Program Director: Matthew Sacco, PhD

# of Fellows: 6 fellows currently, with the potential of 6 per year

Start Date: September 1 (Start day varies yearly according to GME orientation day availability)

End Date: August 30 (12 months from start date)

**Fellowship Duration:** 1 year (**2 years optional w/ mutual consent, written notice of intent**) (Satisfactory completion of 12 months of fellowship training is required for graduate certificate of completion to be issued. The initial 12-month contract may be renewed for a second year of fellowship training, if there is an available position and upon mutual consent with the fellowship supervisory committee. The optional second year of training is contingent upon a fellow’s satisfactory completion of the first year of fellowship and his/her written notification of intent to remain for year 2 of training. **Each fellow must submit a letter of intent to remain for second year OR complete fellowship at end of 12 months to the fellowship Program Director by Dec. 6th of the academic year.**

Rotation Hours: 8 scheduled hours per day (40-45 hours per week)

Major Rotations = 3 or 4 days per week

Minor Rotations = 1 to 2 days per week

# of Rotations:

Major 6- General Health, Chronic Pain Rehabilitation, Mellen Center for Multiple Sclerosis, Behavioral Sleep Medicine and Bariatric, Epilepsy

Minor 6 -Minor rotations in these areas are assigned based on the goodness of fit with major rotations: General Health Psych Outpatient, Behavioral Sleep/Sleep disorders clinic, Mellen Center, Bariatric Clinic, Psycho-Oncology, Movement Disorders, Epilepsy, Medical School teaching (when available)

Overview:

The goal of this Clinical Health Psychology Fellowship is to provide individualized, clinical opportunities for psychological assessment and interventions with adult patients experiencing a wide range of medical and psychological problems. Our fellowship is primarily outpatient-based and includes psychological consultations and diagnostic interviews, short-term psychotherapy, behavioral interventions, group psychotherapy with medical patients, and special programs (e.g. psychological treatment of multiple sclerosis, cognitive behavioral treatment of insomnia, primary care, stress management, and objective personality assessment). Opportunities are available to pursue special
areas of interest (such as medical school teaching, marital and family therapy, chronic pain, program
development, and bariatric evaluations).

Many of the patients seen by our personnel have significant medical problems. Others present with a
broad variety of personal problems and clinical syndromes including: grief/loss, major depression,
bipolar disorder, dysthymia, generalized anxiety, post-traumatic stress, phobias, panic disorder,
obsessive-compulsive disorder, chronic insomnia, binge eating disorders, morbid obesity, somatization
reactions, adjustment disorders, and coping with chronic medical illness (e.g. multiple sclerosis,
headache, and cardiac disease). The postdoctoral fellow will build and maintain an active caseload of
adult patients representing a broad range of diagnostic categories, presenting problems,
socioeconomic status, and developmental life stages. The fellow will work under the close supervision
of staff psychologists in the various clinical rotations and will receive at least two hours of individual
supervision per week.

Many opportunities for participation in research projects exist and fellows typically participate in writing
journal articles and chapters, making poster presentations, and presenting at Grand Rounds in a
variety of departments. Sometime allotments are arranged for research; however, the primary
objective of the fellowship is clinical experience. The fellow is expected and encouraged to participate
in ongoing research, educative and didactic programs, and teaching opportunities with medical
students and residents, and to make one organized presentation at the Department of Psychiatry and
Psychology didactics or Grand Rounds on a research or clinical topic of their choice.

The fellowship provides a 12-month stipend of approximately $58,642 with an increase in the second
year of training. Benefits include: individual supervision for licensure, extensive didactics, paid time
away (15 vacation days, 5 personal days), individual/family medical benefits (available for a fee), dental
insurance (available for a fee), vision insurance (available for a fee), and flexible spending accounts for
dependent care and health care expenses (contributions are pre-tax). One stipend per fellow may be
available for travel/conference attendance pending approval by the Department Administrator. The
fellow must be the primary author and presenter at the conference, the research must be generated at
Cleveland Clinic, and the research must be published during the fellowship.

Rotations:

**Current Majors:**
- General Health Psychology in Family Health Practice
- Chronic Pain Rehabilitation
- Mellen Center Multiple Sclerosis
- Behavioral Sleep Medicine
- Bariatric
- Conversion Disorder (Epilepsy)

**Current Minors:**
- General Health Psychology Outpatient Clinic/Family and Marital Therapy
- Behavioral Sleep Medicine/Sleep Disorders Clinic
- Mellen Center
- Bariatrics Clinic
- Conversion Disorder (Epilepsy)
- Neurological Restoration (Movement Disorders)
- Gastro Intestinal
- Psycho-Oncology/Breast Center
Medical School Teaching/Communication Skills Training

**Education/Administrative**

- 2 hours of Health Psychology Didactics/Week
- 2 hours Research/Week (varies by rotation)
- 2 hours Individual Clinical Supervision/Week
- 1 hour Psychiatry and Psychology Department Grand Rounds/Week
- 2-3 hours of Department Specific Grand rounds, Didactics, and/or Journal Clubs

**Clinical Supervisors:**

- Kathleen Ashton, Ph.D., ABPP
- Adam Borland, PsyD
- Chivonna Childs, Ph.D.
- David Creel, PsyD
- Allyson Diggins, PhD
- Beth Dixon, PsyD
- Michelle Drerup, PsyD
- Kasey Goodpaster, PhD
- Leslie Heinberg, PhD, MA
- Alexa Kane, PsyD
- Stephen Lupe, PsyD
- Ninoska Peterson, PhD
- Kia-Rai M. Prewitt, Ph.D.
- Sara Rispinto, PhD
- Alicia Roth, Phd
- Taylor Rush, PhD
- Matthew Sacco, PhD
- Amy Sullivan, PsyD, ABPP
- Bikat Tilahun, PhD
- Cynthia Van Keuren, PsyD

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1 CCLCM Medical School Basic and Advanced Communication Skills Courses occur Tuesdays 12:30-3 pm or Wednesdays 1-3 pm. Must be pre-approved by the supervisor(s) of rotations affected and Program Director. The number of preceptor slots for communication skills training fluctuates year to year and is not guaranteed for our fellows.
Conferences:

One stipend per fellow may be available for travel/conference attendance pending approval by the Department Administrator. The fellow must be the primary author and presenter at the conference, the research must be generated at Cleveland Clinic, and the research must be published during the fellowship. Conference leave time must be approved 90 days in advance by the Program Director and Rotation Supervisors.

Clinical Coverage:

Supervisors are responsible for informing Supervisees of their time away, if possible, 90 days in advance, or per Cleveland Clinic Policy. Fellows may provide clinical coverage of a particular area provided supervisory coverage has been arranged by the supervisor and both the Program Director and Supervisee give their approval.

Goals/Objectives:

Written objectives will be provided to fellows for each major and minor rotation that take into consideration rotation clinical demands, teaching opportunities, and the fellow’s personal learning goals. See rotation descriptions for more details.

Evaluations:

Occur at mid-term and end of fellowship. Computerized evaluations include fellows’ evaluation of program, fellows’ evaluation of didactics, fellows’ evaluation of supervisors and supervisors’ evaluation of fellow performance. Fellows will meet with their Program Director on a semi-annual basis to discuss the evaluations the supervisors have completed on the fellows’ performance.

Supervisor Meetings:

Will occur on average of 1/month; TBD by Program Director

Supervisor Requirements:

1. Participate in monthly program/supervisor meetings.
2. Complete mid-term and end of year evaluations and provide feedback to fellows in a timely manner.
3. Provide 2 hours of supervision for every 40 hours of fellows’ clinical time.
4. Identify rotation objectives and combine with fellows’ personal learning goals and update as appropriate.
5. Complete State Board of Psychology notification of supervision.
6. Complete Supervisory Plan Sheet (see attached) and submit to Program Director.
7. Adhere to program hours and policies on Vacation, Conferences, and Coverage.

**Recruitment Process:**
Applications are accepted from September through the mid-week of December of each calendar year. Applications should be submitted to the coordinator. They are reviewed by the Program Director and supervisors of major/minor rotations. Qualified applicants will have completed all requirements for their doctoral degree (PhD or PsyD) in clinical or counseling psychology from an APA-approved program including their dissertation defense before the September start date of their first year of fellowship (no exceptions). In addition, they will have graduated from a pre-doctoral internship in adult clinical and/or health psychology (health psychology experience is essential) that is an APA accredited graduate program (preferred) or graduate program that meets the APPIC standards (required). Our fellowship is not currently APA accredited, but we are listed on the APPIC directory.

Interested applicants should email the following materials to Karen Walsh at walshk3@ccf.org: CV and a letter of interest/intent specifying preferences for major rotation(s). Please specify all major rotations for which you would like to be considered. There is no penalty for naming more than one rotation of interest. Also include a clinical work sample and three letters of recommendation (sent by their authors). If you have not yet received your doctorate, a letter from your program director attesting to your status as a doctoral candidate, and anticipated date of dissertation defense as well as anticipated graduation date are also required. Any questions should be directed to: Karen Walsh at walshk3@ccf.org.

**Interview Process:**
Interviews for invited applicants are held in a group format in late January/early February of each calendar year. Applicants selected for interviews will be contacted via email in mid to late January. All active supervisors will be present and participate during interviews to provide an opportunity to interact with all candidates. Due to travel and gathering restrictions as a result of the COVID-19 pandemic, virtual interviews are currently the only form of interview until otherwise specified.

**Hiring Decision:**
Completion of an APA accredited doctoral internships is required with preference given to those with emphasis in health psychology. Prior to beginning the first year of fellowship, fellows are required (no exceptions) to have completed all requirements for their doctoral degree (PhD or PsyD) in clinical or counseling psychology from an APA-approved program including their dissertation defense.

