



Postdoctoral Psychology Fellowship Manual

Clinical Health Psychology

2020-2021

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, 2020

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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
<http://www.apa.org/ed/accreditation/about/coa/index.aspx>
Email: apaaccred@apa.org (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. Effective teaching with a broad range of health care providers.

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

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 victoria.gervais@mclaren.org.

1.6.a. Board of Directors

- Barbara Wolf, PhD, MICAPT Fellowship Training Director, 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 | Email: barbara.wolf@mclaren.org
- 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: 810-342-5620 | Fax: 810-342-5629 | Email: erin.oconnor@mclaren.org
- Jennifer Carty McIntosh, PhD, CHP/McLaren Flint MICAPT Associate Program 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: Jennifer.cartymcintosh@mclaren.org
- Andrew Champine, PsyD, Supervisor at MICAPT CHP Fellowship, Director of Behavioral Medicine Education at McLaren Flint Internal Medicine Residency/Assistant Professor

Michigan State University College of Human Medicine Departments of Psychiatry and Internal Medicine – 3230 Beecher Rd, Suite 2, Flint MI 48532 | Phone: 810-342-5800 | Email: andrew.champine@mclaren.org

- 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: nicole.franklin@mclaren.org
- 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: barbara.wolf@mclaren.org
- 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: nicole.franklin@mclaren.org
- 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: erin.oconnor@mclaren.org
- Andrew Champine, PsyD, LP Director of Behavioral Medicine Education-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: andrew.champine@mclaren.org
- Jennifer Carty McIntosh, PhD, Associate Director of Behavioral Medicine 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: jennifer.cartymcintosh@mclaren.org

1.6.c. Adjunct Faculty

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

- Mark Vogel, PhD, ABPP, Genesys Postdoctoral Psychology Fellowship Program Director, Psychology and Behavioral Science, Department of Medical Education, Genesys Regional Medical Center/Professor, Michigan State University College of Human Medicine, Genesys Family Health Center – East Flint Campus, 1460 N Center Rd, Burton MI 48509 | Phone: 810-715-4320 | Fax: 810-715-4371 | Pager: 810-972-1898 | Email: vogel1@msu.edu
- Heather Kirkpatrick, PhD, ABPP, Director of Behavioral Science for Internal Medicine, Genesys Regional Medical Center/Adjunct Assistant Professor, Michigan State University College of Human Medicine. 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: heather.kirkpatrick@ascension.org
- Scott Nyman, PhD, ABPP, Associate Director of Behavioral Science for Family Medicine, Genesys Regional Medical Center/Assistant Professor, Michigan State University College of Human Medicine. 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: Scott.Nyman@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: kstucky2@hurleymc.com
- Shannon Dennis, PhD, Pediatric Neuropsychologist, Hurley Medical Center/Adjunct Associate 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 | Email: sdennis1@hurleymc.com
- 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: ccedern1@hurleymc.com
- 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: rellens1@hurleymc.com
- Lauren Gallo, PsyD, Licensed Clinical Psychologist, Clinical Neuropsychologist and Rehabilitation Psychologist. 111 E. Court Street, Suite 1B, Flint, MI 48502 | Phone: 810-262.2320 | Email: lgolla1@hurleymc.com

1.6.d. MICAPT Support Staff

- MICAPT/McLaren Flint Academic Program Administrator I: Victoria (Tori) Gervais.
Phone: 810-342-3062 | Email: Victoria.gervais@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 relationship to the fellows.

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 meet regularly with their peer fellows either through the monthly peer lunch or other venues/methods to solicit feedback and discuss their 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. See Appendix B of this manual for a sample attendance log.

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 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 (www.mclaren.org or the APPIC website <https://www.appic.org/Internships/AAPL>) and provide the following materials on or before the application deadline, which is posted annually on the website (www.mclaren.org):

- 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 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. 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. Distance interviewing is available through zoom.

3.3.c.3.1. Travel Expenses. MICAPT does provide lodging for candidates.

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 (<https://www.apa.org/ethics/code>) 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 [Preparing Professional Psychologists to Serve a Diverse Public.docx](#)

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.

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 at their sponsoring institution 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 C 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 Self-Evaluation. 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 Self-Evaluation, 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 C). 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 allows fellows to evaluate their supervisors confidentially through an online evaluation form twice per year (February and August; see Appendix C), 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 Director of Medical Education. 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.b. Other Evaluations. The following evaluations will also be completed online through New Innovations (<https://www.new-innov.com/Login/Login.aspx>):

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 Program Assistant. 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 C 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.

