Neuropsychology Postdoctoral Fellowship Program
Washington DC VA Medical Center
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Neuropsychology Training Coordinator
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Application Due Date: December 16th, 2017
Fellowship Year Begins: September 2018

Accreditation Status
The Neuropsychology Postdoctoral Fellowship Program at the Washington DC VA Medical Center is not currently accredited by the Commission on Accreditation of the American Psychological Association.

Application and Selection Procedures
The Fellowship program in Neuropsychology begins in September of 2018. This is a two-year full-time program with VA benefits, including 13 days annual leave, 13 days sick leave, health insurance, and 10 Federal holidays. Current stipend/salary is $46,169 for Year One. Our program is organized to provide two full years of postdoctoral training; however, advancement to the second year is contingent on successful completion of first year requirements.

We are recruiting for one Neuropsychology Fellowship position in 2018.

Our program participates in the matching program for clinical neuropsychology postdoctoral residencies, administered by National Matching Services (NMS). We adhere to all policies regarding the matching program. For more information on the matching program, see the websites for APPCN (www.appcn.org) and National Matching Services (www.natmatch.com/appcnmat). Applicants are encouraged to attend the North America Meeting of the International Neuropsychological Society (INS) in February, where we interview applicants who have successfully completed our review of written application materials. See the INS website (www.the-ins.org) for more information on the meeting. If selected applicants are unable to attend the meeting, we will arrange a telephone or on-site interview prior to the NMS deadline for submission of rank-order lists.

Eligibility
To be considered for our postdoctoral training program, an applicant must have completed a doctoral degree in Clinical or Counseling Psychology from an American Psychological Association (APA) accredited program and must have completed an APA accredited Psychology Pre-doctoral Internship. Certification of U. S. citizenship and drug screening are required for all VA Postdoctoral Fellows. In addition, VA employment requires that males born after December 31, 1959 must have registered for the draft by age 26.

The Neuropsychology Fellowship seeks and values diverse experiences and backgrounds as the building blocks of a rich training environment. Our program emphasizes respect for trainees, patients, and staff members representing all forms of diversity, including (but not limited to) race, ethnicity, religion,
gender, sexual orientation, disability, marital status, veteran status, and political affiliation. Fellows are entitled to equal treatment in selection decisions and freedom from harassment or unfair treatment. The program seeks to admit trainees from diverse backgrounds while selecting the most qualified candidates. As such, individuals from diverse backgrounds are strongly encouraged to apply. The VA is an Equal Opportunity Employer and the training program follows institutional guidelines in this regard.

Application Materials
Our program utilizes the APPA CAS system. Please access APPA CAS (APPIC Psychology Postdoctoral Application), a service of the Association of Psychology Postdoctoral and Internship Centers (APPIC). Complete the basic demographic, education, clinical training information and transcripts required of all applicants for all APPA CAS programs. APPA CAS allows you to request letters of recommendation electronically, which are then uploaded by the letter writer.

Application materials must be received by December 16th, 2017.

Please contact Jennifer Strang, Ph.D., ABPP-CN., Neuropsychology Training Coordinator, via electronic mail (preferably) at jennifer.strang@va.gov or by phone at (202) 745-8000 x58173 with any questions about the application process.

Training Setting

The Washington DC VA Medical Center is a 144-bed hospital that provides care to 78,000 Veterans in our catchment area on an outpatient basis. There is a nursing home (the Community Living Center, or CLC) located on-site. In addition, the medical center has 5 satellite outpatient clinics (CBOCs) located in Charlotte Hall, MD, northeast Washington, DC (the Community Resource and Referral Center, or CRRC), Fort Belvoir, VA, southeast Washington, DC, and Prince George’s County, MD.