Hiring decisions are typically made in late February early March of every calendar year. Actual appointments begin in late August/early September. In years where there is an APPIC Uniform Notification Date (UND) for postdoctoral fellowships we adhere to their hiring policies.
The goal of this fellowship is to provide individualized, clinical opportunities for psychological assessment and interventions with adult patients experiencing a wide range of medical and psychological problems. The fellowship is primarily outpatient-based and includes psychological consultations and diagnostic interviews, short-term psychotherapy, behavioral interventions, groups, couples therapy and special programs (e.g. smoking cessation, psychological treatment of multiple sclerosis, psychological treatment of insomnia, weight management, primary care, stress management, biofeedback, and objective personality assessment). Opportunities are available to pursue special areas of interest (such as medical school teaching, marital and family therapy, personality testing, chronic pain, program development, and bariatrics evaluations).

Many of the patients seen by our personnel have significant medical problems. Others present with a broad variety of personal problems and clinical syndromes including: grief/loss, major depression, bipolar disorder, dysthymia, generalized anxiety, post-traumatic stress, phobias, panic disorder, obsessive-compulsive disorder, chronic insomnia, binge eating disorders, morbid obesity, somatization reactions, adjustment disorders, and coping with chronic medical illness (e.g. multiple sclerosis, pain, diabetes). The postdoctoral fellow will build and maintain an active caseload of adult patients representing a broad range of diagnostic categories, presenting problems, socioeconomic status, and developmental life stages. The fellow will work under the close supervision of staff psychologists in the various clinical rotations and will receive at least two hours of individual supervision per week.

Many opportunities for participation in research projects exist and fellows typically participate in writing journal articles and chapters, making poster presentations, and presenting at Grand Rounds in a variety of departments. Sometime allotments are arranged for research; however, the primary objective of the fellowship is clinical experience. The fellow is expected and encouraged to participate in ongoing research, educative and didactic programs, teaching opportunities with medical students and residents, and to make one organized presentation at the Department of Psychiatry and Psychology didactics or Grand Rounds on a research or clinical topic of their choice.

Our training philosophy is based on the scientist-practitioner model: we help postdoctoral fellows develop advanced competencies and skills in the practice of health psychology, integrate research and practice, engage in interprofessional collaboration, and supervision of junior trainees. Within the framework of the diverse training experiences available, we design individualized training plans for postdoctoral fellows that reflect their clinical, academic and professional development goals. As part of this training program, postdoctoral fellows participate in supervised service delivery, educational and didactic activities, regular face-to-face supervision with licensed faculty, and training in and delivery of supervision to junior trainees and colleagues. Postdoctoral fellows have the opportunity to collaborate with departmental faculty in research. In collaboration with faculty mentors, postdoctoral fellows complete an individual development plan each year. Finally, postdoctoral fellows regularly receive and discuss formal evaluations on their progress towards their goals with supervising faculty.

The primary goals of our postdoctoral training program are to prepare postdoctoral fellows to function as competent and capable health service psychologists who

1. Exhibit an advanced level of professional conduct and ethical standards
2. Demonstrate advanced practice competencies with regards to evidence-based practice and the provision of effective psychological services (i.e., assessment, intervention, and consultation)
3. Exhibit advanced competencies with regard to the basic knowledge and skills of research to function effectively as consumers of research and scientist-practitioners
4. Exhibit advanced competencies in clinical teaching, supervision, and mentorship. Ultimately, attainment of these goals/aims will allow for our fellows to function effectively as collaborative, ethical, and culturally-competent psychologists, team members, and leaders in diverse health care settings.

Postdoctoral fellows will attain advanced competence and demonstrate capability in a number of areas including

1. Integration of Science and Practice
2. Individual and Cultural Diversity
3. Ethical and Legal Standards
4. Professional Values, Attitudes, and Behaviors
5. Assessment
6. Intervention
7. Consultation and Interprofessional/Interdisciplinary Skills
8. Supervision/Teaching/Mentoring
9. Research and/or Program Evaluation
10. Management/Administration and Leadership. These advanced competencies are consistent with the specialty competencies for postdoctoral training in Clinical Health Psychology as determined by the Council of Specialties in Professional Psychology.
Major Rotations Overview
3 days per week for 1 year or 4 days per week for 1 year depending on site and supervisor availability

(Each Major Rotation is also available as a Minor Rotation)
Bariatrics Rotation

Description of Rotation

The Bariatric and Metabolic Institute (BMI) at The Cleveland Clinic consists of an interdisciplinary team of healthcare providers who provide comprehensive assessment and treatment of obesity (e.g., surgeons, obesity medicine physicians, psychologists, dieticians, nurses, etc) and produce clinical research that helps guide best-practices within the field. Currently, there are five psychologists in the BMI and who supervise the clinical/health psychology postdoctoral fellow. The primary role of BMI psychology is the assessment and treatment of individuals seeking bariatric surgery. However, BMI psychology also offers multimodal cognitive behavioral treatment for individuals obtaining medical weight management or presenting with eating disorder. BMI psychologists provide consultation to the BMI interdisciplinary inpatient and outpatient team and the community at large via psycho-educational seminars. BMI psychologists have developed an extensive research database (n>1000 patients) and continue to collect data and conduct research related to weight loss surgery and weight management. Their collective work has resulted in a national reputation for clinical research in bariatric psychology.

Educational Purpose

To prepare fellows for scientist-practitioner roles as clinical health psychologists in academic medical institutions, applying knowledge of bariatric surgery, obesity, weight management, health promotion, eating disorders, and general mental health. This year-long rotation will be based at the Cleveland Clinic Digestive Disease and Surgery Institute. Fellows will be seeing patients in the outpatient setting by the modalities of in-person visits and telepsychology. Their responsibilities will include chart review; interview and assessment of pre-, post-, and non-surgical patients; psychological assessment; obtaining collateral information from other sources (e.g., other mental health providers) when necessary; group and individual therapy; support group facilitation; and consultation with the multidisciplinary team.

Assessment Summary

Electronic assessment via MedHub evaluations will be completed by the supervising BMI Psychology staff. Staff may seek input from other staff physicians, dietitians, and nursing staff, other health psychology fellows as well other allied healthcare providers. These will be completed at the end of the rotation. Fellows will receive ongoing feedback throughout the rotation as well e.g. during supervision.

Expectations

Schedule:
Arrive by 8am each day unless otherwise notified and check in with the supervising staff. Staffing will occur during the latter portion of new evaluations, while staffing of established patients is typically done during regularly scheduled supervision times, or other times as needed. Please be aware that the day typically concludes by 5 PM, but there may be days which extend beyond that time. Completion of notes that are forwarded to supervisor within 24 hours of patient having been seen for their appointment

For all new consultations and follow-ups:
A complete psychiatric consultation or health and behavioral assessment is to be performed for each new evaluation, dependent upon chart review and presenting issues Consults must be documented via the BMI Psychology Templates in EPIC. Fellows should also expect to call collateral from appropriate sources when necessary, family, friends, POA’s, guardians, other mental health providers, or physicians.
Patient Care Goals
Complete comprehensive pre-surgical psychological evaluations of bariatric candidates
Fellows will manage an average of 2 templated new evaluations per day with integrated objective psychological testing (i.e., MMPI-2-RF) as deemed necessary.
Fellows will demonstrate competency in clinical diagnosis, treatment planning, and multimodal treatment approaches.
Perform follow-up care with established patients in a therapeutic, clinically effective manner.
Fellows will manage a minimum of 2 templated established patients per day.
Fellows will participate in and/or develop a group treatment program for bariatric patients.
Fellows will facilitate at least one BMI weight loss surgery support group or community/public talk per year.
Fellows should integrate psychological assessment data into clinical case formulations, when required or appropriate.

Medical Knowledge Goals
Fellows will demonstrate up-to-date knowledge of the empirical literature regarding weight management, obesity, eating disorders, bariatric surgery and associated psychosocial variables relevant to the psychological assessment and treatment of bariatric patients.

This competency will be assessed by fellow’s identification of evidence-based resources to answer queries by patients (as observed in staffing) and in their 2 hours of weekly supervision. Further, the fellow will identify and acknowledge gaps in knowledge and will work with staff in weekly supervision to develop and implement plans to correct these gaps.

By the end of fellowship, fellow will demonstrate ability to apply knowledge base to new clinical and research problems by citing relevant medical literature and other sources of evidence. Fellows will complete a minimum of one research project or literature review relevant to this area (topic must be approved by their supervisor, definition of research project may be flexible).

- Fellow will demonstrate the ability to generate a research hypothesis and formulate a study design to test this hypothesis.
- The fellow will work collaboratively with research supervisor and other members of the BMI team as needed.
- Fellow will initiate and complete their research project during fellowship year. Project should be of sufficient quality to be submitted for publication in a top-tier bariatric surgery peer-reviewed publication.
- Fellows will present a minimum of one grand rounds or in-service to psychology and/or BMI staff on a topic relevant to this area.
- Fellows will complete assigned reading list and add at least 2 new/seminal articles with written summaries during their rotation
- Research supervisor (Dr. Heinberg) will review and edit written summaries. Fellows will be evaluated on ability to critically review relevant literature and correctly assess the strengths and weaknesses of the methodology and conclusions.
- Fellows will demonstrate multidisciplinary knowledge
- Fellows will attend monthly multidisciplinary team meetings (with the exception of when BMI meetings fall on days they are training on another rotation)
- Fellows will work collaboratively with other members of the team via electronic medical record messages, emails, and “curbside” consults

Practice Based Learning and Improvement Goals
- Fellows are encouraged to identify literature pertinent to their patient caseload and to apply up to date literature to their treatment plans for these patients.
- Fellows are encouraged to participate in program development and/or facilitation of psychotherapy groups, as required.
- Fellows will be encouraged to engage in innovative development and/or practice (e.g., creation of program materials, virtual programs, etc.)
- Fellows are encouraged to participate in other practice-based educational opportunities including the annual Obesity Summit, Psychiatry and Psychology Grand Rounds, and the ASMBS annual convention.