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.

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 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.

3.9.a.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.

3.9.a.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.

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 generally 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 by the sponsoring institution (see instructions specific to your institution). 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.

4.1.c. Neuropsychological Testing. Currently, the fellowship program has adjunct faculty who practice neuropsychology, including a board certified neuropsychologist and rehabilitation psychologist (ABPP-RP, CN).

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 (e.g., neuropsychology). 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 the Covid-19 pandemic, most didactic training occurs virtually. 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. Fellows are expected to provide regular updates on their project to their faculty mentor. 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), 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.

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. MSU/FAME arranges faculty appointments for fellows and faculty 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 2020/2021 academic year stipend and benefits package is as follows:

McLaren-Flint CHP Fellows:

In **year 1**, they are given a stipend of **\$52,289** and in **year 2**, they are given a stipend of **\$53,185**. They are given a generous 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 McLaren Flint 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. Efforts are also made to host a winter MICAPT gathering. A MICAPT Graduation Party is also held annually in the summer, usually on the second Saturday in July. 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 (www.mclaren.org) 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 2020-2021 CHP Core Curriculum, Calendar & Didactic Description

Appendix B: Example of a Didactic Sign-in (Attendance Log) Sheet

Appendix C: MICAPT CHP Evaluations

- Supervisor Evaluation of Fellows
- Individualized Development Plan
- Fellow Self-Evaluation
- Fellow Evaluation of Supervisor
- Fellow Evaluation of Program
- Fellow Evaluation of MICAPT Seminar
- Senior Project Evaluation Form

APPENDIX A: MICAPT 2020-2021 Calendar & Didactic Descriptions

START OF YEAR 2							
Week	Dates	12:15-1:45PM	Presenter	2-4	Presenter	4-5	Presenter
0	8/31/2020	START OF FELLOWSHIP					
1	9/7/2020	HOLIDAY					
2	9/14/2020	Lunch & Intros	All	Didactic Orientation (2-3pm)	Carty & Vogel		
3	9/21/2020			FPMS 1	Vogel & Wolf	Lead & Mgt 1	Carty & Vogel
4	9/28/2020			Psychopharm 1	Kirkpatrick	Diversity Committee 1	O'Connor & Franklin
5	10/5/2020	Rehab Large	Stucky	FPMS 2	Vogel & Wolf		
6	10/12/2020	Rehab Large	Golla	Site Specific 1		Wellness	individual
7	10/19/2020	Rehab Large	Stucky	FPMS 3	Vogel & Wolf		
8	10/26/2020			Psychopharm 2	Kirkpatrick	Lead & Mgt 2	Vogel
9	11/2/2020			FPMS 4	Vogel & Wolf	Diversity Committee 2	O'Connor & Franklin
10	11/9/2020			Site Specific 2		Wellness	individual
11	11/16/2020			PC 1 (PC7 IPC)	Kirkpatrick & Vogel	Lead & Mgt 3	Vogel
12	11/23/2020	Fellow Lead Wellness					
13	11/30/2020			Psychopharm 3	Kirkpatrick	Diversity Committee 3	O'Connor & Franklin
14	12/7/2020	Rehab Large	Stucky	PC2 (ASMT 2 ADHD)	Meko/Ellens		
15	12/14/2020	Rehab Large	Golla	PC 3 (PC1 Common Ped Cor	Meko/Ellens	Wellness	individual
16	12/21/2020			Psychopharm 4	Kirkpatrick	Lead & Mgt 4	Vogel
17	12/28/2020	Rehab Large* (option	Golla				
18	1/4/2021	Rehab Large* (option	Stucky	Site Specific* (if needed)			
19	1/11/2021			PC 4 (PC 5 Time Limited Tx i	Kirkpatrick & Vogel	Diversity Committee 4	O'Connor & Franklin
20	1/18/2021			Site Specific 4		Wellness	individual
21	1/25/2021	Interview Day					
22	2/1/2021	Interview Day					
23	2/8/2021	Interview Day					
24	2/15/2021			PC 5 (PC6 Teaching Docs HR	Kirkpatrick & Vogel	Diversity Committee 5	O'Connor & Franklin
25	2/22/2021			Site Specific 5		Lead & Mgt 5 (virtual if n	Vogel
26	3/1/2021	Rehab Large	Golla	PC 6 (PC2 Pain Mgmt)	Kirkpatrick & Vogel	Wellness	individual
27	3/8/2021	Rehab Large	Stucky	Psychopharm 5	Kirkpatrick		
28	3/15/2021			PC 7 (PC3 Chronic Stress)	Kirkpatrick & Vogel	Diversity Committee 6	O'Connor & Franklin
29	3/22/2021			Psychopharm 6	Kirkpatrick	Lead & Mgt 6	Vogel
30	3/29/2021			CC 1	Nyman & Cederna-Meko		
31	4/5/2021	Rehab Large	Stucky	Site Specific 6		Wellness	individual
32	4/12/2021			CTI2	Nyman & Cederna-Meko	Diversity Committee 7	O'Connor & Franklin
33	4/19/2021	Rehab Large	Stucky	Psychopharm 7	Kirkpatrick		
34	4/26/2021	Wellness Event					