The DC VAMC is located in the heart of the District of Columbia, approximately 3 miles from the US Capitol, 4 miles from the White House, and in close proximity to a number of other federal agencies. Washington, DC is a vibrant, diverse city with many charming neighborhoods, exciting cultural opportunities (including the Smithsonian museums, which offer free admission!), extensive and excellent dining and nightlife options, a comprehensive public transportation system, and beautiful parks and trails providing access to outdoor recreational activities.
The Neuropsychology Postdoctoral Fellowship Program is one of four postdoctoral fellowship programs located at the Washington DC VAMC. All training takes place within the Medical Center and its five surrounding Community Based Outpatient Clinics (CBOCs). The DCVAMC is under the authority of the Veterans Health Administration (VHA). The VHA is the part of the U.S. Department of Veterans Affairs that is responsible for providing health care for Veterans, as well as funding health research and training for health care providers.

The DC VAMC is a comprehensive medical center that treats male and female Veterans who have a wide array of medical and psychiatric illnesses needing treatment in both inpatient and outpatient settings and is considered to be a tertiary care, Complexity Level 1B facility. It provides comprehensive primary and specialty care in medicine, surgery, neurology and psychiatry. DC VAMC is part of the Veterans Integrated Service Network (VISN) #5. VISN 5 includes Washington DC, Baltimore and Perry Point, MD, and Martinsburg, Clarksburg, Beckley, and Huntington, WV. The DC VAMC is the designated Polytrauma Network Site for VISN 5. The DC VAMC is one of the few VA Medical Centers affiliated with four Medical Schools: The George Washington University, Georgetown University, Howard University, and the F. Edward Hebert School of Medicine, Uniformed Services School of the Health Sciences. DC VAMC is a participant of the National Capitol Consortium (a research-based consortium) and has an agreement with Walter Reed National Military Medical Center.

Training Model and Program Philosophy
The Neuropsychology Postdoctoral Fellowship Program at the Washington DC VAMC espouses the scientist-practitioner model consistent with Houston Conference Guidelines (Hannay, Bieliauskas, Crosson, Hammeke, Hamsher, & Koffler, 1998). Through the use of didactics, seminars, and individual and group supervision, the program trains Fellows to develop an advanced understanding of brain-behavior relationships; to develop advanced skills in neuropsychological evaluation and consultation; and to learn to interpret, adapt, and incorporate new clinical research findings from the literature in order to improve assessment validity and treatment effectiveness. The fellowship program is designed to be the capstone experience of formal training that leads to independent practice in the specialty of clinical neuropsychology.

Clinical Overview and Rotations
Throughout the course of the two-year post-doctoral fellowship in neuropsychology, the fellow will be provided with opportunities and training to develop a strong foundation of knowledge and skills pertinent to advanced clinical practice in neuropsychology. Through a variety of training-related activities, the fellow will learn fundamentals of neuropsychological assessment, neuroanatomy, and neuropathology. The fellow will complete a year-long rotation in the General Outpatient Neuropsychology Section, a year-long rotation in the Polytrauma Clinic, and two-year rotations in Consultation/Liaison Neuropsychology and Neuropsychological Intervention/Cognitive Rehabilitation. In addition, the fellow will participate in additional clinical opportunities as they arise (e.g., interdisciplinary MS Clinic through the MS Center of Excellence). Rotations are described in greater detail below.

**Outpatient Neuropsychology:**
The Outpatient Neuropsychology Section accepts referrals from all clinical departments within the Washington DC VAMC, including primary care, geriatrics, neurology, psychiatry, psychology, substance abuse recovery program, social work, infectious diseases (HIV, HCV), diabetes management, nephrology, and hepatology. Diagnoses seen are diverse and include the full range of psychiatric disorders, mild cognitive impairment, dementia/major neurocognitive disorder, concussion/traumatic brain injury, sleep disorders, multiple sclerosis, and ALS. A flexible battery approach is used based on the referral
question and presenting concerns of the Veteran (and family members, if applicable). The fellow will be responsible for all aspects of the neuropsychological assessment process, including chart review, battery selection, clinical interviewing, cognitive test administration, scoring, interpretation, and report-writing, and provision of feedback to the Veteran. Faculty includes three full-time neuropsychologists (Drs. Aucone, Strang, and Skalina), two of whom are board certified in clinical neuropsychology. We anticipate this to be a 12-month rotation and that the fellow would see 1-2 outpatient evaluations per week. There will be extensive opportunities for the fellow to provide clinical supervision to neuropsychology interns and externs under a tiered supervision model during this rotation.

