

Postdoctoral Psychology Fellowship Manual

Clinical Health Psychology

2022-2023

POSTDOCTORAL PSYCHOLOGY FELLOWSHIP MANUAL

This manual is intended to clarify aspects of the Clinical Health Psychology postdoctoral psychology fellowship with regard to procedures and obligations. It is not intended to supplant or augment the fellow contract with the individual medical center. In addition to this manual, each medical center will provide specific information related to that institution.

September 1, 2022

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SECTION I – OVERVIEW OF PROGRAM

1.1. What is MI CAPT?

The Michigan Center for Advanced Psychology Training (MICAPT) at McLaren Health Care Corporation provides advanced training in postdoctoral clinical health psychology that interfaces with medicine, using guidelines recommended by experts in the field, accreditation standards set by the American Psychological Association (APA), the needs of supporting institutions, and the needs and interests of trainees. MICAPT provides this training in an atmosphere of cultural diversity, cultural awareness, and equal opportunity. The MICAPT postdoctoral fellowship programs operate on a practitioner-educator model that is designed to teach collaborative care within healthcare settings.

1.2. The Center

MICAPT is sponsored by McLaren Flint. McLaren Flint is a medical center located in Flint, MI and is an academic teaching site within McLaren Health Care Corporation and affiliated with Michigan State University.

1.3. Clinical Health Psychology Postdoctoral Fellowship Programs

MICAPT's Clinical Health Psychology fellowship program provides a twenty-four-month advanced training experience for doctoral-level psychologists. The comprehensive training program prepares graduates for independent practice as Clinical Health Psychologists. Graduating fellows will be capable of assuming roles in medical education and clinical activity in a variety of settings, making meaningful scholarly contributions within healthcare settings, and being active in relevant professional organizations. The fellowship is graduated in intensity, with second-year fellows having increasing responsibility relative to first-year fellows. Program descriptions and sample schedules for fellows are available on the website.

1.4. Accreditation

The Clinical Health Psychology (CHP) program at MICAPT was the first Clinical Health Psychology program to receive accreditation by the American Psychological Association (APA). At that time, MICAPT was known as CAPT, Consortium for Advanced Psychology Training. MICAPT's program maintains full accreditation by the APA Commission on Accreditation. The contact information for the Commission on Accreditation is:

Office of Program Consultation and Accreditation 750 First Street, NE Washington, DC 20002-4242 Phone: 202-336-5979 TDD/TTY: 202-336-6123 Fax: 202-336-5978 <u>http://www.apa.org/ed/accreditation/about/coa/index.aspx</u> Email: <u>apaaccred@apa.org</u> (general questions) aro@apa.org (Annual Report Online only)

1.5. Educational Aims & Objectives

The MICAPT Clinical Health Psychology (CHP) postdoctoral fellowship has four major aims. Upon graduation, fellows who have completed the two-year Clinical Health Psychology fellowship will demonstrate the following:

- 1. Advanced practice competency in Clinical Health Psychology.
- 2. Advanced knowledge of medical education, focused on training of physicians, medical students and psychologists.

- 3. Expertise in hospital and ambulatory practice involving a transdisciplinary model within a team process approach.
- 4. The ability to critically review research, adopting a commitment to lifelong learning while making scholarly contributions to the field.

In line with the program aims, the fellowship trains psychologists to achieve advanced competency in Clinical Health Psychology. MICAPT has adopted the current draft of the Clinical Health Psychology specialty-specific skills/competencies (i.e., SoA Level 3 competencies) for postdoctoral training programs. These competencies include:

- Integration of science and practice
- Ethical and legal standards
- Individual and cultural diversity
- Research and/or program evaluation
- Professional values and attitudes
- Management/Administration and leadership
- Assessment
- Intervention
- Teaching and supervision
- Consultation and interprofessional/interdisciplinary skills

Development of Medical education/ Teaching expertise involves the following:

- Direct hospital training of medical students written their 3rd year psychiatry clerkship
- Direct supervision of doctoral levels of psychology students involved in practicum experience
- Didactic teaching of medical students, as well as practicum students and Family Medicine resident physicians
- Shadowing and precepting of Family Medicine resident physicians
- Participation in a special 'McLaren MSU Medical Education Fellowship Program' (8-month program), which provides content learning, coaching and development of a capstone program

The MICAPT CHP Core Curriculum contains details regarding these aims, competencies, and the associated objectives along with the methods, sequence, frequency, and outcome measurements. Fellows must read and familiarize themselves with the curriculum (See Appendix A of this manual for MICAPT CHP Core Curriculum) as well as the individual descriptions of this training, which can be found in Section IV of this manual.

1.6. MICAPT Contacts McLaren Flint Academic Program Administrator I, Victoria (Tori) Gervais. She is located at 401 S. Ballenger Hwy., Flint, MI 48532. Her phone number is (810) 342-3062, and her email is <u>victoria.gervais@mclaren.org</u>.

1.6.a. Board of Directors

- Barbara Wolf, PhD, MICAPT Fellowship Training Director, Corporate Director, Behavioral Health Education and Physician Well-Being, McLaren Health Care, Associate Professor, Family Medicine and Psychiatry Departments, Michigan State University Colleges of Human and Osteopathic Medicine, 3230 Beecher Rd, Suite 1, Flint MI 48532. Phone: 810-342-5656 | Fax: 810-342-5629 | Email: <u>barbara.wolf@mclaren.org</u>
- Erin O'Connor, PhD, CHP/McLaren Flint MICAPT Program Director/Director of Behavioral Medicine Education for Family Medicine, McLaren Flint/Assistant Professor, Michigan State University College of Human Medicine. McLaren Family Medicine Residency Center, 3230

Beecher Rd, Suite 1, Flint MI 48532 | Phone: 810-342-5656 | Fax: 810-342-5629 | Email: erin.oconnor@mclaren.org