35	5/3/2021	Rehab Large	Stucky	CTI 3	Nyman & Cederna-Meko		
36	5/10/2021			CTI 4	Nyman & Cederna-Meko	Lead & Mgt 7	Vogel
37	5/17/2021			Site Specific 7		Wellness	individual
38	5/24/2021			Psychopharm 8	Kirkpatrick	Lead & Mgt 8	Vogel
39	5/31/2021	HOLIDAY					
40	6/7/2021			PROF 1	O'Connor	Diversity Committee 8	O'Connor & Franklin
41	6/14/2021	Rehab Large	Golla	Psychopharm 9	Kirkpatrick	Wellness	individual
42	6/21/2021			PROF 2	O'Connor	Diversity Committee 9	O'Connor & Franklin
43	6/28/2021			Site Specific 8			
44	7/5/2021	HOLIDAY					
45	7/12/2021			PROF 3	O'Connor		
46	7/19/2021			PROF 4	O'Connor	Diversity Committee 10	O'Connor & Franklin
47	7/26/2021	Diversity Field Trip (11)					
48	8/2/2021			PROF 5	O'Connor	Diversity Committee 12	O'Connor & Franklin
49	8/9/2021			Psychopharm 10	Kirkpatrick		
50	8/16/2021			Site Specific 9		Wellness	individual
51	8/23/2021			Site Specific 10		Wellness	individual
52	8/30/2021			Site Specific 11		Wellness	individual

MICAPT DIDACTICS | Clinical Health Psychology (CHP)/Core Curriculum

Schedule: Mondays (except holidays), 2:00-3:45 PM

Instruction Structure: The two-year curriculum is presented by four modules of topics specific to Clinical Health Psychology (CHP). Each module has its own coordinator(s) from Flint Area Fellowship (FAF) Faculty.

Fellow Guidelines: Fellows must attend all sessions. Fellows are expected to arrive on time, sign-in, and be engaged/actively involved in the sessions. For didactics presented via video conference (e.g., Zoom), fellows are expected to leave their video on throughout the session.

Evaluation: Fellows must complete an online seminar evaluation after each session.

The Four Modules:

- 1. Functioning as a Psychologist in a Medical Setting**, which includes a total of four sessions coordinated by Drs. Mark Vogel & Barbara Wolf.
- 2. Psychology in Primary Care & Health Related Behavior Change**, which includes a total of fourteen sessions coordinated by Drs. Heather Kirkpatrick & Mark Vogel. Each year, there are six lectures and a Journal Club.
- 3. Professionalism & Diversity**, which includes a total of twelve sessions coordinated by Dr. Erin O'Connor. Each year, there are five lectures and an annual field trip planned by the Diversity Committee.
- 4. Coping with Chronic Illness**, which includes a total of ten sessions coordinated by Drs. Scott Nyman & Crystal Meko. Each year, there are four sessions and a Journal Club.