**Interpersonal Skills and Communication**
- Fellows will provide clear, concise written and oral presentation of psychological impressions and recommendations to their supervisor, the multidisciplinary team, other health care providers, and their patients.
- Fellows will verbally exchange with other health care providers regarding mutual patients when appropriate.
- Relationships: The fellow should have the ability to develop and maintain appropriate, effective work relationships, including functioning as a team player, displaying appropriate assertiveness, and treating multidisciplinary staff in a cordial, respectful manner.
- Fellows will participate in multidisciplinary team meetings, didactics, supervision, and other rotation requirements.
- Fellows will demonstrate cultural sensitivity and the capacity to identify and address ethical issues pertinent to the evaluation and treatment of sleep patients.
- Fellows will utilize knowledge of lifespan development and cultural diversity issues with patients, as appropriate.
- Fellows should communicate and collaborate effectively with other medical/treatment providers re: mutual patients.
- Fellows should demonstrate competency in communication and teaching skills with peers and patients.
- Fellows will demonstrate ability to communicate findings from personal research project in concise and clear manner to both experts in the field and lay-person.
- Fellows will communicate feedback to research and clinical supervisees in a balanced manner that identifies targeted areas for improvement and builds upon strengths of the supervisee.

**Professionalism Goals**
- Responsibility: The fellow should display organization, efficiency, strong work ethic, and conscientiousness as demonstrated by fellow’s ability to carry out required tasks in a timely manner, follow through on tasks, and keep professional commitments.
- Comportment: The fellow should display professionally appropriate demeanor and decorum as demonstrated by fellow’s emotional maturity, flexibility, positive attitude, and personal presentation (including attire) in the workplace.
- Responsiveness to Supervisor Feedback: The fellow should have the ability to function effectively under supervision, including fellow’s openness to criticism, level of defensiveness, willingness to improve or change targeted behaviors, and knowledge of when to seek help balanced with appropriate levels of autonomy.
- Ethics: The fellow’s professional behavior should be in accordance with APA ethical principles, state regulations and other codes of professional conduct as demonstrated by fellow’s level of personal integrity and ability to recognize and raise ethical issues, as appropriate.
- Timeliness: The fellow should complete required number of new and established patient cases per day on rotation days.
- The fellow should complete documentation for all clinical encounters within required timeframe.
- Fellows will attend regular supervision.
Systems Based Learning Goals
1. Fellows will demonstrate knowledge of other disciplines and how to navigate between different providers
   a) Fellows will observe the following:
      i. Dietitians
      ii. Obesity medicine physicians
      iii. Bariatric surgeons
2. The fellow should communicate and collaborate effectively with other medical/treatment providers re: mutual patients.
3. Fellows work when necessary to facilitate patient wellness in other areas of their health including:
   a) demonstrate knowledge of how to obtain transportation, social work consults, etc.
   b) demonstrate knowledge of how to appropriately consult
   c) work to improve care overall at CCF and are actively involved in providing feedback to the CCF system when applicable

PTO/Absences
Notify supervisor as soon as possible of any anticipated absences.
Any vacation requests must be made well in advance (90 days for BMI) and must follow the requirements set forth by the health psychology fellowship training director
Vacation requests must be presented to the supervising staff, as well as to the post-doctoral fellowship training director.

Should you have any questions, you are to contact the program coordinator for further information regarding absences.
Supervisors: David Creel, PsyD, Allyson Diggins, Ph.D., Kasey Goodpaster, Ph.D., Leslie Heinberg, Ph.D., Ninoska Peterson, Ph.D.
BEHAVIORAL SLEEP MEDICINE/SLEEP DISORDERS

Description of Rotation
The Behavioral Sleep Medicine Major Rotation offers a major rotation (3 days/week) and a minor rotation (1 day/week) working in a multidisciplinary Sleep Disorders Center. The focus of the rotation is evaluation and treatment of patients with sleep disorders from a psychological perspective with emphasis on insomnia, sleep apnea, and circadian rhythm disorders. Fellows gain an understanding of the etiologies, diagnosis, and treatment of sleep disorders. The rotation includes education and training in general sleep medicine concepts, as well as behavioral/psychological treatments for sleep disorders including cognitive behavioral therapy, motivational interviewing, and mindfulness-based approaches. Psychological evaluation, individual, and group therapy are the key activities along with communication with sleep physicians and other disciplines regarding patient care. The fellow works under the close supervision of the Director of Behavioral Sleep Medicine and other staff and receives at least one hour of individual supervision per week. Fellows are required to present at Sleep Grand Rounds at least once and are encouraged to engage in various other opportunities including research projects, writing journal articles and chapters, and submission of research at national meetings. Fellows should be eligible for Behavioral Sleep Medicine Certification at the completion of the rotation.

Educational Purpose
The goal of this fellowship is to provide supervised, clinical opportunities for unlicensed graduates of psychology doctoral programs. This training includes educating fellows in the application of biopsychosocial model and clinical health psychology skills to a sleep disorders population. The BSM rotation is based at Cleveland Clinic Sleep Disorders Center on the Main Campus of Cleveland clinic and the Neurological Institute Suite at Fairview Hospital. Fellows see patients in the outpatient setting. Their responsibilities include chart review, interview and assessment of the patient, discussion with sleep physicians, nurse practitioners, and other members of the multi-disciplinary team, as well as obtaining collateral information from pertinent sources (e.g. family, friends, outpatient providers, and pharmacies) when necessary. The purpose is to provide behavioral sleep interventions for patients with sleep disorders, while functioning as a member of the collective healthcare team providing treatment to patients.

Patient Care Goals
1. Complete comprehensive Behavioral Sleep Medicine evaluations of sleep disorder patients
   a. Fellows will manage an average of 2-3 templated new evaluations (90 min slots) per day.
   b. Fellows will demonstrate the utility of psychological testing with at least one insomnia patient
2. Apply knowledge of cognitive behavioral principles to treatment of sleep disorders including insomnia in both individual and group formats
   a. Fellows will manage a minimum of 2-3 templated established patients (60min slots) per day.
   b. Fellows will observe, when available, CBT-I and Sleep Apnea Management group treatment modalities
   c. Fellows will participate in and/or develop a group treatment program for sleep patients.
i. Fellows will cofacilitate the Sleep Skills Group (Cognitive Behavioral Therapy for Insomnia group) at least two times during rotation and facilitate the group on their own at least two times during the rotation.

ii. Fellows are encouraged to develop a novel or innovative group treatment program for a specific sleep disorder population (e.g., CBT for teens with delayed sleep phase, CBT-I group for specific medical population)

3. The fellow should perform follow-up care with established patients in a therapeutic, clinically effective manner.

4. The fellow should integrate psychological assessment data into clinical case formulations, when required or appropriate.

5. The fellow will participate in the education and training of residents/sleep medicine fellows rotating in Behavioral Sleep Medicine. This may involve having rotators observe new evaluations and follow up sessions, as well as engaging in educational discussions with these rotators regarding the practice and implementation of Behavioral Sleep Medicine

Patient Care Goals
Complete comprehensive Behavioral Sleep Medicine evaluations of sleep disorder patients

a. Fellows will manage an average of 2-3 templated new evaluations (90 min slots) per day.

b. Fellows will demonstrate the utility of psychological testing with at least one insomnia patient

Apply knowledge of cognitive behavioral principles to treatment of sleep disorders including insomnia in both individual and group formats

c. Fellows will manage a minimum of 2-3 templated established patients (60min slots) per day.

d. Fellows will observe, when available, CBT-I and Sleep Apnea Management group treatment modalities

e. Fellows will participate in and/or develop a group treatment program for sleep patients.

i. Fellows will cofacilitate the Sleep Skills Group (Cognitive Behavioral Therapy for Insomnia group) at least two times during rotation and facilitate the group on their own at least two times during the rotation.

ii. Fellows are encouraged to develop a novel or innovative group treatment program for a specific sleep disorder population (e.g., CBT for teens with delayed sleep phase, CBT-I group for specific medical population)

The fellow should perform follow-up care with established patients in a therapeutic, clinically effective manner.

The fellow should integrate psychological assessment data into clinical case formulations, when required or appropriate.

The fellow will participate in the education and training of residents/sleep medicine fellows rotating in Behavioral Sleep Medicine. This may involve having rotators observe new evaluations and follow up sessions, as well as engaging in educational discussions with these rotators regarding the practice and implementation of Behavioral Sleep Medicine

Clinical Supervisor: Michelle Drerup, PsyD, Alicia Roth, PhD

Health Psychology Fellowship Training Manual
MELLEN CENTER FOR MULTIPLE SCLEROSIS

Description of Rotation
The Mellen Center for Multiple Sclerosis Major Rotation is a three days/week rotation working in one of the largest and most comprehensive programs for Multiple Sclerosis care and research worldwide. The focus of the rotation is evaluation and treatment of patients with various neurological disorders from a psychological perspective with emphasis on psychological adjustment to chronic disease. The rotation will include training in cognitive behavioral therapy, acceptance and commitment therapy, motivational interviewing, mindfulness-based approaches and other psychological treatments. Psychological evaluation, individual, and group psychotherapy are the key activities along with communication with neurologists, advance practice providers, physical therapists and other disciplines.

Educational Purpose
To educate fellows in application of the biopsychosocial model and clinical health psychology skills to a population diagnosed with neurological disorders. This year longitudinal rotation will be based at Cleveland Clinic Mellen Center for Multiple Sclerosis Treatment and Research. Fellows will be seeing patients in the outpatient setting. Their responsibilities will include chart review, interview and assessment of the patient, discussion with neurologists, nurse practitioners, and other members of the multi-disciplinary team, as well as obtaining collateral information from pertinent sources (e.g. family, friends, outpatient providers, and pharmacies) when necessary. The purpose will be to provide interventions for patients with neurological disorders, while functioning as a member of the collective healthcare team providing treatment to patients.

Assessment Summary
Electronic assessment via MedHub evaluations will be completed by the supervising Mellen Center for MS Behavioral Medicine Staff. Staff may seek input from other staff physicians and nursing staff, sleep medicine and health psychology fellows as well other allied healthcare providers. These will be completed at the end of the rotation. Residents will receive ongoing feedback throughout the rotation as well during supervision.