- Jennifer Carty McIntosh, PhD, CHP/McLaren Macomb MICAPT, Behavioral Health Academic Program Director McLaren Macomb Family Medicine and Internal Medicine/Assistant Professor Michigan State University College of Human Medicine. McLaren Family Medicine Residency Center, 36500 S. Gratiot Ave., Clinton Twp., MI 48035 | Phone: 586-493-3744 | Fax: 586-493-3720. Email: jennifer.cartymcintosh@mclaren.org
- Yen Ju Lee, PhD, Associate Program Director of Behavioral Medicine Education for Family Medicine, McLaren Flint/Clinical Assistant Professor, Michigan State University College of Human Medicine Family Medicine. McLaren Family Medicine Residency Center, 3230 Beecher Rd, Suite 1, Flint MI 48532 | Phone: 810-342-5656 | Fax: 810-342-5629 | Email: yenju.lee@mclaren.org
- Andrew Champine, PsyD, Associate DIO, Director of Medical Education, McLaren Macomb 1000 Harrington Blvd. mount Clemens, MI 48043 | Phone: | Email: <u>andrew.champine@mclaren.org</u>
- Nicole Franklin, PsyD, Assistant Medical Director, McLaren Bariatric Institute/Adjunct Assistant Professor, Michigan State University College of Human Medicine, McLaren Bariatric Institute, 3200 Beecher Rd, Suite MBI, Flint MI 48532. Phone: 810-342-5470 | Fax: 810-342-5788 | Email: <u>nicole.franklin@mclaren.org</u>
- Robert Flora, MD, MBA, MPH, Chief Academic Officer/ VP of Academic Affairs, McLaren Health Care, Professor and Associate Chair for Education, Department of Obstetrics, Gynecology, and Reproductive Medicine, Michigan State University College of Human Medicine | Michigan State University College of Human Medicine, Clinical Professor of Osteopathic Surgical Specialties, Michigan State University College of Osteopathic | McLaren Corporate, One McLaren Parkway, Grand Blanc, MI 48439 | Phone: 810-342-1147 | Email: Robert.Flora@mclaren.org
- Kimberly Keaton-Williams, MBA, Vice President of Talent Acquisition and Development and Chief Diversity Officer at McLaren Health Care. One McLaren Parkway, Grand Blanc, MI 48439 | Phone: 810-342-4634 | Fax: 810-342-5401
- Prabhat Pokhrel, MD, PhD, Program Director of Family Medicine, McLaren Family Medicine Residency Center, 3230 Beecher Rd, Suite 1, Flint MI 48532 | Phone: 810-342-5656 | Fax: 810-342-5638 | Email: Prabhat.pokhrel@mclaren.org
- Erin Reis, EdD, MBA, FACHE, C-TAGME, Associate DIO | Director of Medical Education at McLaren Flint, 701 S. Ballenger Hwy., Flint, MI 48532 | McLaren Bay Region | Phone: 810-342-2416 | Fax: 810-342-4981 | Email: Erin.Reis@mclaren.org

1.6.b. MICAPT Core Faculty (Primary and Secondary Supervisors)

1.6.b.1

- Barbara Wolf, PhD, Corporate Director, Behavioral Health Education and Physician Wellness, McLaren Health Care, Associate Professor, Family Medicine and Psychiatry Departments, Michigan State University Colleges of Human and Osteopathic Medicine, 3230 Beecher Rd, Suite 1, Flint MI 48532. Phone: 810-342-5620 | Fax: 810-342-5629 | Pager: 810-389-0910 | Email: <u>barbara.wolf@mclaren.org</u>
- Nicole Franklin, PsyD, Psychologist, Medical Director, McLaren Bariatric Institute/Adjunct Assistant Professor, Michigan State University College of Human Medicine, McLaren Bariatric Institute, 3200 Beecher Rd, Suite MBI, Flint MI 48532. Phone: 810-342-5470 | Fax: 810-342-5788 | Email: <u>nicole.franklin@mclaren.org</u>
- Erin O'Connor, PhD, McLaren Flint CAPT Program Director/Director of Behavioral Medicine Education for Family Medicine, McLaren Flint/Assistant Professor, Michigan

State University College of Human Medicine, McLaren Family Medicine Residency Center, 3230 Beecher Rd, Suite 1, Flint MI 48532 | Phone: 810-342-5620 | Fax: 810-342-5629 | Email: <u>erin.oconnor@mclaren.org</u>

- Yen Ju Lee, PhD, Associate Program Director of Behavioral Medicine Education for Family Medicine, McLaren Flint/Clinical Assistant Professor, Michigan State University College of Human Medicine Family Medicine. McLaren Family Medicine Residency Center, 3230 Beecher Rd, Suite 1, Flint MI 48532 | Phone: 810-342-5656 | Fax: 810-342-5629 | Email: yenju.lee@mclaren.org
- Andrew Champine, PsyD, Chief Psychologist at MICAPT CHP Fellowship-Internal Medicine McLaren Flint/Michigan State University College of Human Medicine. McLaren Family Medicine Residency Center, 3230 Beecher Rd, Suite 1, Flint MI 48532
 Phone: 810-342-5620 | Fax: 810-342-5629 | Email: <u>andrew.champine@mclaren.org</u>
- Jennifer Carty McIntosh, PhD, CHP/McLaren Macomb MICAPT, Behavioral Health Academic Program Director McLaren Macomb Family Medicine and Internal Medicine/Assistant Professor Michigan State University College of Human Medicine. McLaren Family Medicine Residency Center, 36500 S. Gratiot Ave., Clinton Twp., MI 48035 | Phone: 586-493-3744 | Fax: 586-493-3720. Email: jennifer.cartymcintosh@mclaren.org

• 1.6.c. Adjunct Faculty

1.6.c.1. Ascension -Genesys Regional Medical Center Adjunct Faculty

- Heather Kirkpatrick, PhD, ABPP, Director of Behavioral Science for Internal Medicine, Ascension-Genesys Regional Medical Center/Adjunct Assistant Professor, Michigan State University College of Human Medicine. Ascension-Genesys Family Health Center – West Flint Campus, 4225 Beecher Rd, Flint MI 48532 | Phone: 810-762-4727 | Fax: 810-762-4526 | Pager: 810-972-2622 | Email: <u>heather.kirkpatrick@ascension.org</u>
- Scott Nyman, PhD, ABPP, Associate Director of Behavioral Science for Family Medicine, Ascension-Genesys Regional Medical Center/Assistant Professor, Michigan State University College of Human Medicine. Ascension-Genesys Family Health Center–East Flint Campus, 1460 N Center Rd, Burton MI 48509 | Phone: 810-715-4322 | Fax: 810-715-4371 | Pager: 810-972-1507 | Email: <u>Scott.Nyman@ascension.org</u>
- Rebecca Sewell, PsyD, Psychology Faculty. Psychology Medical Education. Ascension-Genesys Hospital, 1 Genesys Pkwy, Grand Blanc MI 48439 | Phone: 810-6060-7725 | Email: Rebecca.sewell1@ascension.org

