric Research Center [dedicated to providing treatment to patients with schizophrenia and related disorders, educating professionals and consumers about schizophrenia, and conducting basic and translational research into the manifestations, causes, and treatment of schizophrenia.], the Clinical Neurobehavioral Center [dedicated to conducting research combining neuro-scientific, behavioral-pharmacological, and clinical-psychological methods into an integrated program of human laboratory and clinical outpatient research and treatment studies designed to identify new medications to treat substance use disorders], and the UM Center for Brain Imaging Research.

Fellows benefit substantially from the close ties between the University of Maryland School of Medicine, VISN 5, and the VAMHCS. The VAMHCS and UMB have a close, collaborative relationship. The Baltimore VAMC is located adjacent to the UMMC, with a connecting bridge that allows staff to move freely between the two facilities. As noted, many faculty members across a range of disciplines hold joint VA-UMB appointments, participate in training residents in a range of fields, collaborate on research projects, and share resources.

Primary Training Staff

Melanie Bennett, Ph.D. [Director, Advanced Fellowship Program in Mental Illness Research and Treatment, VISN 5 MIRECC; Professor, Department of Psychiatry, University of Maryland School of Medicine]. Dr. Bennett has expertise in the development of interventions for individuals with SMI. Much of her work has centered on the assessment and
treatment of substance use disorders in people with SMI. She is proficient in motivational interviewing and has studied strategies for enhancing motivation to engage in health behavior change. She also does work in assessment and treatment of negative symptoms and in fostering mental health recovery in young adults with early psychosis. Dr. Bennett has been funded by NIH and VA to do her work in substance abuse treatment development and implementation. Dr. Bennett is a licensed psychologist.

Clayton Brown, Ph.D. [Director, Research Core Biostatistics Unit, VISN 5 MIRECC; Professor, Department of Epidemiology and Public Health, University of Maryland School of Medicine]. Dr. Brown is a biostatistician who has extensive experience in the design and analysis of randomized clinical trials of clinical and health service interventions in the areas of substance abuse and serious mental illness. He has been the lead statistician/co-investigator for multiple NIDA, NIMH, and VA funded randomized clinical trials on topics including cognitive remediation intervention and behavioral treatment for substance abuse in seriously mentally ill patients.

Robert Buchanan, MD [Associate Director, Research Core, VISN 5 MIRECC; Professor, Department of Psychiatry, University of Maryland School of Medicine; Director, Maryland Psychiatric Research Center (MPRC)]. Dr. Buchanan's research interests include schizophrenia phenomenology; the neuroanatomical and behavioral investigation of the pathophysiology of schizophrenia; and the development of novel pharmacological approaches for negative symptoms, cognitive impairments, treatment-resistant positive symptoms, and the metabolic disturbances and other side effects associated with antipsychotic treatment. He has conducted a series of proof of concept and clinical trials examining antipsychotic-reduction strategies in the acute and maintenance treatment of schizophrenia; the use of adjunctive pharmacological agents for the treatment of negative symptoms and cognitive impairments; and the comparative efficacy of clozapine and olanzapine for positive and negative symptoms and cognitive impairment in partially responsive outpatients with schizophrenia. He currently has grant funding to evaluate novel therapeutic approaches for the treatment of people with schizophrenia, including the use of adjunctive oxytocin to CBSST for enhancement of social role function; combined anti-inflammatory treatment for persistent positive symptoms; and valacyclovir for cognitive impairments in people with schizophrenia, who are early in their illness.

Amy Drapalski, Ph.D. [Director, Administrative and Clinical Cores, VISN 5 MIRECC; Adjunct Associate Professor, Department of Psychiatry, University of Maryland School of Medicine]. Dr. Drapalski is a graduate of the VISN 5 MIRECC fellowship program. Her research focuses on the development and implementation of interventions to reduce internalized stigma in people with mental illness, as well as topics related to mental health recovery, family interventions in SMI and topics related to the health and mental health needs of women veterans. Dr. Drapalski has several active grants and has participated in 16 peer reviewed journal articles. Dr. Drapalski is a licensed psychologist.