Expectations
Schedule:
1. Arrive by 8am each day unless otherwise notified and check in with the supervising staff.
2. Staffing will occur during the appointment time of new evaluations, while staffing of established patients may be help before, during or after patients.
3. Please be aware that the day typically concludes by 5 PM, but there may be days which extend beyond that time.
4. Completion of notes that are forwarded to supervisor within 24 hours of patient having been seen for their appointment

For all new consultations and follow-ups:
1. A complete psychiatric consultation or health and behavioral assessment is to be performed for each new evaluation, dependent upon chart review and presenting issues
2. Consults must be documented via the Mellen Center Templates in EPIC
3. Fellows should also expect to call collateral from appropriate sources, when necessary, family, friends, POA’s, guardians, other mental health providers, or pharmacies.

Patient Care Goals
1. Complete comprehensive psychological evaluations of neurological disorder patients
   a. Fellows will manage an average of 2-3 templated new evaluations per day.
   b. Fellows will demonstrate the utility of psychological testing with at least patient
2. Apply knowledge of psychological adjustment to chronic disease interventions including both individual and group formats
   a. Fellows will manage a minimum of 2-3 templated established patients per day.
   b. Fellows will participate in and/or develop a group treatment program for Mellen Center patients.
      i. Fellows will facilitate groups (Young Professional Group, Men’s Group, Caregiver Support Group, MS Support Group) during rotation.
      ii. Fellows are encouraged to develop a novel or innovative group treatment program for a specific topic of the fellow’s interest within the Mellen Center.
3. The fellow should perform follow-up care with established patients in a therapeutic, clinically effective manner.
4. The fellow should integrate psychological assessment data into clinical case formulations, when required or appropriate.

Medical Knowledge Goals
1. Demonstrate up-to-date knowledge of the empirical literature regarding psychosocial variables relevant to the psychological assessment and treatment of chronic disease and multiple sclerosis
2. Fellows will complete a minimum of one research project relevant to this area (topic must be approved by their supervisor, definition of research project may be flexible).
3. Fellows will attend Journal Club and Case Conferences with Mellen Center fellows when schedule allows

Practice Based Learning and Improvement Goals
1. Fellows are encouraged to identify literature pertinent to their patient caseload and to apply up to date literature to their treatment plans for these patients.
2. Fellows are encouraged to participate in program development and/or facilitation of psychotherapy groups, as required.
3. Fellows will be encouraged to engage in innovative development and/or practice

Interpersonal Skills and Communication
1. Fellows will provide clear, concise written and oral presentation of psychological impressions and recommendations to their supervisor, the interdisciplinary team, other health care providers, and their patients
2. Fellows will verbally exchange with other health care providers regarding mutual patients when appropriate.
3. Relationships: The fellow should have the ability to develop and maintain appropriate, effective work relationships, including fellow’s ability to function as a team player, display appropriate assertiveness, and treat multidisciplinary staff in a cordial, respectful manner.
4. The fellows will participate in multidisciplinary team meetings, didactics, supervision, and other rotation requirements.
5. The fellows will demonstrate cultural sensitivity and the capacity to identify and address ethical issues pertinent to the evaluation and treatment of sleep patients
6. The fellows will utilize knowledge of lifespan development and cultural diversity issues with patients, as appropriate.
7. The fellow should communicate and collaborate effectively with other medical/treatment providers re: mutual patients.
8. The fellow should demonstrate competency in communication and teaching skills with peers and patients.
Professionalism Goals
1. Responsibility: The fellow should display organization, efficiency, strong work ethic, and conscientiousness as demonstrated by fellow's ability to carry out required tasks in a timely manner, follow through on tasks, and keep professional commitments.
2. Comportment: The fellow should display professionally appropriate demeanor and decorum as demonstrated by fellow’s emotional maturity, flexibility, positive attitude, and personal presentation (including attire) in the workplace.
3. Responsiveness to Supervisor Feedback: The fellow should have the ability to function effectively under supervision, including fellow’s openness to criticism, level of defensiveness, willingness to improve or change targeted behaviors, and knowledge of when to seek help balanced with appropriate levels of autonomy.
4. Ethics: The fellow’s professional behavior should be in accordance with APA ethical principles, state regulations and other codes of professional conduct as demonstrated by fellow’s level of personal integrity and ability to recognize and raise ethical issues, as appropriate.
5. Timeliness: The fellow should complete required number of new and established patient cases per day on rotation days.
6. The fellow should complete documentation for all clinical encounters within required timeframe.
7. Fellows will attend regular supervision.

Systems Based Learning Goals
1. Fellows will demonstrate knowledge of other disciplines and how to navigate between different providers
   a. Fellows will shadow a neurologist for at least one day during rotation
   b. Fellows will shadow a physical therapist for at least one-half day during rotation
2. The fellow should communicate and collaborate effectively with other medical/treatment providers re: mutual patients.
3. Fellows work when necessary to facilitate patient wellness in other areas of their health including:
   a. demonstrate knowledge of how to obtain transportation, social work consults, etc.
   b. demonstrate knowledge of how to appropriately consult
   c. work to improve care overall at CCF and are actively involved in providing feedback to the CCF system when applicable

Clinical Supervisors: Alexa Kane, PsyD
General Health Psychology Outpatient Rotation

Rotation Description:
The Solon family Health & Surgery Center of The Cleveland Clinic consists of a multidisciplinary team of healthcare providers who provide comprehensive assessment and treatment of numerous medical conditions and conduct many different outpatient procedures. At the Solon Family Health Center, Primary Care Psychology is treated as a medical subspecialty. During their rotation, fellows gain the opportunity to work collaboratively with Family Medicine Physicians, Internal Medicine Physicians, as well as Pediatricians (should they wish to gain experience in Pediatric Health Psychology). In addition, they may receive referrals from one of 80 other physicians in a multitude of subspecialties (Pulmonology, Orthopaedics, Urology, Gastroenterology, Cardiology, Gynecology, etc.). Fellows will treat all referrals deemed appropriate by their clinical supervisor given the fellow’s level of competence and professional goals. Each fellow will be also expected to run or co-lead a Psychoeducational Behavioral Health and Wellness Group under the supervision of the Licensed Psychologist.

Educational Purpose:
The primary role of the General Health Psychology rotation is to assist the fellow in gaining experience in providing psychological services within an outpatient medical setting. They will treat patients of diverse backgrounds, many of who struggle with a dual diagnosis of a medical condition (Diabetes, Hypertension, Insomnia, IBS, etc.) and a concurrent psychological condition (Depression, Marital Problems, Anxiety, etc.) They will learn how these conditions are inter-related and inextricably bound via the mind-body connection. As their understanding of the sophisticated interplay between systems grows, they will learn to use these pathways to promote improvement in functioning and lasting wellness. They will also learn how to work collaboratively with the physicians in developing a behavioral treatment plan, provide the skills training necessary to the patient, and follow-up with the referring physician as necessary in coordinating and reinforcing a maintenance program.

Assessment Summary:
With each new patient the fellow will complete a thorough assessment report for the EMR after completing the initial intake session. The intake report will include an overview of the presenting concerns, outline of symptoms, current stressors, MSE, developmental history, family history, diagnosis and treatment plan in conjunction with supervisor, treatment goals, etc. In addition, fellows will use standardized assessment devices, as indicated, to track progress of specific goals, symptoms, or syndromes.

Expectations:
The fellow is expected to provide approximately 20 hours of direct client service at the Solon FHC each week. During their rotation, they will co-lead one 6–12-week Behavioral Wellness Group focusing on an identified need of the population that is also commensurate with the trainee’s goals e.g., stress management, sleep hygiene, coping with stress-related medical conditions, diabetes management, relationship issues, etc. The fellow is also expected to create accurate and complete documentation of all services provided in the EMR. The fellow is asked to read books or articles periodically to advance their understanding of a particular health condition or method of treatment.

Orientation:
The training received during the General Health Psychology rotation is multimodal in that it draws from several theoretical disciplines. Emphasis is placed on challenging the fellow to learn and utilize empirically validated methods of treatment. The strongest component being cognitive-behavioral strategies which foster skills that promote lasting improvement in the patient’s health.
Supervision

One hour of supervision is provided weekly. Additional guidance is available if the need arises. The clinical supervision is designed to advance their knowledge, skills, and abilities in Primary Care Psychology as well as their ability to function autonomously as a provider yet collaboratively as a part of a team of health care professionals in promoting the health and well-being of our patients. Each case or service provided by the fellow will be reviewed, discussed, and documented as prescribed by Ohio Law and the Ethical Standards for Psychologists. Special emphasis is placed on cultivating professional development and providing experiences that fit with their individual career goals such as opportunities to develop experience in Couple’s Treatment, Pediatrics, Family Therapy, or special populations.

Time period: The rotation is typically 3 days per week for one year.

PATIENT CARE GOALS

1. Fellows will demonstrate competency in clinical diagnosis, treatment planning, and multimodal treatment approaches.
2. The fellow should perform follow-up care with established patients in a therapeutic, clinically effective manner.
   a. Fellows will apply knowledge of cognitive behavioral principles to optimize therapy outcomes.
   b. Fellows will develop a group treatment program for Family Health Center patients.
   c. Fellows will facilitate at least one Health Psychology support group or community talk per year.
3. The fellow should integrate psychological assessment data into clinical case formulations, when required or appropriate.

MEDICAL KNOWLEDGE GOALS

1. Fellows will demonstrate up-to-date knowledge of the empirical literature regarding Behavioral Medicine in the treatment of benign chronic illness.
2. Fellows will present a minimum of one grand rounds or in-service to psychology staff on a topic relevant to this area.
3. Fellows will develop and exquisite appreciation for the connection between the mind and body in treating patients with multi-faceted health issues i.e., having physical, cognitive, emotional, interpersonal consequences.