1.6.c.2. Hurley Medical Center Adjunct Faculty

- Kirk Stucky, PsyD, ABPP, Director of Rehabilitation Psychology and Neuropsychology, Hurley Medical Center/Assistant Professor, Michigan State University College of Human Medicine. Hurley Medical Center – Advanced Neuropsychology and Pediatric Psychology - 111 E. Court Street, Flint, MI 48503. Phone: 810-262-2320 | Fax: 810-239-1281 | Pager: 810-444-8231 | Email: <u>kstucky2@hurleymc.com</u>
- Crystal Cederna-Meko, PsyD, Hurley Flint CAPT Program Director/Director, Pediatric Behavioral Health Services, Hurley Children's Hospital/Assistant Professor, Michigan State University College of Human Medicine. Hurley Medical Center – 3W Pediatrics, One Hurley Plaza, Flint MI 48503. Phone: 810-262-4834 | Fax: 810-762-6014 | Email: <u>ccedern1@hurleymc.com</u>
- Rebecca Ellens, PsyD, Pediatric Psychologist Primary Supervisor, Pediatric Psychology Postdoctoral Fellows, Co-Director of Pediatric Education Research, Hurley Medical Center/Adjunct Assistant Professor, Michigan State University College of Human Medicine, Pediatric Psychologist; Co-Director, Pediatric Education Research, Hurley

Medical Center – 3W Pediatrics, One Hurley Plaza, Flint MI 48503. Phone: 810-262.2320 | Email: <u>rellens1@hurleymc.com</u>

1.6.d. St. Joseph Hospital Adjunct Faculty

 Marcia Johnson, PsyD. Clinical Neuropsychologist. St. Joseph Hospital, Ann Arbor MI | marciaflorence@aol.com

1.6.e. MICAPT Support Staff

 MICAPT/McLaren Flint Academic Program Administrator II: Trevor Pace. Phone: 810-342-3062 | Email: Trevor.pace@mclaren.org

SECTION II – ADMINISTRATIVE STRUCTURE

2.1. MICAPT Meetings

2.1.a. MICAPT Board of Directors. The Board of Directors consists of the fellowship Training Director, Clinical Health Psychology Program Director, a representative of the MICAPT Faculty, the MICAPT Chief Psychologist, the Associate Designated Institutional Officer and a Family and Internal Medicine Faculty representative, as well as the corporate Chief of inclusion and diversity. This group meets at least twice per year, along with the McLaren Flint Academic Program Administrator I, to ensure uniform administration and implementation of the program's training principles, policies, and procedures.

2.1.b. Flint Area Fellowships Faculty (FAFF) Meetings. MICAPT and adjunct Faculty meet monthly, except for July and December. In these meetings the faculty discuss various matters pertinent to the fellowship. Additionally the MICAPT faculty meet to address specific issues related to McLaren Fellows monthly

2.1.b.1. Fellow Representatives. Fellows have the opportunity to serve as a fellow representative at the combined FAFF meeting for all or part of their second year on a rotating basis. The representative(s) is/are selected and a schedule is agreed upon by all of the fellows annually in August. The fellow representative schedule is presented at the following FAFF meeting.

2.1.b.2. Responsibilities of the Fellow Representative. The fellow representative serves as a liaison between the FAFF and fellows on program or fellow-specific issues. In doing so, fellow representatives communicate regularly with their peer fellows either through the monthly to discuss concerns and/or issues related to the postdoctoral fellowship experience. The representative attends the monthly FAFF meetings to bring forth the fellows' issues and concerns collectively as part of the "Fellow Report" (i.e., a standing item on the FAFF meeting agenda), then provides a meeting summary to the fellows afterward. The fellow representative is also responsible for collecting attendance logs and evaluations from each seminar, then submitting them to the MICAPT/McLaren Flint Academic Program Administrator I.

2.2. Diversity Committee

Efforts to create a learning environment that incorporates cultural diversity are ongoing and a vital objective within MICAPT. The Diversity Committee is comprised of faculty and postdoctoral fellows and meets monthly to oversee events and generate ideas for deepening diversity within MICAPT. One fellow representative from each hospital serves as co-chair on a rotating basis.

The committee develops an annual calendar of events, with events facilitated on a rotating basis by the fellows at Ascension Ascension-Genesys, Hurley Medical Center and McLaren, along with the faculty facilitators. Fellows have the opportunity to select the topic, format, and/or speakers they identify as pertinent to furthering the diversity committee's mission of deepening exposure to diverse populations, improving recognition of cultural factors relevant to Clinical Health Psychology, and facilitating cultural

humility. Events vary from year to year in an effort to promote relevant, timely, and fellow-driven experiences. The faculty facilitators also coordinate one diversity field trip per year, where fellows and faculty spend a half-day off-site and engaged in a diversity-related experiential activity. The committee promotes the education of the FAFF and fellows regarding multiculturalism. In addition, a representative of the diversity committee routinely provides updates under the standing agenda item "Diversity Committee" at FAFF meetings.

SECTION III – POLICIES AND PROCEDURES

3.1. Licensing Policy

All postdoctoral fellows must possess a Michigan license to begin the fellowship. This could either be a Masters educational (temporary) limited license (TLLP) or a doctoral educational limited license (LLP).

Should the candidate end internship in July or August prior to beginning the fellowship, they may need to apply for the Masters educational (temporary) limited license. Should the successful candidate begin fellowship with a Masters level limited license, they must apply for a doctoral level limited license by October 1st of their first year of fellowship. This license will enable them to sit for the Examination for Professional Practice in Psychology licensing exam.

The Program Director assists incoming fellows in determining which license to obtain.

3.2. Confidential Information

Each FAFF/MICAPT faculty member and fellow shall comply fully with all applicable state and federal laws and regulations and maintain the integrity, confidentiality, and security of individual medical charts, billing records, and other individually identifiable health information including HIPAA and its regulations that may, from time to time, be publicized. HIPAA rules and guidelines shall be provided to each fellow.

All faculty and fellows must not release Confidential Information to which they have access, except to authorized personnel. Confidential information includes any and all information about a patient such as name, phone number, address, treatment, diagnosis, lab reports, or appointment times. This information can be given only if a release is signed by the patient. Furthermore, patient names should never be mentioned outside of the work area or in front of anyone not working directly on the case. If an employer calls desiring any information on office appointments, attendance or diagnosis, there must be a written release from the patient.

Insurance companies can receive information only if there is a release signed by the patient or guardian. For advice regarding institutional policy in these matters, contact the risk management office at the sponsoring institution.

3.3. Admission and Selection Process

The fellow selection process begins with open application on October 1st of each year.

