

Post-Doctoral Fellowship in Health Psychology



PSYCHOLOGY & NEUROPSYCHOLOGY

**Training Director: Seema Weinstein, Ph.D.
Manager, TGH Psychology & Neuropsychology**



Application Process:

- (1) Applicants must have completed a doctorate (Ph.D. or Psy.D.) in Clinical or Counseling Psychology from an APA approved program and completed an APA approved internship prior to start date of September of the academic training year
- (2) Applicants should be interested and experienced in the clinical assessment and treatment of medically complex individuals and their care system. Experience with rehabilitation populations preferred
- (3) Applicants should have the desire to work in a multidisciplinary team environment.
- (4) Materials for application include:
 - a. Curriculum Vita
 - b. Letter of interest detailing career and training goals
 - c. Statement of completion date of doctoral program from the program director. Fellows must complete their doctoral program prior to starting the fellowship.
 - d. Three letters of recommendation, including one from the internship training director.
 - e. Two de-identified reports.

Applications will be accepted until Friday, December 15, 2023. To apply for this position:

Use the APPIC APPA/CAS centralized application process by clicking on the link below and submitting the requested information:

<https://appicpostdoc.liaisoncas.com>

Or forward materials to:

tghpsyfellow@tgh.org

If you have questions, please contact Seema Weinstein, Ph.D., seemaweinstein@tgh.org or by phone at 813-844-7397.

- (5) Applications are reviewed for completion and forwarded to the Fellowship committee, who will review and rank all applications. Candidates will be invited to interview via phone or in person January, 2024.

We will follow Common Hold Date guidelines and plan to extend offers in January 2024.

Setting Overview

Tampa General Hospital offers two full time training opportunities through the Health Psychology Post-Doctoral Fellowship program. Our objective is to provide a rich, challenging, and varied clinical training experience within the continuum of care for medical populations. Tampa General is a private not-for-profit hospital as well as one of the most comprehensive medical facilities in West Central Florida, serving a population in excess of 4 million across one dozen counties, ranked #1 in Tampa Bay by US News & World Reports. TGH is the area's only Level 1 Trauma Center, has one of three American Burn Association verified burn centers in Florida, is a state certified stroke center, and has one of the largest transplant programs in the country. As the region's leading safety net hospital, Tampa General is committed to providing area residents with excellent and compassionate health care. Tampa General is the primary teaching affiliate of the University of South Florida Morsani College of Medicine, with over 300 residents receiving specialty training in areas ranging from general internal medicine to neurosurgery.

Our TGH Psychology & Neuropsychology team provides assessment, consultation, and treatment for both adult and pediatric populations throughout the continuum of care. In addition to rehabilitation and trauma populations, psychological and neuropsychological services are provided for burn, bariatric, transplant, psychiatry, neurological, oncology and general medical populations. Currently, the Psychology & Neuropsychology staff represent a high degree of specialization in treating individuals with medical, rehabilitation, and neuropsychological needs. Psychologists have key leadership roles within their multidisciplinary teams and participate in teaching, applied clinical research, and team building activities.

Program Description

The Health Psychology Postdoctoral Fellowship Program aspires to develop professional Psychologists who are competent, ethical, and prepared for independent practice in a variety of medical settings. There are two (2), one-year full-time Health Psychology Fellow positions. Training occurs via didactics as well as clinical exposure with direct supervision provided to facilitate the learning process with a focus on:

- assessment of individuals and families experiencing adjustment and coping issues related to physical and cognitive conditions using a biopsychosocial framework
- the provision of short term, solution-focused interventions to promote optimal outcomes as well as evidence based interventions for longer term contact
- evaluation of cognitive disorders and medical populations
- encouragement of multidisciplinary collaboration and clinical consultation
- participation in advocacy/consumer protection and ethical and professional issues.

Completion of this training program fulfills the licensure requirements for postdoctoral supervised practice in the state of Florida.