PRACTICE BASED LEARNING AND IMPROVEMENT GOALS

1. Fellows are encouraged to identify literature pertinent to their patient caseload and to apply up-to-date literature to their treatment plans for these patients.
2. Fellows are encouraged to participate in program development and/or facilitation of psychotherapy groups, as required.

INTERPERSONAL SKILLS AND COMMUNICATION

1. Fellows will provide clear, concise written and oral presentation of psychological impressions and recommendations to their supervisor, other health care providers, and their patients.
2. Fellows will participate in multidisciplinary clinical team meetings.
3. Fellows will verbally exchange with other health care providers regarding mutual patients when appropriate.
4. Relationships: The fellow should have the ability to develop and maintain appropriate, effective work relationships, including fellow's ability to function as a team player, display appropriate assertiveness, and treat multidisciplinary staff in a cordial, respectful manner.
5. The fellows will participate in multidisciplinary team meetings, didactics, supervision, and other rotation requirements.

6. The fellows will demonstrate cultural sensitivity and the capacity to identify and address ethical issues pertinent to the evaluation and treatment of Primary Care patients.

7. The fellows will utilize knowledge of lifespan development and cultural diversity issues with patients, as appropriate.

8. The fellow should communicate and collaborate effectively with other medical/treatment providers regarding mutual patients.

9. The fellow should demonstrate competency in communication and teaching skills with peers and patients.

PROFESSIONALISM GOALS

1. Responsibility: The fellow should display organization, efficiency, strong work ethic, and conscientiousness as demonstrated by fellow’s ability to carry out required tasks in a timely manner, follow through on tasks, and keep professional commitments.

2. Comportment: The fellow should display professionally appropriate demeanor and decorum as demonstrated by fellow’s emotional maturity, flexibility, positive attitude, and personal presentation (including attire) in the workplace.

3. Responsiveness to Supervisor Feedback: The fellow should have the ability to function effectively under supervision, including fellow’s openness to criticism, level of defensiveness, willingness to improve or change targeted behaviors, and knowledge of when to seek help balanced with appropriate levels of autonomy.

4. Ethics: The fellow’s professional behavior should be in accordance with APA ethical principles, state regulations and other codes of professional conduct as demonstrated by fellow’s level of personal integrity and ability to recognize and raise ethical issues, as appropriate.

5. Timeliness: The fellow should complete required number of new and established patient cases per day on rotation days.

6. The fellow should complete documentation and billing for all clinical encounters within required timeframe.

7. Fellows will attend regular supervision.

8. Fellows will complete documentation for all clinical encounters.

SYSTEMS BASED PRACTICE GOALS

1. Fellows will demonstrate knowledge of other disciplines and how to navigate between different providers.

2. The fellow should communicate and collaborate effectively with other medical/treatment providers re: mutual patients.

3. Fellows work when necessary to facilitate patient awareness of other resources in community that promote and maintain their health including support groups, exercise facilities, health talks, etc.

4. Fellows work to improve care overall at CCF and are actively involved in providing feedback to the CCF system when applicable.

Clinical Supervisor: Adam Borland, PsyD, Chivonna Childs, Ph.D., Kia-Rai M. Prewitt, Ph.D.,
CHRONIC PAIN MEDICINE

Description of Rotation
The Chronic Pain Major Rotation is a three days/week rotation working in a multidisciplinary comprehensive pain program. The focus of the rotation is evaluation and treatment of patients with chronic pain disorders from a biopsychosocial perspective. Fellows will gain an understanding of the etiologies, diagnosis, and treatment of pain disorders and the comorbid psychiatric complexities associated with chronic pain. The rotation will include training in cognitive behavioral therapy, dialectical behavioral therapy, mindfulness-based approaches and other psychological treatments for pain disorders. Psychological evaluation, individual, and group psychotherapy are the key activities along with communication with pain and spine physicians and other disciplines.

Educational Purpose
To educate fellows in application of the biopsychosocial model and clinical health psychology skills to a chronic pain population. This rotation will be based at Cleveland Clinic Center for Comprehensive Pain Recovery in the Neurological Institute. Fellows will be seeing patients in the outpatient setting. Their responsibilities will include chart review, interview and assessment of the patient, discussion with pain physicians, nurse practitioners, and other members of the multi-disciplinary team, as well as obtaining collateral information from pertinent sources (e.g. family, friends, outpatient providers, and pharmacies) when necessary. The purpose will be to provide behavioral pain interventions for patients with pain disorders, while functioning as a member of the collective healthcare team providing treatment to patients.

Assessment Summary
Electronic assessment via MedHub evaluations will be completed by the supervising Behavioral Medicine Staff. Staff may seek input from other staff physicians and nursing staff, pain medicine and health psychology fellows as well other allied healthcare providers. These will be completed at the end of the rotation. Residents will receive ongoing feedback throughout the rotation as well during supervision.

Expectations

Schedule:
1. Arrive by 8am each day unless otherwise notified and check in with the supervising staff.
2. Staffing will occur during the appointment time of new evaluations, while staffing of established patients may be before, during or after patients.
3. Please be aware that the day typically concludes by 5:00 pm, but there may be opportunity for an adjusted schedule depending on the supervising psychologist’s schedule.
4. Completion of notes that are forwarded to supervisor within 24 hours of patient having been seen for their appointment.

For all new consultations and follow-ups:
1. A complete psychiatric consultation or health and behavioral assessment is to be performed for each new evaluation, dependent upon chart review and presenting issues.
2. Consults must be documented via the PSYL PAIN REC NEW Templates in EPIC.

Patient Care Goals
1. Complete comprehensive Behavioral Medicine evaluations of chronic pain syndrome patients
   a. Fellows will manage an average of 1-2 templated new evaluations per day.
2. Apply knowledge of cognitive behavioral principles to treatment of chronic pain in both individual and group formats
   a. Fellows will manage a minimum of 1-2 templated established patients per day.
b. Fellows will observe, co-facilitate, and facilitate CBT-P (Cognitive Behavioral Therapy for pain) in a group format. This will include approximately 3-5 hours of group work daily while in this major rotation.

c. Fellows will participate in and/or develop a group treatment program for chronic pain patients
   i. Fellows will cofacilitate Aftercare Programming and Mindfulness groups at least 1x monthly.
   ii. Fellows are encouraged to develop a novel or innovative group treatment program (e.g. ACT for chronic pain)

3. The fellow should perform follow-up care with established patients in a therapeutic, clinically effective manner.

4. The fellow should integrate psychological assessment data into clinical case formulations, when required or appropriate.

5. The fellow will participate in the education and training of residents/pain medicine fellows rotating in Pain Medicine. This may involve having rotators observe new evaluations and follow up sessions, as well as engaging in educational discussions with these rotators regarding the practice and implementation of Pain Medicine

Medical Knowledge Goals
1. Demonstrate up-to-date knowledge of the empirical literature regarding chronic pain and associated psychosocial variables relevant to the psychological assessment and treatment of chronic pain and chronic pain syndromes.
2. Fellows will complete a minimum of one research project or literature review relevant to this area (topic must be approved by their supervisor, definition of research project may be flexible).
3. Fellows will complete assigned reading list and add at least 3 current articles during their rotation
4. Fellows will attend Journal Club and Case Conferences with Pain Medicine fellows when schedule allows
5. Demonstrate multidisciplinary knowledge
   a. Fellows will attend at least two Behavioral Health Grand Rounds conferences
   b. Fellows will facilitate at least one Center for Behavioral Health Grand Rounds conference presentation
6. Fellows are encouraged to present at least one grand round or in-service to psychology staff on a topic relevant to this area.
7. Fellows will be encouraged to attend Pain Medicine Conferences as appropriate

Practice Based Learning and Improvement Goals
1. Fellows are encouraged to identify literature pertinent to their patient caseload and to apply up to date literature to their treatment plans for these patients.
2. Fellows are encouraged to participate in program development and/or facilitation of psychotherapy groups, as required.
3. Fellows will be encouraged to engage in innovative development and/or practice (e.g., creation of program materials, web-based programs, sleep related relaxation CDs, etc).
6. Fellows will provide a minimum of 1 case presentation per year in Sleep Clinic or psychology case conferences.

Interpersonal Skills and Communication
1. Fellows will provide clear, concise written and oral presentation of psychological impressions and recommendations to their supervisor, the interdisciplinary team, other health care providers, and their patients
2. Fellows will verbally exchange with other health care providers regarding mutual patients when appropriate.
3. **Relationships**: The fellow should have the ability to develop and maintain appropriate, effective work relationships, including fellow’s ability to function as a team player, display appropriate assertiveness, and treat multidisciplinary staff in a cordial, respectful manner.

4. The fellows will participate in multidisciplinary team meetings, didactics, supervision, and other rotation requirements.

5. The fellows will demonstrate cultural sensitivity and the capacity to identify and address ethical issues pertinent to the evaluation and treatment of sleep patients.

6. The fellows will utilize knowledge of lifespan development and cultural diversity issues with patients, as appropriate.

7. The fellow should communicate and collaborate effectively with other medical/treatment providers re: mutual patients.

8. The fellow should demonstrate competency in communication and teaching skills with peers and patients.

### Professionalism Goals

1. **Responsibility**: The fellow should display organization, efficiency, strong work ethic, and conscientiousness as demonstrated by fellow’s ability to carry out required tasks in a timely manner, follow through on tasks, and keep professional commitments.

2. **Comportment**: The fellow should display professionally appropriate demeanor and decorum as demonstrated by fellow’s emotional maturity, flexibility, positive attitude, and personal presentation (including attire) in the workplace.

3. **Responsiveness to Supervisor Feedback**: The fellow should have the ability to function effectively under supervision, including fellow’s openness to criticism, level of defensiveness, willingness to improve or change targeted behaviors, and knowledge of when to seek help balanced with appropriate levels of autonomy.

4. **Ethics**: The fellow’s professional behavior should be in accordance with APA ethical principles, state regulations and other codes of professional conduct as demonstrated by fellow’s level of personal integrity and ability to recognize and raise ethical issues, as appropriate.