#	Session	Presenter(s)	Description	Year
Functioning as a Psychologist in a Medical Setting				
1	Doctor-Patient Relations and Shadowing and Precepting	Vogel, Wolf	This session will review staging an interview for effective doctor patient relations. Shadowing is the direct observation of the clinical encounter. This session will introduce the psychologist role and techniques of teaching.	Both
2	Alphabet Soup	Vogel, Wolf	This session will give you a better understanding of how medical students come to be here on the Flint Campus, how residents arrive at their residency programs, and how faculty interact with both medical students and residents.	Both
3	CL: Working in a Medical Center & Ethics and Legal Issues	Wolf	The focus of this seminar is on the psychologists' role and responsibilities in managing hospital-based C-L service. This session will focus on an examination of legal and ethical issues when working in a medical setting. We will look at the differences between these terms. Additionally, the session will examine the principles of beneficence, nonmaleficence, fidelity/responsibility, justice, respect for dignity and rights, and integrity. Limits and scope of practice, confidentiality, boundaries, competency/ capacity evaluations, informed consent, conflict of interest, and privacy will be explored. Case examples will be used to illustrate issues.	Both
4	Book Review	Vogel, Wolf	This session reviews a book related to medicine and understanding the culture of medicine.	Both
Primary Care Psychology & Health Related Behavior Change				
1	Integrated Primary Care	Kirkpatrick & Vogel	Dr. Kirkpatrick and Dr. Vogel will present basic foundations of integrated primary care. Practical applications of this principle with many examples will be discussed.	One
2	ADHD Assessment in Primary Care	Cederna-Meko & Ellens	Assessing ADHD in a primary care setting will be discussed.	One
3	Common Pediatric Presentations in	Cederna-Meko & Ellens	Dr. Meko will present an overview of common pediatric consults that arise in the ambulatory office. The focus will be on brief assessment, intervention, and referral.	One

	Integrated Primary Care			
4	Time Limited treatments in IPC	Vogel	This session will review of common methods of short-term psychotherapy that have been designed for primary care sessions. After a review of the different theories with empirical supporting evidence, participants will examine how they might apply these interventions in primary care settings.	One
5	Teaching Physicians about Health-Related Behavior Change	Kirkpatrick	Through interactive discussion, techniques for teaching physicians about health behavior change will addressed.	One
6	Pain Management in Primary Care	Vogel	This session will examine common issues of pain that presents in primary care settings and the difficulties associated with treatment and management. A brief chronic pain evaluation will be discussed along with a stepped framework for intervention. Finally, and four step modules for helping patients better self-manage pain will be discussed and applied.	One
7	Chronic Stress	Kirkpatrick	An overview of stress-related diseases and coping, as well as review of social determinants of health and how they contribute to stress-related disease will be presented.	One
8	ACT in Primary Care	Vogel	Dr. Vogel will present the basic tenets of using ACT. He will then address using these techniques within the context of integrated primary care.	Two
9	Relaxation methods: The Advanced course	Kirkpatrick	Dr. Kirkpatrick will lead this workshop on using hypnotic and relaxation techniques to improve your clinical skill in working with patients who have anxiety, pain, or emotional dysregulation.	Two
10	Transference and countertransference	Kirkpatrick	Dr. Kirkpatrick will present challenges to the therapeutic relationship from a dynamic perspective. Inevitably, our patients can cause emotions to arise within us. And our patients certainly feel things about us. Strategies for managing these situations will be discussed.	Two
11	Chronic Pain	Kirkpatrick, Vogel	Dr. Vogel and Dr. Kirkpatrick will present strategies for address pain complaints from a systems-based practice in primary care. This is considered an advanced practice of psychology seminar. Emphasis will be on translating evidence based psychological techniques to physicians, and working within the politics of a highly charged faculty environment while advocating for good patient care.	Two
12	Smoking Cessation	Collings	Dr. Collings will present the model for robust smoking cessation/healthy lifestyle that is used at the VA. She will give concrete handouts and suggestions for working with patients who find it difficult to stop smoking.	Two
13	Health-related Behavior Change in Pediatric Population	Ellens	Through interactive case discussion, health related behavior changes in the pediatric patient will be addressed.	Two
14	Journal Club	Kirkpatrick, Vogel	A scholarly research article from a peer reviewed journal will be selected by the fellows for reading and discussion. Discussion will allow for a critical review of the article itself, the generalizability of the study, and the positive impacts the findings might hold for the work we do.	Both
Coping with Chronic Illness				
1	Diabetes Across the Lifespan: Physiological underpinnings and the role of psychologists in treatment and management	Nyman & guest physician speaker	Physiological overview of Diabetes, types I & II, followed by brief discussion of psychologists' roles within a transdisciplinary Diabetes treatment team. Guest speaker(s) from various specialties, if available, will present portions of this topic.	One