Program Training

Postdoctoral fellows participate in supervised rotations within the Tampa General Hospital continuum of care. Training is structured into two six (6) month segments. Each rotation allows for (2) focused rotations (2) days per week for each rotation. Fellows rotate with different supervisors, thus providing opportunities to work with a variety of providers and to gain a breadth and depth of experiences. Rotations included acute inpatient burn and trauma, Postdoctoral fellows also gain supervised training in selected two-day minor experiences including bariatric surgery, oncology, behavioral sleep medicine, psycho-oncology, pediatric rehabilitation, transplant and neuropsychology.

Acute Medical/Trauma/Burn & Acute Consultation/Liaison

Primary Supervisors: Sherry Leib, Ph.D

Primary services are provided in the acute hospital setting to individuals with complex medical issues and trauma (TBI, SCI, burn). Services are provided along the continuum of care including ICU, Neurosciences, Burn, and Oncology units. Lengths of stay vary, ranging from less than one week to several months, depending on a variety of individual and systemic factors. The psychologist consults with the trauma team to provide services for acutely injured individuals. The psychologist helps to identify needs of the patient and family related to education, support, and coping with the acute crisis and disruption in the family system. Initially, a crisis intervention model is applied. After the completion of the initial evaluation, a variety of therapeutic techniques may be employed, including family therapy, grief counseling, behavior management, psychoeducation, and team consultation. Issues frequently encountered during this rotation include crisis intervention, PTSD, anxiety disorders, acute stress issues, death and dying/life support termination, and staff stress reactions.

By the end of this rotation the fellow will demonstrate:

- Sound ability to conduct psychological evaluations appropriate to a hospital setting and generate recommendations for treatment.
- Skills in consultation with multiple medical disciplines.
- Ability to produce integrated written reports of psychological test findings with recommendations for treatment.
- Advanced ability in providing psychotherapeutic interventions that address the broad range of psychological and psychosocial sequelae of complex medical issues.
- Sound knowledge of the etiology and physical sequelae of complex medical issues.
- Advanced knowledge of the cognitive and psychosocial sequelae of complex medical issues.

Pediatric Rehabilitation/Consultation-Liaison (Optional)

Primary Supervisors: Jennifer McCain, Psy.D., ABPP-CN & Nicole Williamson, Ph.D.

The Pediatric Rehabilitation program uses a multidisciplinary team approach to the management of rehabilitation needs in children. The team psychologist provides a range of individual, family, and team consultation interventions to promote optimal recovery of the child. Emotional, cognitive, behavioral, and academic assessment and treatment approaches are emphasized. Working closely with the family, the psychologist helps to identify issues that may impact on progress in rehabilitation, successful adaptation to disability and the development of future productive roles. The team is comprised of a Pediatric Physiatrist, Pediatric Psychologist, Physical/Occupational/Speech Therapists, Child Life specialists, Hillsborough County Homebound teachers (school on site), Nurses, Pastoral Care, and other treatment staff.

Evaluations typically involve chart review, clinical interview, collateral interview, team consultation, administration, scoring, and interpretation of relevant tests, and preparation of an initial evaluation report. Reports include summary of findings as well as the establishment of objective and measurable goals, planned interventions, identification of barriers to rehabilitation, and recommendations for additional needs. Individual and family psychotherapy, education, behavioral management, and ongoing team consultation is provided.

Bariatric Surgery

Primary Supervisors: Rebecca Klam, Psy.D.

The TGH/USF Bariatric Center is an interdisciplinary clinic that specializes in surgical and medically supervised weight loss for patients with morbid obesity. The team consists of nurse practitioners, dietitians, bariatric surgeons, a bariatrician, and psychologists. The rotation involves participation in both community based medically supervised weight loss and the surgical weight loss program. In the surgical weight loss program, patients are seen for a wellness assessment to ensure preparation and appropriateness for surgery and treatment in mindful eating, positive health behavior to promote weight loss, and the management of mental health symptoms. Surgical patients are also seen inpatient to ensure preparation for discharge and adjustment to the bariatric lifestyle. The psychologist uses clinical interview, chart review, and questionnaire data to assess patients at the wellness assessment. Community weight loss patients are seen on rotating weeks by the psychologist, nurse practitioner and/or bariatrician, and dietitian. The psychologist conducts an evidence-based protocol treatment to address healthy eating, stress management, and mindful eating. Issues frequently addressed at the Bariatric Center during this rotation include: anxiety disorders, depression, PTSD, personality disorders, eating disorders, bipolar disorder, schizoaffective disorder, significant medical comorbidities, and brief assessment of cognitive impairments.