5. **Timeliness**: The fellow should complete required number of new and established patient cases per day on rotation days.

6. The fellow should complete documentation for all clinical encounters within required timeframe.

7. Fellows will attend regular supervision.

### Systems Based Learning Goals

1. Fellows will demonstrate knowledge of other disciplines and how to navigate between different providers
   a. Fellows will shadow a pain physician and/or spine specialist for at least one day during rotation
   b. Fellows will shadow a physical therapist and/or occupational therapist at least one day during rotation

2. The fellow should communicate and collaborate effectively with other medical/treatment providers re: mutual patients.

3. Fellows work when necessary to facilitate patient wellness in other areas of their health including:
   a. demonstrate knowledge of how to obtain transportation, social work consults, etc.
   b. demonstrate knowledge of how to appropriately consult
   c. work to improve care overall at CCF and are actively involved in providing feedback to the CCF system when applicable

### Supervisor

Sara Davin, PsyD, MPH, Sarah Rispinto, Ph.D.
CONVERSION DISORDER ROTATION

Description of Rotation
Training in the conversion disorder clinic provides opportunities to care for outpatients with Conversion Disorder – Psychogenic Nonepileptic Seizures (PNES) type, in close consultation with the team of epileptologists, psychiatrists, psychologists, APPs, and social workers. Primarily the rotation focuses on providing training and experience in the assessment and treatment of conversion disorder and related somatization disorders. The fellow will have exposure in the daily rounds in the EEG Monitoring unit (EMU) to learn the diagnostic process to rule out Epilepsy. The fellow will also be provided opportunity to assess newly diagnosed PNES patients while they are admitted in the EMU and learn effective ways of enhancing patient acceptance of their conversion disorder diagnosis. The fellow will carry a caseload of patients for individual psychotherapy and, based on availability, can co-lead the bimonthly PNES support group. As a health psychology rotation, the fellow will get experience in the formulation of the biopsychosocial factors. He/she will have training in the CBT-based Neurobehavioral Therapy (NBT) for PNES as well as other modalities that are found effective in helping the patients. There will be the option of conducting brief psychological testing such as the WASI-II, MMPI-2 and a brief symptom validity testing. Within the context of the inter-professional teams, the fellow will learn ways to improve communication between psychology and medical professionals. Also fellows can be involved in the management of the PNES data registry and conduct outcomes research. Supervision will be scheduled on a regular basis by a licensed psychologist.

Educational Purpose
To educate fellows in application of the biopsychosocial model and clinical health psychology skills to treat conversion disorder and somatization disorders. This year the longitudinal rotation will be based at Cleveland Clinic Epilepsy Center. Fellows will be seeing patients in inpatient (when possible) and outpatient settings. Their responsibilities will include chart review, interview and treatment planning, obtaining collateral information from pertinent sources (e.g. family, friends, other medical providers) when necessary. The purpose of the rotation is to train psychologists in this rare condition while learning various psychotherapeutic interventions that are common in the health psychology field.

Assessment Summary
Electronic assessment via MedHub evaluations will be completed by the supervising psychologist. Staff may seek input from other staff physicians, medical providers and the rest of the psychology staff. These will be completed at the end of the rotation. Fellows will receive ongoing feedback throughout the rotation as well e.g. during supervision.

Expectations
Schedule:
1. Arrive by 8am each day unless otherwise notified and check in with the supervising staff.
2. Staffing will occur during the appointment time of new evaluations, while staffing of established patients may be held before, during or after seeing patients.
3. Please be aware that the day typically concludes by 5 pm, but there may be days which extend beyond that time.
4. Completion of notes that are forwarded to supervisor within 24 hours of patient having been seen for their appointment

For all new consultations and follow-ups:
1. A complete psychiatric consultation or health and behavioral assessment is to be performed for each new evaluation, dependent upon chart review and presenting issues.
2. Consults must be documented in EPIC using a new consult template.
3. Fellows should also expect to call collateral from appropriate sources when necessary e.g. family, friends, POA’s, guardians, and other mental health providers.

**Patient Care Goals**
1. Complete comprehensive evaluations of conversion disorder patients
   a. Fellows will manage an average of one to two new evaluations per day
   b. Fellows will demonstrate the utility of psychological testing with at least one of their psychotherapy patients
2. Apply knowledge of Neurobehavioral Therapy (NBT) to treatment of conversion disorder and other somatic symptom disorders in both individual and group formats
   a. Fellows will manage a minimum of 2-3 established patients per day
   b. Fellows will observe and utilize NBT as well as participation in a consultation group
   c. Fellows can develop a new group therapy for patients as appropriate and facilitate with supervisor

**Practice Based Learning and Improvement Goals**
1. Fellows are encouraged to identify literature pertinent to their patient caseload and to apply up to date literature to their treatment plans for these patients.
2. Fellows are encouraged to participate in program development and/or facilitation of psychotherapy groups, as required.
3. Fellows will be encouraged to engage in innovative development and/or practice (e.g., creation of program materials, web-based programs, relaxation training CDs, etc).
6. Fellows will provide a minimum of 1 case presentation per year in a psychology case conference

**Interpersonal Skills and Communication**
1. Fellows will provide clear, concise written and oral presentation of psychological impressions and recommendations to their supervisor, the interdisciplinary team, other health care providers, and their patients
2. Fellows will verbally exchange with other health care providers regarding mutual patients when appropriate.
3. Relationships: The fellow should have the ability to develop and maintain appropriate, effective work relationships, including fellow’s ability to function as a team player, display appropriate assertiveness, and treat multidisciplinary staff in a cordial, respectful manner.
4. The fellows will participate in multidisciplinary team meetings, didactics, supervision, and other rotation requirements.
5. The fellows will demonstrate cultural sensitivity and the capacity to identify and address ethical issues pertinent to the evaluation and treatment of conversion disorder patients
6. The fellows will utilize knowledge of lifespan development and cultural diversity issues with patients, as appropriate.
7. The fellow should communicate and collaborate effectively with other medical/treatment providers re: mutual patients.
8. The fellow should demonstrate competency in communication and teaching skills with peers and patients.

**Professionalism Goals**
1. Responsibility: The fellow should display organization, efficiency, strong work ethic, and conscientiousness as demonstrated by fellow’s ability to carry out required tasks in a timely manner, follow through on tasks, and keep professional commitments.
2. Comportment: The fellow should display professionally appropriate demeanor and decorum as demonstrated by fellow’s emotional maturity, flexibility, positive attitude, and personal presentation (including attire) in the workplace.
3. Responsiveness to Supervisor Feedback: The fellow should have the ability to function effectively under supervision, including fellow’s openness to criticism, level of defensiveness, willingness to improve or change targeted behaviors, and knowledge of when to seek help balanced with appropriate levels of autonomy.

4. Ethics: The fellow’s professional behavior should be in accordance with APA ethical principles, state regulations and other codes of professional conduct as demonstrated by fellow’s level of personal integrity and ability to recognize and raise ethical issues, as appropriate.

5. Timeliness: The fellow should complete required number of new and established patient cases per day on rotation days.

6. The fellow should complete documentation for all clinical encounters within required timeframe.

7. Fellows will attend regular supervision.

Systems Based Learning Goals

1. Fellows will demonstrate knowledge of other disciplines and how to navigate between different providers
   a. Fellows will observe the epilepsy team to learn about epilepsy and antiepileptic drugs as this plays a crucial role in treating PNES and for differential diagnosis

2. The fellow should communicate and collaborate effectively with other medical/treatment providers re: mutual patients.

3. Fellows work when necessary to facilitate patient wellness in other areas of their health including:
   a. Demonstrate knowledge of how to obtain transportation, social work consults, etc.
   b. Demonstrate knowledge of how to appropriately consult
   c. Work to improve care overall at CCF and are actively involved in providing feedback to the CCF system when applicable

Supervisor: Bikat Tilahun, PhD
Minor Rotations Overview
1 day per week for 1 year or 2 Days per week for 6 months
Determined by site and supervisor availability
Gastrointestinal Minor Rotation

Description of Rotation
The DDSI Medical Home Minor Rotation is a 2 days/week rotation working in a multidisciplinary Digestive Disease and Surgery Center. The focus of the rotation is evaluation and treatment of patients with digestive disorders from a psychological perspective with emphasis on inflammatory bowel disease and disorders of gut-brain interaction. Fellows will gain an understanding of the etiologies, diagnosis, and treatment of digestive disease. The rotation will include training in cognitive behavioral therapy, acceptance and commitment therapy, gut directed hypnosis, motivational interviewing, and other psychological treatments for digestive disorders. Psychological evaluation, individual, and group psychotherapy are the key activities along with communication with GI physicians and other disciplines.

Educational Purpose
To educate fellows in application of the biopsychosocial model and clinical health psychology skills to a gastrointestinal disorder's population. This 6 months with an option for continuation rotation will be based at Cleveland Clinic Digestive Disease and Surgery Institute. Fellows will be seeing patients in the outpatient setting by the modalities of in-person visit or telepsychology. Their responsibilities will include chart review, interview and assessment of the patient, discussion with GI physicians, nurse practitioners, and other members of the multi-disciplinary team, as well as obtaining collateral information from pertinent sources (e.g. family, friends, outpatient providers, and pharmacies) when necessary. The purpose will be to provide behavioral GI interventions for patients with digestive disorders, while functioning as a member of the collective healthcare team providing treatment to patients.

Assessment Summary
Electronic assessment via MedHub evaluations will be completed by the supervising DDSI Medical Home Staff. Staff may seek input from other staff physicians and nursing staff, as well other allied healthcare providers. These will be completed at the end of the rotation. Residents will receive ongoing feedback throughout the rotation as well during supervision.

Expectations

Schedule:
1. Arrive by 8am each day unless otherwise notified and check in with the supervising staff.
2. Staffing will occur during the appointment time of new evaluations, while staffing of established patients may be help before, during or after patients.
3. Please be aware that the day typically concludes by 5 PM, but there may be days which extend beyond that time.
4. Completion of notes that are forwarded to supervisor within 24 hours of patient having been seen for their appointment.