3.3.*a. MICAPT Admission Requirements.* To apply for a MICAPT program, applicants must meet the minimum entrance requirements:

To apply for an Adult CHP fellowship position, applicants must meet the following entrance requirements:

• Completion of doctoral studies at an accredited institution in clinical or counseling psychology, preferably in an APA accredited doctoral program [Note: if doctoral degree in psychology is in an area of emphasis other than recognized area of professional psychology, the applicant must have completed re-specialization training in an accredited doctoral program]

- Completion of an internship in clinical or counseling psychology, preferably in an APA accredited and/or APPIC listed internship program
- License eligible in the State of Michigan as a doctoral level limited licensed psychologist
- Possess a broad, general background in professional psychology

In addition to ensuring minimum entrance requirements are met, reviewers look for the presence of experiences and/or attributes evidenced within application materials. Examples of desirable experiences and attributes include the following (NOTE: Desirable experiences completed or attributes evidenced apply to CHP:

- Academic training in Clinical Health Psychology (coursework)
- Research experience
- Clinical experience in Clinical Health Psychology/medical settings
- Experience in the primary care setting
- Experience in medical education
- Classroom teaching experience
- Clinical supervision experience
- Interest level in primary care
- Level of support from letters of recommendation
- Personal statement (clarity of goals, match with program, writing skills)

3.3.b. Application Timeline. To be considered as a candidate for a fellowship position, those interested in the fellowship who meet the admission requirements (2.2.a. above) must complete the following:

CHP Fellowship Application Instructions: submit an online application (<u>www.mclaren.org</u> or the APPIC website <u>https://www.appic.org/Internships/AAPI</u>) and provide the following materials on or before the application deadline, which is posted annually on the website (<u>www.mclaren.org</u>):

- Personal Statement
- Curriculum Vitae
- Graduate School Transcripts
- Three (3) satisfactory letters of recommendation, one of which must be from your current supervisor

3.3.c. Fellow Selection Process. MICAPT is an Equal Opportunity Employer. We encourage members of historically underrepresented groups to apply, and consider diversity in its broadest sense as one contributing factor in our determination of an applicant's fit. We seek applicants with a solid clinical and scientific knowledge base from their academic program and internship; strong professional skills in standard assessment, intervention, and research techniques; and the personal characteristics necessary to function well as a doctoral-level professional in a medical center environment.

Ultimately, the Program Director from each sponsoring institution selects candidates who, based on all information obtained, are determined to be the best match for their fellowship program. Candidate selection is based on a review of all aspects of the application materials and other information gained from interviews and internet searches of applicants' names. A particular emphasis is placed upon the congruence between an applicant's prior experiences, future goals, and MICAPT offerings. MICAPT also considers candidates' representation of various cultural, life, and professional experiences to ensure diversity and equity amongst fellows and faculty. When selecting between two equally experienced candidates with high perceived program fit, MICAPT provides priority to applicants who are members of historically underrepresented groups. These factors may be indicated within application materials. Once selected, candidates are offered a fellow contract agreement.

3.3.c.1. Applications are initially reviewed by the selection committee which is composed of psychologists involved in postdoctoral training and current Clinical Health Psychology fellows. Following this initial review, highly ranked applicants may be invited for an interview.

3.3.c.2. Application Review Period. Faculty may review incomplete and complete applications. Applications are considered complete when all required materials have been submitted. Program directors ultimately determine which applicants are invited for interviews.

3.3.c.3. Candidate Interviews. Interviews are typically held in the months of January and February. Due to COVID, interviews for the 2022-2023 season will be all held through an online process. An interview schedule is prepared. The interview process is designed to be comprehensive and maximize fairness for all candidates. A typical interview may include the following: welcome with Program Directors, tours of program facilities, interview sessions with current faculty and fellows, group luncheons, and a case presentation. During the interview process, assessable knowledge, skills and attributes (KSAs) relevant to Clinical Health Psychology practice are noted. Assessable KSAs may include those related to interpersonal and communication skills, professionalism, teaching and education, ethics, multicultural sensitivity and practice, clinical assessment/intervention, and interprofessional functioning. Various methods may be used in the interview, including standardized questions and case presentations. No in person interviews will be held this interview season.

3.3.c.3.1. *Travel Expenses.* MICAPT does provide lodging for candidates, however this year, no travel will be necessary for interviews.

3.4. Professionalism

Faculty and fellows must demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population. In addition, fellows are expected to:

- Demonstrate respect, compassion and integrity; a responsiveness to the needs of patients and society that supersedes self-interest, accountability to patients, society, and the profession; and a commitment to excellence and ongoing professional development.
- Demonstrate a commitment to ethical principles pertaining to provision or withholding of care, confidentiality of patient information, informed consent, and business practices.
- Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities.
- Dress and behave in a professional manner.
- Report absences and tardiness appropriately and be prompt whenever possible.
- Responsibilities including patient care, medical education, etc. may extend beyond normal work hours and fellows are expected to meet these obligations.

3.4.a. APA Ethical Principles. All faculty and fellows are expected to uphold the Ethical Principles of Psychologists and Code of Conduct (<u>https://www.apa.org/ethics/code</u>) at all times.

3.4.a.1 Preparing Professional Psychologists to Serve a Diverse Public: Please click on link to redirect to the above named statement <u>Preparing Professional Psychologists to Serve a</u> <u>Diverse Public.docx</u> **3.4.b.** Dress Code. All faculty and fellows are expected to dress and behave in a professional manner. Fellows are responsible for adhering to each medical center's dress code. In the absence of the dress code, follow these general guidelines:

- Maintain good personal hygiene at all times.
- Clothes should fit properly and be kept neat and clean.
- Shoes should be clean and in good repair. Sandals, platforms and any other similar type shoe or open-toed shoes are unsafe and inappropriate in clinical areas.
- Garments should be knee length or longer, and appropriate to a hospital and business setting. The following garments are prohibited: sheer or revealing, tight-fitting, t-shirts, sweatshirts, and cut-offs.
- Tattoos must be covered
- **3.4.c.** Attendance Policy. Fellows are expected to report absences and tardiness appropriately and promptly to their supervisor or designee. Faculty and fellows are expected to arrive on-time as scheduled for all MICAPT fellowship program activities. Fellow attendance at MICAPT seminars is mandatory with the only exception being approval through your supervisor, such as sick, conference, vacation days, or urgent care responsibilities. An attendance log (sign-in sheet) will be provided at these sessions and attendance shall be recorded in the MICAPT main office. Frequent tardiness and/or failure to report absences in accordance with the sponsoring institution policy may result in dismissal from the program.