**Consultation / Liaison Neuropsychology:**
The Consultation / Liaison Neuropsychology Section provides a limited number of consultations to various inpatient services, including general medicine and neurology. Consults are typically placed by the inpatient service or consultation / liaison psychiatry. The most frequent referral questions relate to a Veteran’s capacity to live independently and/or to make medical and financial decisions. Consultations are also sought to assist with discharge planning. The Neuropsychology Fellow will be expected to complete approximately 1 consultation per week. This experience is proposed to span the entire two years of the fellowship. Faculty includes three full-time neuropsychologists (Drs. Aucone, Strang, and Skalina).

**Polytrauma Neuropsychology:**
The Washington DC VAMC Polytrauma Network Site (PNS) provides individualized treatment for Veterans with traumatic brain injury (TBI) and comorbid medical and mental health conditions using an interdisciplinary model of care. The PNS outpatient care team is headed by physical medicine and rehabilitation physicians and includes neuropsychology, rehabilitation psychology, social work, nursing, speech-language pathology, occupational therapy, physical therapy, vision rehabilitation, vocational rehabilitation, prosthetics, recreational therapy, driver’s rehabilitation, and other related specialties. Training on this interdisciplinary team offers a unique opportunity for the neuropsychology fellow to provide coordinated care to Veterans and their families.

In addition to training on the interdisciplinary team at the Washington DC VAMC, the fellow would be expected to work jointly on a performance improvement project targeted at developing and identifying best practices for a VAMC to coordinate Polytrauma Neuropsychology, psychotherapy, and case management services throughout the VISN and to increase services available to rural Polytrauma Veterans.

The fellow will be supervised by the Polytrauma neuropsychologist (Kayleigh Hale, PsyD), with additional supervision provided by the Polytrauma rehabilitation psychologist and physical medicine and rehabilitation physicians. Training in Polytrauma will include neuropsychological and psychological assessment, providing individual psychotherapy, co-facilitating evidence-based cognitive rehabilitation groups (e.g., CogSMART/Brain Boosters), facilitating didactics at VISN 5 Polytrauma meetings, participating in weekly interdisciplinary team meetings, participating in TBI-related research, didactic presentations, and program development with allied disciplines, attending Polytrauma interdisciplinary grand rounds, promoting Polytrauma VISN 5 interfacility coordination of care, and promoting outreach to rural Polytrauma Veterans.

**Neuropsychological Intervention / Cognitive Rehabilitation:**
This rotation is supervised by Dr. Jennifer Strang, and is expected to span the entire two years of the fellowship. The neuropsychology fellow has the opportunity to co-facilitate a cognitive rehabilitation
group, to provide individual cognitive rehabilitation treatment, and to provide individual and family psychotherapy focused on adjustment to neurological illness. The rotation also includes didactics via Project ECHO (described below).

Group cognitive rehabilitation: The cognitive rehabilitation group is an open and interactive group designed to help Veterans decrease common memory and attention complaints that affect daily activities. The group provides psychoeducation on the major factors that impact cognition (e.g., stress, substance abuse, sleep disturbance, chronic pain); provides resources for addressing these factors; and suggests strategies (e.g., external and internal compensatory strategies) to help improve cognitive concerns and daily functioning. Currently, the group is available to Veterans participating in the Psychosocial Rehabilitation and Recovery Center (PRRC) and the Substance Abuse Recovery Program (SARP). Fellows will co-facilitate at least one of these groups with a psychology extern or intern, providing the Fellow with additional supervision experience. Additionally, depending on the Fellow’s interest, there are opportunities to initiate groups in other clinics, such as the Geriatric Clinic, Neurology, Primary Care, and the Mental Health Clinic.