For all new consultations and follow-ups:
1. A complete psychiatric consultation or health and behavioral assessment is to be performed for each new evaluation, dependent upon chart review and presenting issues.
2. Consults must be documented via the IBD Medical Home Templates in EPIC.
3. Fellows should also expect to call collateral from appropriate sources, when necessary, family, friends, POA’s, guardians, other mental health providers, or pharmacies.

Patient Care Goals
1. Complete comprehensive Psychogastroenterological evaluations of digestive disorder patients
   a. Fellows will manage an average of 2-3 templated new evaluations per day.
   b. Fellows will demonstrate the utility of psychological testing with at least one GI patient.
2. Apply knowledge of cognitive behavioral principles to treatment of digestive disorders in both individual and group formats
   a. Fellows will manage a minimum of 2-3 templated established patients per day.
   b. Fellows will observe, when available, CBT, ACT, and Yoga group treatment modalities
   c. Fellows will participate in and/or develop a group treatment program for GI patients.
      i. Fellows will cofacilitate a group treatment at least once during rotation and facilitate the group on their own at least once during the rotation.
      ii. Fellows are encouraged to develop a novel or innovative group treatment program for a specific GI disorder population (e.g., CBT for sleep problems secondary to bowel disease, CBT group for specific complications)

3. The fellow should perform follow-up care with established patients in a therapeutic, clinically effective manner.

4. The fellow should integrate psychological assessment data into clinical case formulations, when required or appropriate.

5. The fellow will participate in the education and training of residents/IBD/GI medicine fellows rotating in GI Medicine. This may involve having rotators observe new evaluations and follow up sessions, as well as engaging in educational discussions with these rotators regarding the practice and implementation of GI Medicine

Medical Knowledge Goals
1. Demonstrate up-to-date awareness of the empirical literature regarding gastrointestinal disorders and associated psychosocial variables relevant to the psychological assessment and treatment of GI disorders and disorders of gut-brain interaction
2. Fellows will complete a weekly journal article reading on a topic related to the treatment of GI patients for discussion with supervisor.
3. Fellows will attend Journal Club and Case Conferences with GI Medicine fellows when schedule allows
5. Demonstrate multidisciplinary knowledge
   a. Fellows will attend at least one IBD live conference and one MDT conference
6. Fellows are encouraged to present at least of one grand rounds on a topic relevant to this area. (this is not a requirement but is encouraged!)

Practice Based Learning and Improvement Goals
1. Fellows are encouraged to identify literature pertinent to their patient caseload and to apply up to date literature to their treatment plans for these patients.
2. Fellows are encouraged to participate in program development and/or facilitation of psychotherapy groups, as required.
3. Fellows will be encouraged to engage in innovative development and/or practice (e.g., creation of program materials, web-based programs, etc).

Interpersonal Skills and Communication
1. Fellows will provide clear, concise written and oral presentation of psychological impressions and recommendations to their supervisor, the interdisciplinary team, other health care providers, and their patients
2. Fellows will verbally exchange with other health care providers regarding mutual patients when appropriate.
3. Relationships: The fellow should have the ability to develop and maintain appropriate, effective work relationships, including fellow’s ability to function as a team player, display appropriate assertiveness, and treat multidisciplinary staff in a cordial, respectful manner.
4. The fellows will participate in multidisciplinary team meetings, didactics, supervision, and other rotation requirements.
5. The fellows will demonstrate cultural sensitivity and the capacity to identify and address ethical issues pertinent to the evaluation and treatment of GI patients.
6. The fellows will utilize knowledge of lifespan development and cultural diversity issues with patients, as appropriate.
7. The fellow should communicate and collaborate effectively with other medical/treatment providers re: mutual patients.
8. The fellow should demonstrate competency in communication and teaching skills with peers and patients.

**Professionalism Goals**
1. Responsibility: The fellow should display organization, efficiency, and conscientiousness as demonstrated by fellow’s ability to carry out required tasks in a timely manner, follow through on tasks, and keep professional commitments.
2. Comportment: The fellow should display professionally appropriate demeanor and decorum as demonstrated by fellow’s emotional maturity, flexibility, positive attitude, and personal presentation (including attire) in the workplace.
3. Responsiveness to Supervisor Feedback: The fellow should have the ability to function effectively under supervision, including fellow’s openness to criticism, level of defensiveness, willingness to improve or change targeted behaviors, and knowledge of when to seek help balanced with appropriate levels of autonomy.
4. Ethics: The fellow’s professional behavior should be in accordance with APA ethical principles, state regulations and other codes of professional conduct as demonstrated by fellow’s level of personal integrity and ability to recognize and raise ethical issues, as appropriate.
5. Timeliness: The fellow should complete required number of new and established patient cases per day on rotation days.
6. The fellow should complete documentation for all clinical encounters within required timeframe.
7. Fellows will attend regular supervision.

**Systems Based Learning Goals**
1. Fellows will demonstrate knowledge of other disciplines and how to navigate between different providers
   a. Fellows will shadow a GI physician for at least one-half day during rotation
   b. Fellows will shadow a GI dietician for at least one-half day during rotation
2. The fellow should communicate and collaborate effectively with other medical/treatment providers re: mutual patients.
3. Fellows work when necessary to facilitate patient wellness in other areas of their health including:
   a. demonstrate knowledge of how to obtain transportation, social work consults, etc.
   b. demonstrate knowledge of how to appropriately consult
   c. work to improve care overall at CCF and are actively involved in providing feedback to the CCF system when applicable

**Clinical Supervisors:** Stephen E. Lupe, Psy.D.
Neurological Restoration Rotation (Movement Disorders)

Description of Rotation
The Neurological Restoration Rotation is a 2 days/week rotation working in a multidisciplinary neurology center with a focus on patients with movement disorders. The focus of the rotation is evaluation and treatment of patients with various types of movement disorders, including Parkinson’s disease, Huntington’s disease, essential tremor, dystonia, and functional movement disorders. Fellows will become familiar with the medical treatment and psychological co-morbidities of these various conditions. The rotation will include training in cognitive behavioral therapy, acceptance and commitment therapy, mindfulness-based approaches and other psychological treatments for chronic neurological disorders. Fellows will engage in diagnostic psychological evaluations, pre-surgical candidacy evaluations for deep brain stimulation, individual treatment, and interdisciplinary clinics aimed toward treating these patients with chronic neurologic disease.

Educational Purpose
To educate fellows in how to evaluate and effectively apply psychological interventions for movement disorder populations. This six-month rotation will be based at Cleveland Clinic Center for Neurological Restoration housed in the main campus of the hospital. Fellows will be seeing patients in the outpatient setting. Their responsibilities will include chart review, interview and assessment of the patient, collaboration with various team members, including physicians, advanced practice providers, researchers, and nursing staff.

Assessment Summary
Electronic assessment via MedHub evaluations will be completed by the supervising psychologist in the Center for Neurological Restoration. Staff may seek input from other staff physicians and nursing staff, health psychology fellows as well other allied healthcare providers. These will be completed at the end of the rotation. Residents will receive ongoing feedback throughout the rotation as well during supervision.

Expectations
Schedule:
1. Arrive by 8am each day unless otherwise notified and check in with the supervising staff.
2. Staffing will occur during the appointment time of new evaluations, while staffing of established patients may be before, during or after patients.
3. Please be aware that the day typically concludes by 5:00 pm, but there may be days which extend beyond that time, as needed.
4. Completion of notes that are forwarded to supervisor within 48 hours of patient having been seen for their appointment

For all new consultations and follow-ups:
1. A complete psychological diagnostic evaluation or health and behavioral assessment is to be performed for each new evaluation, dependent upon chart review and presenting issues
2. Consults must be documented via the provided templates in EPIC.

Patient Care Goals
1. Complete comprehensive psychosocial evaluation of movement disorder patients in several interdisciplinary clinics, including pre-surgical evaluation of deep brain stimulation candidates, pre-genetic testing evaluations for those who are asymptomatic for Huntington’s disease, and psychosocial assessments of those with functional disorders. Fellows will formulate a treatment plan or set of impressions, depending on the nature of the evaluation.
   a. Fellows will manage an average of 1-3 templated new evaluations per day.
2. Apply knowledge of cognitive behavioral principles to treatment of mood or anxiety disorders that may be occurring concurrent with a movement disorder
   a. Fellows will manage a minimum of 2-3 templated established patients per day.
3. The fellow should perform follow-up care with established patients in a comprehensive manner that addresses the presenting problems.

Medical Knowledge Goals
1. Demonstrate up-to-date knowledge of the empirical literature on the presence of neuropsychiatric, mood, and anxiety disorders prevalent in those with movement disorders.
2. Attend lunch and learns, journal clubs, and didactics within the Center for Neurological Restoration as applicable to further medical knowledge base regarding medical evaluation and treatment of movement disorders.

Practice Based Learning and Improvement Goals
1. Fellows are encouraged to identify literature pertinent to their patient caseload and to apply up to date literature to their treatment plans for these patients.
2. Fellows are encouraged to participate in program and material development, as applicable.

Interpersonal Skills and Communication
1. Fellows will provide clear, concise written and oral presentation of psychological impressions and recommendations to their supervisor, the interdisciplinary team, other health care providers, and their patients
2. Fellows will verbally exchange with other health care providers regarding mutual patients when appropriate.
3. Relationships: The fellow should have the ability to develop and maintain appropriate, effective work relationships, including fellow’s ability to function as a team player, display appropriate assertiveness, and treat multidisciplinary staff in a cordial, respectful manner.
4. The fellows will participate in multidisciplinary team meetings, didactics, supervision, and other rotation requirements.
5. The fellows will demonstrate cultural sensitivity and the capacity to identify and address ethical issues pertinent to the evaluation and treatment of sleep patients
6. The fellows will utilize knowledge of lifespan development and cultural diversity issues with patients, as appropriate.
7. The fellow should communicate and collaborate effectively with other medical/treatment providers re: mutual patients.
8. The fellow should demonstrate competency in communication and teaching skills with peers and patients.