Clare Gibson, Ph.D. [Psychologist, VA Maryland Health Care System]. Dr. Gibson completed her Ph.D. in clinical psychology at the University of North Carolina at Chapel Hill where her training and research focused on social cognitive processes in schizophrenia and psychosocial interventions for individuals with serious mental illness. She completed her predoctoral clinical internship at the VAMHCS/University of Maryland Internship Consortium in the serious mental illness track. Dr. Gibson then went on to complete a 1-year postdoctoral fellowship in VA's Interprofessional Fellowship Program in Psychosocial Rehabilitation and Recovery at VA Connecticut Health Care System and Yale School of Medicine. Dr. Gibson's interests are in psychosocial treatments for SMI and factors related to recovery particularly internalized stigma. Her professional interests include integrating recovery into mental health systems and self-care for mental health professionals. She is a National Trainer/Consultant for the VA Social Skills Training Program, located at the VISN 5 MIRECC. Dr. Gibson is a licensed psychologist.

Richard Goldberg, Ph.D. [Director, VISN 5 MIRECC; Professor, Department of Psychiatry, University of Maryland School of Medicine]. Dr. Goldberg is an established VA and NIH funded investigator, has overseen large clinical trials as PI, and has contributed to interventionist training and fidelity monitoring for innovative interventions targeting seriously mentally ill Veterans. As a funded NIMH and VA investigator he has accrued ample experience in working with peer providers and contributed to several grant efforts focusing on the quality of medical services targeting seriously mentally ill individuals. He also has training and research experience in conducting qualitative research focusing on consumer and provider perspectives of care. He is also the National Director of the VA Psychosocial Rehabilitation Training Program and the Hub-site Director of the National VA Inter-professional Psychosocial Rehabilitation and Recovery Post-Graduate Fellowship Training Program. Dr. Goldberg is a licensed psychologist.
Mary Katherine Howell, Ph.D. [Psychologist Clinician Investigator, VISN 5 MIRECC]. Dr. Howell is a graduate of the VISN 5 MIRECC fellowship program. She is a clinical research psychologist with a specialization in improving delivery of PTSD services for individuals with serious mental illness. She completed her Clinical Psychology Ph.D. at Howard University and her clinical internship at the Washing DC VAMC. Dr. Howell is a licensed psychologist with clinical proficiency in evidence-based treatments for adults with PTSD and serious mental illness, including Written Exposure Therapy (WET), Prolonged Exposure (PE), Cognitive Processing Therapy (CPT), Cognitive Behavioral Therapy for Insomnia (CBT-I), and Ending Self-Sigma (ESS). Her areas of research expertise include PTSD, SMI, insomnia, and culturally responsive assessment and treatment. Dr. Howell is a recipient of a VA Rehabilitation Research and Development Career Development Award (CDA-2) to preliminarily evaluate the use of WET for Veterans with comorbid SMI and PTSD, incorporating culturally responsive methods.

Elizabeth Klingaman, Ph.D. [Research Investigator and Assistant Fellowship Director, VISN 5 MIRECC; Adjunct Assistant Professor, Department of Psychiatry, University of Maryland School of Medicine]. Dr. Klingaman is a graduate of the VISN 5 MIRECC fellowship program. She received her Ph.D. in Counseling Psychology from the University of Maryland College Park and completed her predoctoral internship at the VA Eastern Colorado Health Care System. Her research interests include improving sleep and other health behaviors among Veterans with SMI through the use of adapted evidence-based practices. She is also interested in the neurocognitive effects of health behaviors (e.g., sleep, exercise). Dr. Klingaman is the recipient of a VA Rehabilitation Research and Development Career Development Award to generate guidelines for tailoring Cognitive-Behavioral Therapy for Insomnia to the needs of Veterans with SMI, and to test the efficacy of this intervention with this population. She has also recently obtained funding through a Mental Health Quality Enhancement Research Initiative Locally Initiated Project and a MIRECC pilot to collect data on the intersection of sleep dysregulation and health behaviors among Veterans with SMI. She is collaborating with colleagues at the Maryland Psychiatric Research Center on projects to fully characterize the functional outcomes of poor sleep among people with psychotic disorders. In collaboration with the VA National Evaluation of MOVE! Outcomes team, and various collaborators at the VISN 5 MIRECC, she has explored the importance of addressing multiple lifestyle and health behaviors as critical to the holistic recovery of Veterans with serious mental illness. Dr. Klingaman is a licensed psychologist.