Oncology Psychology

Primary Supervisors: Elia Villalobos Soto, Psy.D.

Fellows on this rotation will conduct psychological evaluations and treatments on oncology outpatients and inpatients referred for a wide variety of adjustment, mood, behavioral, cognitive, and/or other health-related concerns. Patients are referred from our TGH Oncology providers for the assessment and treatment of various presenting concerns, including adjustment to a new cancer diagnosis, anxiety, depression, delirium, treatment nonadherence, pain management, caregiver burden, end-of-life concerns, and pre-morbid psychiatric symptoms. In the inpatient setting, fellows will engage in brief bedside interventions with patients and their families, along with care coordination among other members of the medical team to ensure appropriate medical treatment that takes into account pertinent psychosocial factors. In the outpatient setting, fellows will engage in more traditional, 50-minute sessions with patients to implement evidence-based interventions. Fellows may also see patients in the TGH Infusion Center during chemotherapy or other infusion treatments. This rotation emphasizes ACT and other existential-focused interventions, as well as CBT. Additionally, there are opportunities to work in the TGH Interdisciplinary Palliative Care clinic alongside physicians, advanced practice providers, and pastoral care to treat patients with advanced cancer who are in need in additional symptom management. Typically, these individuals have significant symptom burden due to cancer-related pain, sleep and appetite disturbances, nausea/vomiting, cognitive concerns, and mood difficulties that need additional treatment. In this clinic, fellows have the opportunity to engage in goals of care (treatment decision making) conversations with the patient and family, as well as end-of-life psychological interventions. Lastly, in the Psycho-Oncology rotation, there may be opportunities for involvement with clinically-applied research.

Outpatient Rehabilitation

Primary Supervisor: Jennifer Fleeman, Psy.D.

Fellows provide a range of psychological services for patients in an outpatient clinic setting. The fellow helps to identify and conceptualize the nature of personality, emotional, cognitive, and psychosocial issues that may affect the individual's rehabilitation progress, adjustment to disability/illness/injury, and quality of life. This may include interview, collateral interview, review of records, and/or brief evaluation instruments. The fellow also provides therapeutic intervention, as appropriate to the level of cognitive functioning of the patient, and coordinates interventions with other care providers to manage emotional or behavioral issues. Common emotional presentations include grief issues, adjustment disorders, acute/post-traumatic stress disorder (PTSD), mood disorders, anxiety disorders, changes in relationships and family roles, and other co-occurring conditions such as personality disorders/ characteristics, and substance abuse/dependence. Therapeutic interventions may include brief series of problem-focused interventions, psychoeducation, longer-term treatment of adaptation to disability, and evidence-based interventions for treatment of adjustment disorder and other mental health conditions. If

indicated, the fellow also provides education and counseling members of the patient's support system to facilitate adaptive involvement in care, behavior management, and support system adjustment to disability/ illness/ injury and prognosis.

By the end of this rotation the fellow will demonstrate:

- Sound ability to conduct psychological evaluations appropriate to an outpatient rehabilitation clinic setting and generate recommendations for treatment.
- Psychological assessment instruments with this specialized population.
- Sound clinical rationale for test selection and administration of cognitive and psychological assessment instruments with specialized populations.
- Ability to produce integrated written reports of psychological test findings with recommendations for treatment and rehabilitation.
- Advanced ability in providing psychotherapeutic interventions that address the broad range of psychological and psychosocial sequelae of TBI, SCI, CVA, and other complex medical issues.
- Ability to facilitate psychoeducation (individual and support system).
- Sound knowledge of the etiology and physical sequelae of TBI, CVA, SCI, and other complex medical issues.
- Advanced knowledge of the cognitive and psychosocial sequelae of TBI, CVA, SCI, and other complex medical issues.
- Familiarity with common support system reactions to new onset disability.
- Ability to apply principles of positive psychology to rehabilitation populations.