Professionalism Goals
1. Responsibility: The fellow should display organization, efficiency, strong work ethic, and conscientiousness as demonstrated by fellow’s ability to carry out required tasks in a timely manner, follow through on tasks, and keep professional commitments.
2. Comportment: The fellow should display professionally appropriate demeanor and decorum as demonstrated by fellow’s emotional maturity, flexibility, positive attitude, and personal presentation (including attire) in the workplace.
3. Responsiveness to Supervisor Feedback: The fellow should have the ability to function effectively under supervision, including fellow’s openness to criticism, level of defensiveness, willingness to improve or change targeted behaviors, and knowledge of when to seek help balanced with appropriate levels of autonomy.
4. Ethics: The fellow’s professional behavior should be in accordance with APA ethical principles, state regulations and other codes of professional conduct as demonstrated by fellow’s level of personal integrity and ability to recognize and raise ethical issues, as appropriate.
5. Timeliness: The fellow should complete required number of new and established patient cases per day on rotation days.
6. The fellow should complete documentation for all clinical encounters within required timeframe.
7. Fellows will attend regular supervision.

**Systems Based Learning Goals**
1. Fellows will demonstrate knowledge of other disciplines and how to navigate between different providers
   a. Fellows will shadow a neurology physician for at least 10 hours during the 6-month rotation
   b. Fellows will shadow an advanced practice provider conducting deep brain stimulation programming and adjustments.
2. The fellow should communicate and collaborate effectively with other medical/treatment providers re: mutual patients.

**Clinical Supervisor:** Taylor Rush, PhD
Psycho-Oncology and Breast Psychology

Description of Rotation
The Psycho-Oncology/Breast Psychology Rotation is a 2 days/week minor rotation working in a multidisciplinary cancer and/or breast center. The focus of the rotation is evaluation and treatment of patients with cancer and hereditary risk for cancer from a psychological perspective. Fellows will gain an understanding of the etiologies, diagnosis, and treatment of cancer and/or breast cancer/hereditary risk for breast cancer. The rotation will include training in psychodiagnostic assessment of the cancer patient, cognitive behavioral therapy, acceptance and commitment therapy, motivational interviewing, and other psychological treatments including potentially group therapy. Psychological evaluation, individual, and group psychotherapy are the key activities along with communication with oncologists, surgeons, and other disciplines. The fellow will receive at least one hour of individual supervision per week and have multiple training opportunities including shadowing multidisciplinary team members, tumor board discussions, and potential research involvement. The fellowship rotation goal is to prepare fellows for scientist-practitioner roles as a clinical health psychologist in an academic medical institution, foster professional development, and provide a strong foundation for psychological work in an oncology setting.

Educational Purpose
To educate fellows in application of the biopsychosocial model and clinical health psychology skills to an oncology/breast oncology population. This 6 months with an option for continuation rotation will be based at Cleveland Clinic Taussig Center and/or Breast Center. Fellows will be seeing patients in the outpatient setting by the modalities of in-person visit or telepsychology. Their responsibilities will include chart review, interview and assessment of the patient, discussion with the multi-disciplinary team, as well as obtaining collateral information from pertinent sources (e.g. family, friends, outpatient providers, etc) when necessary. The purpose will be to provide behavioral interventions for patients with cancer and hereditary risk for cancer, while functioning as a member of the collective healthcare team providing treatment to patients.

Assessment Summary
Electronic assessment via MedHub evaluations will be completed by the supervising staff. Staff may seek input from other staff physicians and nursing staff, as well other allied healthcare providers. These will be completed at the end of the rotation. Residents will receive ongoing feedback throughout the rotation as well e.g. during supervision.

Expectations

Schedule:
1. Arrive by 8am each day unless otherwise notified and check in with the supervising staff.
2. All supervisees will have one hour scheduled individual supervision per supervisor.
3. Staffing will occur during the appointment time of new evaluations, while staffing of established patients will be as needed. Curbside supervision/consultation is encouraged.
4. Please be aware that the day typically concludes by 4:30 pm
5. Completion of notes that are forwarded to supervisor within 24 hours of patient having been seen for their appointment

For all new consultations and follow-ups:
1. A complete psychiatric consultation or health and behavioral assessment is to be performed for each new evaluation, dependent upon chart review and presenting issues
2. Consults must be documented in the EMR.
3. Fellows should also expect to call collateral from appropriate sources when necessary e.g. family, friends, POA’s, guardians, other mental health providers, or pharmacies.
Patient Care Goals
1. Complete comprehensive psychodiagnostic evaluation
   a. Fellows will manage an average of 1-2 templated new evaluations per day.
2. Apply knowledge of cognitive behavioral principles to treatment of digestive disorders in both individual and group formats
   a. Fellows will manage a minimum of 2-3 templated established patients per day.
   b. Fellows will observe, when available, CBT, ACT, and group treatment modalities
   c. Fellows will be encouraged to participate in and/or develop a group treatment program as available
3. The fellow should perform follow-up care with established patients in a therapeutic, clinically effective manner.
4. The fellow should integrate psychological assessment data into clinical case formulations, when required or appropriate.
5. Fellows will incorporate outcome data into evaluation and follow up treatment.
6. The fellow may participate in the education and training of residents or surgical/oncology fellows rotating in the Breast Center or Taussig Cancer Center. This may involve having rotators observe new evaluations and follow up sessions, as well as engaging in educational discussions with these rotators regarding the practice and implementation of psychological integration in the team.

Medical Knowledge Goals
1. Demonstrate up-to-date awareness of the empirical literature regarding oncology and/or breast oncology and associated psychosocial variables relevant to the psychological assessment and treatment of cancer.
2. Fellows are encouraged to incorporate literature into at least one case.
3. Fellows will attend tumor board at least once during fellowship.
5. Demonstrate multidisciplinary knowledge
   a. Fellows will engage in shadowing such as oncology, surgery, genetics clinic and/or observe surgery.
6. Fellows are encouraged to present at least one grand rounds on a topic relevant to this area. (this is not a requirement but is encouraged)

Practice Based Learning and Improvement Goals
1. Fellows are encouraged to identify literature pertinent to their patient caseload and to apply up to date literature to their treatment plans for these patients.
2. Fellows are encouraged to participate in program development and/or facilitation of psychotherapy groups, as required.
3. Fellows will be encouraged to engage in innovative development and/or practice (e.g., creation of program materials, web-based programs, etc.).

Interpersonal Skills and Communication
1. Fellows will provide clear, concise written and oral presentation of psychological impressions and recommendations to their supervisor, the interdisciplinary team, other health care providers, and their patients
2. Fellows will verbally exchange with other health care providers regarding mutual patients when appropriate.
3. Relationships: The fellow should have the ability to develop and maintain appropriate, effective work relationships, including fellow’s ability to function as a team player, display appropriate assertiveness, and treat multidisciplinary staff in a cordial, respectful manner.
4. The fellows will participate in multidisciplinary team meetings, didactics, supervision, and other rotation requirements.
5. The fellows will demonstrate cultural sensitivity and the capacity to identify and address ethical issues pertinent to the evaluation and treatment of oncology patients.
6. The fellows will utilize knowledge of lifespan development and cultural diversity issues with patients, as appropriate.
7. The fellow should communicate and collaborate effectively with other medical/treatment providers re: mutual patients.
8. The fellow should demonstrate competency in communication and teaching skills with peers and patients.

**Professionalism Goals**

1. **Responsibility:** The fellow should display organization, efficiency, and conscientiousness as demonstrated by fellow’s ability to carry out required tasks in a timely manner, follow through on tasks, and keep professional commitments.
2. **Comportment:** The fellow should display professionally appropriate demeanor and decorum as demonstrated by fellow’s emotional maturity, flexibility, positive attitude, and personal presentation (including attire) in the workplace.
3. **Responsiveness to Supervisor Feedback:** The fellow should have the ability to function effectively under supervision, including fellow’s openness to criticism, level of defensiveness, willingness to improve or change targeted behaviors, and knowledge of when to seek help balanced with appropriate levels of autonomy.
4. **Ethics:** The fellow’s professional behavior should be in accordance with APA ethical principles, state regulations and other codes of professional conduct as demonstrated by fellow’s level of personal integrity and ability to recognize and raise ethical issues, as appropriate.
5. **Timeliness:** The fellow should complete required number of new and established patient cases per day on rotation days.
6. The fellow should complete documentation for all clinical encounters within required timeframe.
7. Fellows will attend regular supervision.

**Systems Based Learning Goals**

1. Fellows will demonstrate knowledge of other disciplines and how to navigate between different providers
   a. Fellows will shadow an oncologist for at least one-half day during rotation
   b. Fellows will shadow another discipline such as surgeon, genetic counselor, social worker, etc. for at least one-half day during rotation
2. The fellow should communicate and collaborate effectively with other medical/treatment providers re: mutual patients.
3. Fellows work when necessary to facilitate patient wellness in other areas of their health including:
   a. demonstrate knowledge of how to obtain transportation, social work consults, etc.
   b. demonstrate knowledge of how to appropriately consult
   c. work to improve care overall at CCF and are actively involved in providing feedback to the CCF system when applicable

**PTO/Absences**

Notify supervisor as soon as possible of any anticipated absences.
Any vacation requests must follow the requirements set forth by the health psychology fellowship training director
Please notify supervising staff of any anticipated absences at least 30 days prior to the date of absence.
Should you have any questions, you are to contact the program coordinator for further information regarding absences.
Helpful Reading


## Sample Rotation Schedule of Mellen Center for Multiple Sclerosis Fellow
### Fall/Summer

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<td>MS Teaching YR 2 (12 pm - 3 pm bi-weekly); Mellen/MS Major</td>
<td>Optional: CBTi Group (Drerup), Fridays, 3:00 PM-4:30 PM</td>
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