3.4.c.1. Absence Notification Procedure. Fellows must submit an absence notification email to the MICAPT Program Assistant in advance of any MICAPT didactic sessions that will be missed with the exception of unexpected, personal emergencies. This email should be sent as soon as any upcoming vacations are approved by the fellow's supervisor. For personal emergencies, the email notification should be sent upon the fellow's returning to work. On the rare occasion a supervisor authorizes a fellow to miss a MICAPT didactic session due to a clinical need, the email notification should be sent at the fellow's earliest opportunity.

3.4.d. *Publications/Presentations.* If a fellow drafts a paper for publication or presentation about the fellowship, the medical center, residency, or its curriculum, a draft outline must be submitted to the Program Director for review and approval.

3.4.e. MICAPT Intellectual Property. Sharing, use, and reproduction of intellectual property (e.g., MICAPT manual, training materials, lectures, presentations) require the author's permission as consistent with APA guidelines.

3.5. Evaluations

3.5.a. Online Evaluations. The following MICAPT evaluations shall be completed online through New Innovations (https://www.new-innov.com/Login/Login.aspx):

3.5.a.1. MICAPT Competency Based Evaluation Tool (MCBET). The MCBET ranks competencies from novice to expert, based on behavioral anchors and also serves as the training program's formal evaluation instrument for evaluating fellows' progress. The MCBET is a measurement tool used to rate fellow performance using behavioral descriptions that correspond to level 1 and level 3 CHP competencies. The primary supervisor or designee completes the MCBET twice per year (February/March and August/September) with input from relevant faculty and multiple data sources (e.g., direct observation, clinical documentation review) to ensure that the fellow meets the program's training goals. Additionally, the MCBET is completed when the fellow enters the program for baseline data.

Each fellow is evaluated by their designated primary and secondary supervisor. The fellow is asked to submit an online self-evaluation as well. The fellow then has a scheduled meeting with their designated primary and secondary supervisor to discuss the evaluation. In addition to the MCBET, at the beginning of fellowship, incoming fellows develop an Individualized Development Plan with their primary supervisor. Evaluations and Individualized Development Plan (IDP) are examined every six months (6-, 12-, 18, 24-months). Previously set goals and objectives are examined to determine the fellows' progress, and new goals and objectives are set to be examined at each scheduled evaluation. The evaluation, as it applies to measuring acquired competencies, understanding, skills and abilities, attitudes, as related to the program aims and objectives are based on the primary and secondary supervisors' opinion. These records are maintained in the fellow's central file and electronic repository. See Appendix B of this manual for sample evaluation forms.

If a fellow fails to receive a summary rating of "making progress towards meeting competencies" for each competency (at 12-18-24 month evaluations), then the supervisor implements the Remedial Plan Procedures consistent with those of the affiliated residency program in collaboration with the program director at the sponsoring institution.

3.5.a.1.1. Fellow Individualized Development Plan (IDP). Fellows self-evaluate two times per year (February and August) using an online evaluation form that is then reviewed with their supervisor(s).

3.5.a.1.2. Supervisor Evaluation of Fellow. The supervisor(s) reviews the Fellow IDP, completes an evaluation of the fellow with faculty input and multimodal data, and arranges a meeting with the fellow to discuss the evaluations. The evaluation review supports fellows in enhancing awareness of their strengths and challenges, ensures progress toward competent practice in relation to the program aims, and enables fellows to self-direct future learning goals. See also 3.6.a. Remedial Plan Procedures.

3.5.a.2. Fellow Evaluation of Program. Fellows evaluate the program two times per year (February and August) using an online evaluation form (see Appendix B). Responses and comments are submitted confidentially and reviewed by the MICAPT Board of Directors. The purpose of the evaluation is to receive fellow-based feedback that enhances awareness of programmatic strengths and weaknesses, and consequently supports continuous programmatic improvement.

3.5.a.3. Fellow Evaluation of Supervisors. MICAPT fellows evaluates their supervisors confidentially through an online evaluation form twice per year (February and August; see Appendix B), as well as through an annual face-to-face meeting every August with the Director of Medical Education. The Program Director reviews evaluations and results of the in-person meeting with the ADIO. Non-specific feedback is then delivered to relevant faculty afterward. Where specific issues need to be addressed with a particular Supervisor, the Program Director will, as deemed appropriate, conduct the following in this order: Arrange an individual meeting with the fellow(s) involved; if necessary and after notifying the fellow(s) involved, meet with the supervisor(s) to gather further information and provide feedback. The Program Director may also, after notifying the fellow(s) involved, meet jointly with those involved as needed to seek problem resolution. The goal of Fellow Evaluations of Supervisors is to share information that can support MICAPT supervisors in making continuous quality improvements, while protecting the confidentiality and anonymity of current fellows to the fullest extent possible.

3.5.a.3.1. Fellow Evaluation of a Supervisor who is also a Program Director. When a fellow completes an evaluation of a supervisor who is also a Program Director, the evaluation form is submitted directly to the Associate Designated Institutional Officer (ADIO).

3.5.a.3.1.a. The ADIO at McLaren Flint or an appointed designee will store these evaluation forms.

3.5.a.3.1.b. The ADIO will provide a summary evaluation of the Supervisor/Program Director, reviewing non-specifically strengths and areas in need of improvement. Where specific issues need to be addressed with a particular Supervisor/Program Director, the Training Director will, as deemed appropriate, conduct the following in this order: Arrange an individual meeting with the fellow(s) involved; if necessary and after notifying the fellow(s) involved, meet with the Supervisor/Program Director to gather further information and provide feedback. The Training Director may also, after notifying the fellow(s) involved, meet jointly with those involved to seek problem resolution.

3.5.a.3.2. Fellow 360 Evaluation. Twice per year (mid November and mid June), these evaluations are sent out to other faculty and staff that fellows interact with on their rotations. These are sent out mid-way through fellow rotations and feedback is meant to be formative to help determine strengths and growths areas for the fellow on their current rotation. Primary supervisors review completed Fellow 360 evaluations with fellows during direct supervision.

3.5.b. Other Evaluations. The following evaluations will also be completed online through New Innovations (<u>https://www.new-innov.com/Login/Login.aspx</u>):

3.5.b.1. *Didactic Evaluations.* After each seminar (Clinical Health Psychology (CHP), Core Curriculum (Core), Rehabilitation Psychology (RP), Leadership-Management (LM), Diversity, Wellness, Psychopharmacology, and Advanced Didactics (second year fellows only) the fellows will complete a confidential evaluation of the didactic session. These evaluations will be submitted through New Innovations and compiled by the MICAPT APA. Aggregate data reports will be provided to the faculty and specific data to the leader of the didactic session. Didactic evaluations are also examined by the Curriculum Review Committee once annually to support continuous quality improvement specific to didactics. See Appendix B for a sample evaluation.