Primary Supervisors: Maya Ramirez, Ph.D., ABPP-CN & Elyse Parke, Ph.D.

Working with board certified neuropsychologists, this rotation will focus on the assessment of individuals with neurological dysfunction (brain injury, stroke, neurodevelopmental disorders, Parkinson's disease, Epilepsy, Sickle Cell, etc.). The evaluation process integrates premorbid and injury/illness related information with current neuropsychological findings to generate meaningful recommendations with a focus on improving functional skills and quality of life. Fellows will complete clinical interviews with patients and caregivers, use a variety of neuropsychological tests and methods, participate in weekly neuropsychological evaluations and compose neuropsychological evaluation reports. **Pediatric neuropsychology requires prior pediatric experience or neuropsychological testing experience.**

Clinical Neuropsychology; Adult or Pediatric

Primary Supervisors: Maya Ramirez, Ph.D., ABPP-CN & Elyse Parke, Ph.D.

Working with board certified neuropsychologists, this rotation will focus on the assessment of individuals with neurological dysfunction (brain injury, stroke, neurodevelopmental disorders, Parkinson's disease, Epilepsy, Sickle Cell, etc.). The evaluation process integrates premorbid and injury/illness related information with current neuropsychological findings to generate meaningful recommendations with a focus on improving functional skills and quality of life. Fellows will complete clinical interviews with

patients and caregivers, use a variety of neuropsychological tests and methods, participate in weekly neuropsychological evaluations and compose neuropsychological evaluation reports. **Pediatric neuropsychology requires prior pediatric experience or neuropsychological testing experience.**

Program Requirements

The fellowship is a 40 hour per week program, and fellows spend at least 50% of their time in direct clinical activity related to patient care. Formal supervision is at least one hour of formal, face-to-face supervision per week with at least one additional hour of face-to-face supervision provided by on site supervisors. All supervisors are licensed psychologists specializing in Rehabilitation Psychology, Health Psychology, or Clinical Neuropsychology. Responsibility for maintaining contact with the supervisor resides with both the supervisor and the fellow. Cancellations for illness, vacation, or other reasons should be made up. Additional consultation with other psychologists in the Psychology Service is always available in emergencies. Requirements for successful completion of Post-doctoral training are outlined in detail below.

Within the first month of the program, postdoctoral fellows complete Individualized Rotation Goals with their supervisors. The aim of this plan is to help each postdoctoral fellow identify professional goals and objectives, assess their skillset relative to their career goals, and develop a plan to acquire the skills and competencies needed to achieve short- and long-term career objectives. Goals will be reviewed with the supervisor at the beginning, middle, and end of the rotation.

Didactics

Fellows are required to attend weekly didactic seminars, Psychology meetings, continuing education programs, various multidisciplinary rounds, grand rounds and in-services. Directed readings are completed as assigned by the primary supervisor. Fellows will attend a formal didactics on Friday mornings and non-clinical time on Friday afternoons.

Projects and Presentations

1. Mini case presentations during Post-Doctoral Seminars for Psychology Department
2. Present a topic for the BI support group and manage a process-oriented group
3. Participate in Brain Injury and Oncology support groups
4. Complete one program development project, as assigned.
5. One formal case presentation at the end of the training year, incorporating key health psychology conceptual frameworks.

Program Completion

The post-doctoral fellowship program requires 2000 hours of supervised clinical time during a one-year (12 month) period. This requires 50 worked weeks, full time, to meet Florida licensure requirements. Evaluations occur quarterly to determine training focus and assess progress. Training improvement plans will be developed as needed to assist in successful program completion.