Julie Kreyenbuhl, PharmD, Ph.D. [Director, Research Core, VISN 5 MIRECC; Associate Professor, Department of Psychiatry, University of Maryland School of Medicine]. Dr. Kreyenbuhl's research focuses on the pharmacoeconomics of serious mental illness and she has contributed extensively to the development of evidence-based treatment guidelines for schizophrenia. Current research interests include developing and testing the effectiveness of computer technology-based interventions such as Smartphones for individuals with serious mental illnesses in the areas of enhancing medication adherence and activating patients to participate in the prevention and management of medication side effects. Dr. Kreyenbuhl has received grant funding from the National Institute of Mental Health, NARSAD, and the Veterans' Health Administration.

Alicia Lucksted, Ph.D. [Research Investigator, VISN 5 MIRECC; Associate Professor, Department of Psychiatry, University of Maryland School of Medicine]. Dr. Lucksted’s work focuses on applied research towards improving public mental health services for people with serious mental illnesses, internalized stigma regarding mental illness and its impact on recovery, self-help interventions among mental health consumers and family members, and qualitative methods in mental health services research. She has experience in community mental health clinical work, quantitative and qualitative mental health services research methods, intervention design and evaluation, recovery-based paradigms of treatment, and project management. As a mental health services researcher, she has led and contributed to numerous studies developing and evaluating psychosocial interventions and their use, via both qualitative and quantitative methods. Dr. Lucksted is a licensed psychologist.

Deborah Medoff, Ph.D. [Director, Data Management Unit, Research Core, VISN 5 MIRECC; Associate Professor, Department of Psychiatry, University of Maryland School of Medicine]. Dr. Medoff is a quantitative psychologist and an expert in research methods, statistics and measurement with extensive experience designing and analyzing research on serious mental illness. She provides methodological and statistical consultation to the VISN 5 MIRECC, the Center for Mental Health Services Research and the Mental Health Systems Improvement Collaborative. She has interests in the statistical analysis of neuroimaging data (PET, MRI, fMRI) and in the application of Covariance Structure Modeling to assess network models of brain function.
Jason Peer, Ph.D. [Local Recovery Coordinator, VA Maryland Health Care System]. Dr. Peer is a former MIRECC fellow with the VA Maryland Health Care System. He completed his clinical psychology internship at the VAMHCS and University of Maryland-Baltimore Psychology Internship Consortium. Since completing his postdoctoral training, Dr. Peer has worked at the VAMHCS as a clinical psychologist in the PRRC and Recovery Center. He recently became the facility Local Recovery Coordinator which enables him to be a part of research, implementation of recovery-based interventions, staff training, and clinical practice. Dr. Peer is a licensed psychologist.