3.6. Due Process

MICAPT follows the policies and procedures for due process of McLaren Healthcare Corporation. Refer to the specific policy in the contractual agreement or resident handbook/manual.

3.6.a. Remedial Plan Procedures (concerns about fellow performance). Should a fellow need improvement in a specific area, a written remedial plan will be developed by the supervisor(s) in consultation with the fellow that will be reviewed and signed by all parties including the Program Director. The remediation plan will include a time frame under which improvement is expected. If performance does not improve within the time frame specified within the remediation plan, a memorandum outlining the performance concerns will be sent to the fellow, Program Director, and Board of Directors. Any further action shall follow the policies and procedures of the fellow's sponsoring institution, which can be found in that institution's resident handbook/manual.

3.6.a.1. "Good Standing" Definition. A fellow is in "good standing" if he/she has ratings of "making progress toward meeting competency" for all fellowship goals. A fellow is not in good standing when his/her supervisor initiates the Fellow Remedial Plan Procedures or a more significant corrective action plan.

3.6.a.2. Disclosure of Difficulties Meeting Expectations. As early as is feasible, fellows are expected to fully and completely disclose to the supervisor(s) any issue or problem that has the potential to impact patient care or fellowship engagement. Failure to disclose such issues will result in a meeting with the fellow's supervisor and/or Program Director to develop a remediation plan, the outcome of which may include disciplinary action up to program dismissal.

3.6.b. Grievances (fellow concerns within MICAPT or the training environment). A fellow who has a complaint or grievance is entitled to initiate a grievance as set forth below.

3.6.b.1. Employment Issues. In the event of any claim relating to wages, hours, and conditions of employment, excluding solely educational issues, fellows shall follow the general grievance procedure of the sponsoring institution; this can be requested from the ADIO.

3.6.b.2. Educational Issues. For any grievance related solely to educational issues within the MICAPT program, fellows will follow the Graduate Medical Education Hearing and Review Procedure.

3.6.b.3. *MICAPT Issues.* For any grievance related to MICAPT, and not meeting the criteria for 3.6a or 3.6b, the fellow will seek resolution using the following chain of command:

- First, discuss the issue with your Supervisor.
- Second, if necessary, seek additional help from the Program Director and Training Director
- Third, if necessary, request mediation by the ADIO.

3.7. Termination Policy

MICAPT follows the policies and procedures its Graduate Medical Education office with regard to termination. Refer to the specific policy in the contractual agreement or resident handbook/manual. The resident handbook/manual will be sent as soon as a contract is signed. Additionally, the Health Psychology manual is available on our website. (https://www.mclaren.org/gme-medical-education/mclaren-residency-programs/5)

3.8. Non-Completion Policy

In the event a fellow leaves the program early, a non-completion letter will be prepared. The letter shall include an introduction to the program, the date that the fellow began the two-year program, relevant aspects of the training experience, the date that the fellow left the program, and whether the fellow left the program in good standing or otherwise.

3.9. Non-Discrimination Policy/Commitment to Diversity

MICAPT supports the Guidelines on Multicultural Education, Training, Research, Practice, and Organizational Change for Psychologists as adopted in 2002. As such, MICAPT acknowledges and supports diversity within our recruiting process and throughout our training curriculum. The curriculum includes, but is not limited to the awareness of discrimination, knowledge about cultural differences, and the development of clinical skills and cultural competence essential to functioning within diverse groups and environments.

MICAPT promotes competency and understanding in working with diverse populations which include the following individual characteristics: age; race; ethnicity; sexual orientation; gender; gender identity and expression; people with disabilities; immigrant status; socioeconomic status; religious affiliation and national origin. All decisions regarding educational and employment opportunities and performance are to be made on the basis of merit and without discrimination. Similar to many healthcare settings, MICAPT sponsoring institutions host diverse medical learners and treat diverse patient populations. Fellows have the opportunity to become members of the hospital's Diversity, Equity and Inclusion (DEI) Committee. Consequently, multicultural awareness and sensitivity are critical to functioning effectively within our healthcare system, and key attributes to effective practice after fellowship.

Any alleged violation of this policy should follow the grievance policy as outlined in 3.6.b.

3.9.a. Diversity Plan. Maintaining a diverse environment is important to MICAPT. Our efforts to recruit and retain a multiculturally diverse staff and fellow cohort are broad, and include the following:

3.9.a.1. Advertising. MICAPT advertisements indicate that MICAPT is an equal opportunity employer. MICAPT advertisements are disseminated broadly and also sent to sources that target historically underrepresented minority groups (e.g., specific training directors, colleges/universities, special interest groups).

3.9.a.2. Recruitment and Selection. MICAPT utilizes a recruitment and selection process that identifies our interest in diversity, and considers diversity representation in selection determinations when selecting between two equally competent applicants.

3.9.a.3. *Mentoring.* The MICAPT Diversity Committee shall act as a vehicle for fellows specifically concerned with diversity issues or requesting a cultural mentor.

3.9.a.4. Didactics and Training Opportunities. The MICAPT curriculum includes elements of diversity as defined above in every didactic. In addition, MICAPT's Diversity Committee shall be responsible for overseeing cultural competency within the MICAPT curriculum. Each year the committee selects specific activities related to diversity and develops programming around them.

3.9.a.5. *Diversity Friendly Work Environment*. A lack of cultural competency in the work environment will not be tolerated.

3.9a.6. Ongoing and Continually Evolving Efforts. Through training and clinical activities, MICAPT fellows will receive regular exposure to multiculturally representative populations and issues supporting cultural competence. Training supervisors will ensure diversity patients served by fellows. See also Section 2.2. Diversity Committee.

3.9a.7. Unconscious Bias and You. All fellows are expected to complete a module concerning diversity and inclusion entitled "Unconscious Bias and You".

3.10. Sexual Harassment

MICAPT's policy is that the work environment must be free of harassment. Sexual harassment can include, among other things, sexual advances, requests for sexual favors, sexual jokes, and unwelcome physical contact. MICAPT considers sexual harassment to be a form of sex discrimination. As such, sexual harassment of MICAPT employees, faculty, fellows, and students will constitute a violation of MICAPT's Non-discrimination Policy.

Any allegation of sexual harassment should follow the grievance policy as outlined in 3.6.b.