Individual cognitive rehabilitation: Similar to the group, individual cognitive rehabilitation focuses on addressing factors that impact cognition and introducing compensatory strategies for managing cognitive concerns. The treatment is intended for Veterans who can benefit from a more individualized approach and/or to reinforce skills learned in the group.

Individual/family psychotherapy: Fellows will also maintain a psychotherapy caseload of 1-2 Veterans over the course of the fellowship. Therapy will focus on adjustment to neurological illness, such as Veterans recently diagnosed with mild cognitive impairment, dementia, multiple sclerosis, or cerebrovascular disease. In an effort to increase access to neuropsychology services for Veterans living in rural areas, psychotherapy may occur via VTC.

Didactics/Project ECHO: Project ECHO is a program based at the University of New Mexico that hosts weekly “virtual grand rounds” on a variety of medical conditions with a goal of bringing together clinicians to share knowledge and expertise. The neuropsychology fellow will participate in the Cognitive Rehabilitation TeleECHO, which includes weekly didactics and case presentations.

Supervision and Evaluation
The Neuropsychology Fellow will receive at least two hours per week of face-to-face individual supervision, as well as group supervision by neuropsychology staff. In addition to individual supervision, Fellows will have the opportunity to provide tiered supervision to neuropsychology externs / practicum students and interns.

Fellows will be evaluated using the criteria that require the Fellow to meet the minimum level of achievement in all competency areas i.e., psychological and neuropsychological evaluation, psychological intervention, consultation and supervision, professional and ethical behavior, sensitivity to diversity issues, development of professional identities as Psychologists/Neuropsychologists, and integration of science and practice on their final evaluation completed at the end of the sixth rating period. This means that the Fellow must have 100 percent of items in competency areas rated as a 5 (postdoctoral exit level) or higher at program completion.

The fellow will be evaluated every four (4) months, for a total of six (6) evaluations over two years. If a Fellow does not receive a minimal threshold for ratings in any competency area, she/he will receive
additional training in these areas, prior to the next rating period competency evaluations. If a Fellow receives a 1 (substantial supervision) on a competency item, substantial remediation will be required. If a Fellow receives a 2 (close supervision needed) or a 3 (some supervision needed) on a competency item, that competency will be targeted for additional training during the subsequent rating period.

The fellowship training program regularly evaluates its success as a training program. The Training Committee meets at least monthly and as needed to discuss the training program in terms of the Fellow’s current achievements and areas for program improvement. The program uses multiple other sources of data and information that are reviewed to identify areas of improvement. These include the fellow’s evaluation of supervisors, the fellow's evaluation of the overall training program, and the fellow’s self-evaluation regarding their development as a Psychologist/Neuropsychologist.

Research Overview
Twenty-five percent (25%) of the fellow’s time will be devoted to research. At the start of the training year, Fellows participate in a research seminar geared towards preparing them to conduct research within the VA setting. Guest speakers from the VA research community cover topics such as: VA sponsored research; the IRB application process; early career research awards and other funding opportunities; and communication of research findings. Throughout the training year, fellows meet monthly with members of the Research Subcommittee of the Training Committee to review their research progress, brainstorm ideas and problem-solve.

Fellows will engage in clinically relevant research and disseminate knowledge and information to the field through various methods including, but not limited to, poster presentations at national conferences, submission of manuscripts to peer reviewed journals, or grant proposals based on their research project. Fellows are encouraged to develop data that may lead to a publication or that they will submit to a scientific meeting during the course of the fellowship. Fellows are given appropriate leave to attend conferences. Exposure to research training is achieved by having the fellow participate in ongoing studies and having access to the Chief of Biostatistics at the DC VAMC as a research mentor. Fellows may participate in studies at various points in the research process, which may include: formulating a research idea, testing its feasibility for completion within this setting and within the time that is available, writing and submitting the IRB application, working with the R&D committee to obtain approval, initiating data collection, coordinating study activities, analyzing data, writing manuscripts, presenting results at national scientific meetings, publishing, and writing grant proposals.