Ralf Schneider, MA, CPRP [Coordinator, VISN 5 MIRECC; Coordinator, VA Psychosocial Rehabilitation Fellowship Hub Site]. Mr. Schneider received his MA in Clinical Psychology from the University of Maryland and is a Certified Psychiatric Rehabilitation Practitioner. Mr. Schneider has provided psychosocial rehabilitation services, training and education in a variety of community mental health settings for individuals with serious mental illness. His areas of ongoing interest and expertise include Peer Specialist education and training, the engagement of Veteran stakeholders and family in treatment and research planning, and the implementation of evidence-based therapies and other promising interventions in psychosocial rehabilitation. In his role with the VA Interprofessional Fellowship Program in Psychosocial Rehabilitation and Recovery Oriented Services, Mr. Schneider provides Fellows with additional educational and training opportunities, supplementing what they receive at their individual training sites. Mr. Schneider works closely with the VISN5 MIRECC Education Core to advance dissemination of knowledge and practice innovations developed by MIRECC investigators.

Letitia Travaglini, Ph.D. [Psychologist Clinician Investigator, VISN 5 MIRECC]. Dr. Travaglini is a graduate of the VISN 5 MIRECC fellowship program. She is a clinical research psychologist with a specialization in improving delivery of pain services for individuals with co-occurring chronic pain and serious mental illness. She completed her Clinical Psychology Ph.D. at the University of Maryland Baltimore County and her clinical internship at the VAMHCS/University of Maryland Internship Consortium. Dr. Travaglini is a licensed psychologist with clinical proficiency in evidence-based treatments for adults with serious mental illness, including psychoeducation, skills training, and cognitive-behavioral approaches with interests in substance use disorders and behavioral pain management. Her areas of research expertise include improving functional outcomes for individuals with co-occurring chronic pain and serious mental illness and identifying personal and systemic barriers to individuals with SMI accessing pain management services. Dr. Travaglini is the recipient of a VA Rehabilitation Research and Development Career Development Award to evaluate psychosocial and behavior interventions to treat chronic pain in individuals with serious mental illness.

Administrative Policies and Procedures

The term of the VA Advanced Fellowship Program in Mental Illness Research and Treatment is full-time for two years beginning on or about Labor Day and ending on or about that day two years later. There is funding available for these 2 full-time positions and the current stipend is $45,961 per annum. State and Federal income tax and FICA are withheld from residents’ checks. Annual and sick leave are accrued at the rate of 4 hours per pay period and the fellows are entitled to 10 federal holidays per year. Five days of additional authorized absence may be approved for attendance at conferences, workshops, or other educational activities. Fellows may also apply for up to $500 of tuition expenses for training or conference experiences consistent with their training goals. Fellows are eligible for federal health insurance but not life insurance or retirement programs. Procedures for due process in case of problematic performance are in place, as are grievance procedures, both for fellows and psychology staff. A copy of these documents will be provided upon the start of fellowship. Our privacy policy is clear: we will collect no personal information about you when you visit our website.

Statement of Nondiscrimination

Equal opportunity laws and Department of Veterans Affairs (VA) regulations prohibit discrimination based upon race, color, national origin, Limited English Proficiency (LEP), age, sex, handicap or reprisal. This applies to all programs or activities conducted by VHA. This policy establishes a civil rights administrative complaint procedure to process allegations of discrimination on the basis of race, color, national origin, LEP, age, sex, handicap, or reprisal. A combination of procedures are modified as outlined in Title VI of the Civil Rights Act of 1964, Executive Order 13166,
Title IX of the Education Amendment of 1972, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and VA Policy as outlined in Title 38 Code of Federal Regulations (CFR) Chapter 1, Parts 15, 18, and 38.

**EEO, Diversity Statement**

The Department of Veterans Affairs (VA) is committed to ensuring equal employment opportunity (EEO), promoting diversity and inclusion, and resolving workplace conflict constructively to maintain a high performing workforce in service to our Nation’s Veterans. To that end, the Department will vigorously enforce all applicable Federal EEO laws, regulations, Executive Orders, and Management Directives to ensure equal opportunity in the workplace for all VA employees. For additional information, please consult the VA EEO Policy at [http://www.diversity.va.gov/policy/statement.aspx](http://www.diversity.va.gov/policy/statement.aspx) or contact the VAMHCS EEO office.