3.11. Vaccination Policy

Fellows are required to remain in compliance with their institutional policies regarding COVID19 vaccination status. For fully vaccinated fellows (as defined by the CDC at the time), when institutional policy allows and when determined to be safe and appropriate to hold in person didactics, fellows are expected to be present. For those who are not vaccinated, didactics must be attended virtually. In addition, if a fellow suspects they have COVID19 or has been asked to work from home, they should attend didactics virtually. For guest speakers, if the speaker is not vaccinated, or if vaccine status is unknown, didactics will be virtual for the lecture.

SECTION IV – Core Curriculum

4.1 Clinical Care

Fellows will complete rotations in various clinical settings, and in other cases fellows will have longitudinal clinical experiences that occur concurrently. To ensure adequate learning opportunity, fellows are generally expected to maintain either an average clinical caseload or average number of clinical hours, depending on the practice setting (e.g., integrated primary care versus outpatient psychotherapy versus inpatient consultation-liaison services). The average clinical caseload and clinical hours vary based on fellows' clinical experience and learning needs.

The purpose of clinical care is to provide advanced learning experiences in targeted assessment, intervention, and interviewing in order to effectively treat patients in the healthcare setting. In many instances, fellows collaborate with their supervisors to choose cases that enhance their knowledge and ensure a wide range of learning experiences, including the biopsychosocial model and ability to apply it to clinical assessment and intervention. Fellows also apply evidence-based research to practice.

4.1.a. Inpatient Consultations. Hospital consults are a common element of Clinical Health Psychology practice. When a consultation request is received, a response within 24 hours is indicated. Consultations usually involve a bedside evaluation of the patient and other informants, based on the specifics of the physician's request. Following the evaluation, a note is written in the format required. Formal communication with referring physicians is encouraged. In addition, MICAPT faculty and supervisors are available on a daily basis to supervise and oversee consultations.

4.1.b. *Psychological Testing.* Psychological assessment is a valuable skill for the practicing clinical health psychologist and supported in the fellowship. As psychologists, we are experts on psychological testing and reserve the right to determine the necessity and appropriateness of testing for a given individual patient. Assessment materials relevant to clinical practice are available at each sponsoring institution.

4.2. Supervision

Fellows receive extensive supervision during the two-year program.

4.2.a. Individual Supervision. Individual face-to-face supervision occurs at least two hours per week. Fellows receive supervision from at least two different supervisors during any given training year, with one serving as their primary supervisor. The content of supervision is consistent with the fellows training activities and the methods are matched to the experience and training level of the fellow. There is daily contact between supervisors and fellows, and additional supervision is available as needed.

4.2.*b.* Supervision is available in an area of special focus. This occurs regularly and is scheduled based on the availability of faculty, along with the needs and interests of the fellows.

4.3. Didactic Training

Fellows receive advanced didactic training in a variety of Clinical Health Psychology topics using modalities ranging from formal classroom-like instruction to on-the-fly and curbside teaching. At the first session of each scheduled module or series, fellows will receive a sample syllabus that includes minimally the topics to be covered, presenters involved, and locations of didactics. See Appendix A for a sample syllabus.

4.3.a. *Required Didactics.* Fellows are expected to attend, be prepared for, and participate in didactic experiences. During this year of the Covid-19 pandemic, didactic training will be 50%

live and 50% online. This is subject to change as the pandemic evolves. Please see Appendix A for Core Didactic descriptions.

4.3.b Rehabilitation Psychology (RP) Seminars. The topics of these seminars prepare attendees for advanced practice in rehabilitation psychology. Because some topics overlap with those essential to Clinical Health Psychology, CHP fellows are expected to attend all large group sessions.

4.3.c. Other Didactics. The graduate medical education department hosts a variety of continuing education experiences for learners and faculty that are open to MICAPT faculty and fellows. Examples include noon conferences; special GME/CME lectures; Grand Rounds; Morbidity, Mortality and Improvement Conferences; Morning Report; and others.

4.4. Teaching/Supervision

Fellows receive training in medical education techniques and procedures. They then apply this knowledge to their roles as teachers and supervisors of learners.

4.4.a. Lecturing. The Graduate Medical Education (GME) department provides didactics to learners and faculty. MICAPT fellows are required to provide at least two resident/faculty lectures per year. Topics are assigned by the fellow supervisor or Program Director.

4.4.b. Precepting/Shadowing. Precepting is a term used in medical education to indicate a form of clinical teaching, whereby a faculty member directly oversees the clinical work of the training physician. Psychologists in our medical education setting serve as clinical faculty and, when appropriate, precept physicians. Precepting may involve reviewing videotapes with the physician of interactions with patients, as well as actually accompanying the physician into the exam room ("shadowing"). Fellows may precept with medical residents, medical students, and/or other allied health personnel as assigned by their supervisor.

4.4.c. Community Service or Outreach Activity. Interfacing with the local community and learning to provide outreach activities are important Clinical Health Psychology roles. Fellows are strongly encouraged to be active in one or more community service project and required to provide at least one outreach or community service activity per year. Examples of community service and outreach activities include informing behavioral aspects of community-based cooking and health classes, teaching anti-bullying strategies to paraprofessionals within the local YWCA and YMCA, and other educational activities for members of support groups, community agencies, and places of worship.

4.4.d. Supervising. Second-year fellows at McLaren may supervise practicum students as assigned and available.

4.4.e. Curriculum Development. Knowing how to establish appropriate goals, define measurable objectives, set realistic outcome measures, and use this information to develop or refine a curriculum are valuable roles within medical education. MICAPT encourages development of the aforementioned skills through involving fellows in medical education, core didactics on relevant topics, and encouraging curriculum development or refinement electively or in fulfillment of senior project requirements (see 4.5.a).

4.4.f. *Psychiatry Clerkship.* The Michigan State University Colleges of Human and Osteopathic Medicine provide training for third- and fourth-year medical students in Flint. The Psychiatry clerkship is one experience where MICAPT fellows will participate in the training of medical students. This participation may include the fellow giving a lecture, precepting a clinical encounter, or having the medical student observe their work.

4.5. Scholarly Activity

Fellows receive training and support that enables them to critically review research, adopt a commitment to lifelong learning, and participate in scholarly activities. While research and quality improvement projects are not required, participation is encouraged and often results in peer reviewed dissemination via regional and national presentations.