One initiative that is being considered within the Neuropsychology Section is the incorporation of a telehealth component. VISN 5 has several rural facilities that do not have consistent access to neuropsychology services. In an effort to increase access to neuropsychology services for these mostly rural facilities, the neuropsychology service is considering incorporating a telehealth component, and the Neuropsychology Fellow will be expected to take an active role in developing this unique service, including possibly carrying out an efficacy / program evaluation study.

Other opportunities for research also exist, including collaborating with other disciplines, such as neurology, the Multiple Sclerosis Clinic, the sleep clinic, and the War-Related Injury and Illness Center (WRIISC). Past research projects within the neuropsychology service have included the role of cognitive rehabilitation in ameliorating cognitive weaknesses in Veterans diagnosed with MS; the effects of quality of education on neuropsychological test performance; and prospective memory.
Educational Activities

A. Joint Clinical Neuropsychology Fellowship Training Consortium
This training opportunity is a two-year curriculum that uses video teleconference (VTC) to facilitate involvement of multiple training sites, including Walter Reed National Military Medical Center, Tripler Army Medical Center, San Antonio Military Medical Center, Brooke Army Medical Center, Baltimore VA Medical Center, National Rehabilitation Hospital, Baylor Institute of Rehabilitation, and the Phoenix VA Medical Center.

B. Weekly Neuropsychology Seminar
This weekly seminar includes faculty and trainee lectures, case conference/group supervision, journal club, and mock fact findings to help prepare fellows for board certification in clinical neuropsychology.

C. Weekly Neurology Grand Rounds
The Neurology Department holds weekly lectures for all trainees/rotators, and many topics are relevant to the practice of neuropsychology.

D. Weekly Neuroradiology Grand Rounds
The Radiology Department holds weekly neurodiagnostic imaging case presentations for all interested trainees and faculty, including the Neuropsychology Section, to attend.

E. Once monthly Brain Cutting Conference
The Pathology Department holds monthly brain cutting conferences to demonstrate neuroanatomy and neuropathological phenomena to interested trainees and faculty from all disciplines.

F. Quarterly Joint Neurology / Neuropsychology Case Conference
The Neuropsychology Section and Neurology Department co-facilitate a quarterly multi-disciplinary case conference which is held during Neurology Grand Rounds (see above). Trainees from each department work together to present a relevant case to attendees from both departments.

G. Cognitive Rehabilitation TeleECHO
Project ECHO is a program based at the University of New Mexico that hosts weekly “virtual grand rounds” on a variety of medical conditions with a goal of bringing together clinicians to share knowledge and expertise. The neuropsychology fellow will participate in the Cognitive Rehabilitation TeleECHO, which includes weekly didactics and case presentations.

H. National Rehabilitation Hospital Didactics and Journal Club
National Rehabilitation Hospital is located across the street from the Washington DC VAMC and has its own formal postdoctoral training program in clinical neuropsychology. NRH faculty has historically welcomed DC VAMC neuropsychology trainees to attend their fellowship’s weekly hour-long didactic seminar and journal club.

Mentorship
Prior to the start of the training year, incoming Fellows are asked about qualities they would most value in a mentor, and then matched with a psychologist in our training program who has as many of these characteristics as possible. This psychologist will play a special role in a Fellow’s professional development within the field of psychology. The Clinical Mentor will be part of the Postdoctoral Faculty,
but there will not be a formal supervisory relationship, rather a supportive one to help the Fellow transition into the role and to help with consultation throughout the year.