Supervision Requirement

Formal supervision is at least one hour of formal, face-to-face supervision per week with at least one additional hour of face-to-face supervision provided by on site supervisors. All supervisors are licensed psychologists specializing in Rehabilitation, Health Psychology, or Clinical Neuropsychology.

Evaluation

Evaluation is an ongoing process during the fellowship program. Fellows work with their supervisor at the start of a rotation to develop specific, measurable training goals. Postdoctoral fellows are provided with quarterly evaluations to review their progress towards their goals and the development of advanced competencies. Progress is assessed on an ongoing basis via live observation, detailed reviews of written notes and reports, discussion of case formulations and treatment planning, and informal feedback from the multidisciplinary treatment team. Supervisors complete written evaluations, which are reviewed and discussed in individual face-to-face meetings with the supervisors. If opportunities for improvement are identified, the primary supervisor is accountable for developing, implementing, and monitoring a remediation plan. Fellows provide formal feedback at mid-year and at the end of the fellowship, although feedback is ongoing throughout the year. Program evaluation is provided by fellows at the completion of the training experience to share perceptions and gather suggestions for future program improvement.

Conflict Resolution

Should problems occur in supervision, fellows are encouraged to attempt resolution in the context of the supervisory relationship. If such attempts are unsuccessful, trainees are encouraged to contact the Training Director for assistance in problem resolution. Please refer to the Grievance Policy for specific information regarding problem resolution within the supervisory relationship.

Grievance

Formal grievance policies are maintained by TGH and apply to fellows.

Fellow Responsibilities

- A. Fellows have the responsibility to maintain behavior within: (1) the scope of the APA ethical guidelines (2) the laws and regulations of the State of Florida (3) the regulations for professional staff of Tampa General Hospital and (4) the standards for professional staff outlined in the Tampa General Hospital Policies, located on the Employee Portal.
- B. Fellows have the responsibility to be open to professionally appropriate feedback from immediate supervisors, professional staff, and agency personnel.
- C. Fellows have the responsibility to behave in a manner that facilitates professional interaction within Tampa General Hospital and is in accordance with the standards and expectations of the hospital and APA.
- D. Fellows have the responsibility to provide professionally appropriate feedback regarding all aspects of the fellowship experience, including but not limited to, supervision, seminars, individual counseling experiences, consultation, outreach experiences, and staff meetings.
- E. Fellows have the responsibility to meet the expectations of the fellowship by developing competency in: (1) initial consultation and assessment (2) individual, family, and group counseling (3) brief neuropsychological testing and interpretation (4) crisis assessment and intervention and (5) other areas specifically identified and mutually agreed upon by the fellow, supervisor(s), and Director of Training.
- F. Postdoctoral fellows have the responsibility to behave in a professionally appropriate manner if due process procedures are initiated.
- G. The following expectations are the responsibilities of the Postdoctoral Fellows:
 - 1. Maintain general work hours of 7:30am-4pm, with flexibility per supervisor. Patients may only be seen when a designated supervisor is on site.
 - 2. For inpatient rotations, assess patient consults in the morning with supervisor. In the EMR, assign yourself and your supervisor to patients that you are evaluating.
 - 3. Maintain a caseload as assigned by supervisor
 - 4. Bring a list of patients, relevant patient issues you are working on and professional development needs to your weekly supervision sessions.
 - 5. Address all inpatient consults within 24 hours.
 - 6. Be certain to complete your paperwork in a timely manner. Please refer to Psychology Documentation Policy. Exceptions are to be discussed with your supervisor.

7. Complete documentation for outpatients by end of treatment day, unless discussed in advance with your supervisor.
8. Provide appropriate supervision of interns and students. Interns and students cannot treat patients on their own; they can only observe your interventions, with patient's (and/or caregiver's) permission.

Program Benefits

The fellowship begins and ends at the beginning of September. Current stipend is \$55,370 with full benefits (health insurance, vacation, etc.). All fellows are provided with office space, laptops, and access to medical library services.