4.5.a. Senior project. Fellows are required to complete a senior project under the guidance of a faculty mentor. Fellows are encouraged to pursue projects of personal interest and can participate in ongoing projects, and/or collaborative efforts with medical residents, students, and faculty as applicable. Projects can span a variety of scholarly activities including, but not limited to, curriculum development, quality improvement, traditional empiric investigations, case presentations, and service line development or improvement. Projects are typically completed in the second year of the fellowship, but may begin in year one if desired. Topics should be discussed and refined with the assistance of the faculty mentor. Projects must be identified by September 30th of PGY-2 with fellows utilizing the senior project proposal from (see appendix). Regular updates from the fellow to their faculty mentor and the faculty person in guiding the fellow's project. Fellows will follow the appropriate quality improvement/research guidelines (e.g., IRB), where applicable.

Following project completion, fellows will present their senior project in a 45-minute, formal presentation to the FAFF and fellows. Senior project presentations are typically held in August of Fellowship Year 2. Faculty will complete an evaluation form to provide fellows with feedback on their project and presentation style.

4.5.b. Participation and Presentation at Professional Meetings. Although not required, fellows are encouraged to prepare and submit scholarly work for peer-reviewed regional and national meetings on topics of interest (which may be based on their senior project). Organizations important for clinical health psychologists include the American Psychological Association (APA), Michigan Psychological Association (MPA), and Association of Behavioral Science and Medical Education (ABSAME), Association for Hospital Medical Education (AHME), as well as Society of Teachers in Family Medicine (STFM). Additional associations may be indicated based on the populations and specific medical learners served. Fellows are encouraged to check about availability for monetary support for conference attendance.

4.6. Professional Development

Through participation in individual supervision, didactics, leadership-promoting activities, and more, fellows are provided with extensive support and encouragement to grow professionally throughout the fellowship experience.

4.6.a. National Examination for Practice in Professional Psychology (EPPP). Fellows are required to pass the National Examination for Practice in Professional Psychology (EPPP) prior to graduation. Fellows are encouraged to check with their Program Director as money and/or resources may be available to support preparation and exam-related fees. Certificates of fellowship completion will not be awarded to any fellow who does not complete this requirement. For those who pass the EPPP after their 24th month of the fellowship, a certificate of fellowship completion will be awarded upon review of supporting documentation by the MICAPT Training Director. The National examination must be taken in the first year of the fellowship and Fellows must pass it prior to month 24 in order to graduate.

4.6.a.1. EPPP Preparation. First-year fellows are provided with a FAFF-led informational session, usually in the month of October in order to help fellows prepare for this examination. Following the session, fellows are encouraged to develop EPPP Study Groups; FAFF/MICAPT Faculty can assist upon request.

4.6.b. National Conferences. Fellows are encouraged to attend national conferences relevant to their specific interests and practice areas. Fellows are encouraged to check with their sponsoring institution as continuing education money may be available to support conference related fees.

SECTION V – Fellow Resources

5.1. Administrative Support

MICAPT provides direct administrative support in overall fellowship functioning including accreditation, recruitment, evaluation, financial expenditures/invoices, meeting-related documentation, and record keeping. Faculty appointments for fellows and faculty are facilitated in the appropriate MSU department. MICAPT also has administrative support for fellows and faculty related to day-to-day activities and sponsoring institution-specific policies/procedures such as stipend/salary, benefits, continuing education funds, vacation days, scheduling of patient care and teaching responsibilities, authorizations and billing, computer and information technology assistance. (See 1.6.c. Support Staff for contact information)

5.2. Financial Assistance

MICAPT does not provide financial assistance for fellows. However, one provided benefit is Employee Assistance Program (EAP), which can provide financial counseling.

The 2022/2023 academic year stipend and benefits package is as follows:

McLaren-Flint CHP Fellows:

In **year 1**, they are given a stipend of **\$55,000** and in **year 2**, they are given a stipend of **\$56,100**. They are given an annual education allowance to use for education activities including, but not limited to, conference attendance, licensure application, EPPP preparation and examination fees, and technology related to their fellowship position. Educational expenses must be approved through Graduate Medical Education prior to use. Fellows are also given a meal stipend of **\$1,200** per year to utilize at the hospital. They are allotted 15 days of paid time off, 5 days for conferences, 5 days for interviews, and 1 day to take their board exam, which results in **26 total days** of time off. Fellows also have health, dental, and vision insurance.

5.3. Fellow Rights and Responsibilities

Fellows have the right to be treated in a professional and respectful manner by all FAFF/MICAPT faculty and staff. Fellows must adhere to the policies and procedures outlined in Section III of this manual, which is provided and reviewed at MICAPT orientation. Fellows are also expected to follow the policies and procedures as outlined in their resident manual and fellowship contract.

5.4. MICAPT Calendar

The MICAPT calendar includes routine and special fellow activities and events for the month and is available online via Google calendar. The calendar is shared with all FAFF/MICAPT faculty and fellows, and intended to serve as a reference for the date, time, and location of FAF/MICAPT activities. Activities are subject to change. Every effort is made to ensure the FAF/MICAPT calendar reflects changes as early as is feasible.

5.4.a. Fellowship Activities/Events.

5.4.a.1. Welcome Luncheon. In September of each year, the first-year fellows are welcomed by the FAFF/MICAPT Faculty and second-year fellows at an informal luncheon

5.4.a.2. Orientation. Orientations are provided in September and span introductions to MICAPT, as well as to McLaren Flint in general.

5.4.a.3. Peer Lunch/Dinner and Social Events. Although not required, fellows are encouraged to plan peer lunches and dinners to promote local peer support and opportunities for peer interaction within the community served. Covid requires us to be flexible with in-person activities. Generally, a MICAPT Graduation Party is also held annually in the summer. This event is held to honor fellows scheduled to complete the two-year program that year.

5.5. Online Resources

5.5.a. MICAPT Website. The MICAPT website (https://www.mclaren.org/gme-medical-education/mclaren-residency-programs/5) is where information can be accessed including the application process, faculty and director biographies, and other general information.

5.5.b. New Innovations. New Innovations is a web-based residency management tool that includes scheduling, evaluations, tracking duty times, case logs, conferences, and other aspects of program maintenance. Login information is provided to all fellows.

APPENDICES:

Appendix A: MICAPT 2021-2022 CHP Core Curriculum, Calendar & Didactic Description links

FAF Didactic Calendar AY21-22.8.12.21.xlsx

Didactic Description

Appendix B: MICAPT CHP Evaluation & Senior Project links

MCBET V2 Evaluation

Evaluation of Supervisor

Evaluation of CHP Program

Evaluation of MICAPT Seminar

Fellow IDP Evaluation

Fellow 360 Evaluation

Senior Project Form