Mentoring responsibilities include sharing knowledge and skills, overseeing the Fellow’s work, helping the Fellow to make contact with other team members and assisting with career counseling. This relationship also provides a non-evaluative forum for a Fellow to share ideas and to receive access to information and opportunities. It is a way for our program to demonstrate more transparency in all our processes and can aid Fellows by highlighting paths for success both during the training year and as Fellows consider the potential for being hired as staff once their formal training is complete. Moreover, the Fellow’s mentor provides guidance as the Fellow progresses through the training year, ensuring that the Fellow reaches his/her full potential during his/her training experience and later as a professional psychologist.

Training Faculty

**Ernest J. Aucone, PhD, ABPP-CN:** Dr. Aucone is board certified in clinical neuropsychology, and serves as the Program Manager for the Neuropsychology Section. He has been at the Washington DC VAMC since 2012. He did his graduate work at Nova Southeastern University, his internship at the Boston VA Healthcare System / Harvard Medical School, and his postdoctoral fellowship in neuropsychology at the University of Virginia. His clinical and research interests include differential diagnosis in dementia, traumatic brain injury, diagnostic decision-making, demographic and cultural influences on psychological tests, capacity assessment, and forensic neuropsychology.

**Kayleigh Hale, PsyD:** Dr. Hale is a staff neuropsychologist for the Polytrauma Clinic, where she conducts neuropsychological evaluations, evidence-based psychotherapy, and cognitive rehabilitation. She received a B.S. in human development from the University of Southern California, and M.A. and Psy.D. degrees from Pepperdine University. Dr. Hale completed internship training at the VA Long Beach Healthcare System and a two-year postdoctoral fellowship in clinical and research neuropsychology at the Washington DC VAMC’s War Related Illness and Injury Study Center (WRIISC). She transitioned into a staff position in 2017. Dr. Hale’s clinical and research interests include traumatic brain injury, rehabilitation psychology, and neuropsychological interventions.

**Lauren Skalina, PhD:** Dr. Skalina is a staff neuropsychologist for the Neuropsychology Section. She earned an MA and PhD in clinical psychology at American University and completed a pre-doctoral internship in the VA neuropsychology track of the VA Maryland Health Care System/University of Maryland-Baltimore Psychology Internship Consortium. Dr. Skalina has been at the Washington DC VAMC since 2015 as a postdoctoral fellow in clinical and research neuropsychology at the War Related Illness and Injury Study Center (WRIISC) and transitioned into a staff position in 2017. Her clinical and research interests include differential diagnosis of dementia, neuropsychological functioning in movement and demyelinating disorders and other neurological conditions, and the impact of health-related behaviors (e.g., sleep, exercise) on cognition.

**Jennifer M. Strang, PhD, ABPP-CN:** Dr. Strang is board certified in clinical neuropsychology, and serves as the Training Coordinator for the Neuropsychology Section. She has been at the Washington DC VAMC since 2014. She completed her graduate work at Arizona State University, her pre-doctoral internship at the Buffalo VAMC/VA Western New York Health Care System, and her postdoctoral fellowship in clinical and rehabilitation neuropsychology at Rehab Without Walls in Phoenix, AZ. Her clinical and research
interests include cognitive rehabilitation, traumatic brain injury, neurocognitive aspects of psychiatric disorders, differential diagnosis in dementia, and assessment of performance validity.

**Slavomir Zapata, PhD:** Dr. Zapata is the Director of Psychology Training Programs, where he has program and personnel management responsibilities for all three components of the Psychology Training Program: Post-doctoral Fellowship training program, Psychology Internship training program, and the practicum student training program. He is also the Coordinator of the Health Improvement Program (HIP) and works primarily with Veterans diagnosed with serious mental illness (SMI) and co-morbid medical disorders. Dr. Zapata is also an adjunct professor at George Mason University where he provides supervision for the assessment practicum students. His research experience includes serving as the Site Primary Investigator (PI) for a multisite study to Reduce Internalized Stigma in People with SMI. Dr. Zapata received his PhD in Clinical Psychology from George Mason University. He interned at the Washington DC VA Medical Center. He is certified in program and project management, holding the Federal Acquisition Center Project and Program Management Certification (FAC-P/PM).