2	Community Crisis and Community Resilience: The Data, Developmental Impact, and Response to Flint's Water Based Lead Exposure	Cederna-Meko	Presentation outlining etiology, diagnosis, and response to Flint's water-based lead exposure, with review of statistical research tools to map areas of greatest concern. Sociological, medical, and psychological impact of the lead exposure crisis.	One
3	Coping with Chronic Illness in the Pediatric Population Part I	Cederna-Meko	This session reviews strategies unique to working with children and families, cognitive and social/emotional development of children, and how developmental level impacts coping and understanding of chronic conditions.	One
4	Palliative and Hospice Care	Expert Panel	This presentation will cover valuable information and considerations for clinical health psychologists regarding Palliative Care including a multidisciplinary panel.	One
5	Psychotherapy Concepts for Adolescents and Adults with Chronic Illness	Nyman	Presentation and discussion of Existential Psychotherapy	Two
6	Coping with Kidney Disease	Nyman & guest physician speaker	Physiological overview of kidney disease diagnosis, treatment, and the physical and emotional impact of living with, and treating, chronic kidney disease.	Two
7	Coping with Chronic Illness in the Pediatric Population Part II	Ellens	This session builds upon Part I to cover advanced strategies unique to working with children and families, cognitive and social/emotional development of children, and how developmental level impacts coping and understanding of chronic conditions.	Two
8	Chronic Illness Case Roundtable	Nyman & Cederna-Meko	An opportunity for discussion of chronic illness cases and ways psychologists can add meaningful contributions to patient outcome. Cases will be culled from the seminar presenter(s) and fellows.	Two
Professionalism and Diversity				
1	Clinical Supervision	O'Connor	This seminar will focus on how to ensure effective supervision of trainees. Psychologists' role as supervisor of fellows, interns, practicum students, as well as medical residents and students will be reviewed. Determining your supervisory style and understanding helpful approaches will be discussed.	One
2	Presenting & Publishing	O'Connor	Seminar will focus on providing fellows with information on presenting, publishing, authorship, and funding opportunities for their work.	One
3	Financial Advising	Guest speaker	A professional financial advisor will present information on managing student loan debt, retirement planning, investments, etc.	One
4	Diversity Topic	Franklin	Health Disparities in the U.S.	One
5	Diversity Topic	Champine	Discourse Analysis: Disability Issues in Healthcare	One
6	Understanding Ourselves in the Context of Diversity	Franklin	Seminar will focus on who you are and how that impacts your practice (individual identity and personal biases)	Two
7	Professional Ethics	O'Connor	Seminar will review the APA Code of Ethics and apply them to real life scenarios. The process of ethical decision-making within the medical setting and bioethics issues will be discussed. An interactive ethical decision-making exercise, the fishbowl, will be completed.	Two
8	Health Literacy	O'Connor	Seminar will examine literacy rates in our population. Content will include evaluation of health literacy and its impact on our patients, as well as interventions aimed at reducing the harmful effects of low literacy on health (teaching providers how to work with patients – documents at particular reading level, using	Two

			visual aids, teach-back technique, providing assistance with forms, etc.)	
9	Risk Management	Champine & Guest speaker	Seminar will focus on assessing and managing risk in psychological practice within the medical environment. High risk issues such as multiple relationship/boundary issues, management and documentation of potentially suicidal/homicidal or high-risk individuals, working with families and termination, HIPAA violations, etc. will be discussed.	Two
10	Professionalism and Diversity Book Club	O'Connor	Seminar will review a book selected by the fellows and discuss how it has furthered our understanding of diversity/professionalism issues, and is applicability to our work.	Both
11	Annual Diversity Field Trip	Various	Each year, a half day will be devoted to exploring a museum, participating in an event, etc., which broadens our understanding of diversity related issues. Specific locations of field trips will be determined each year.	Both

McLaren Flint MICAPT Didactic Sign-In sheet

Date:

Presenter/Lead:

Topic:

Series Type:

- Core Seminar Series
- Diversity Committee
- Leadership & Management
- Psychopharmacology
- Rehabilitation Series
- Wellness

McLaren Fellows

- Kayyali, Yousef
- Lenore, Samarea
- Miller, Kimberley
- Ramirez, Gabriela

McLaren Faculty

- Carty McIntosh, Jennifer
- Champine, Andrew
- Franklin, Nicole
- O'Connor, Erin
- Wolf, Barbara

Other (please free text below)

APPENDIX C: MICAPT Competency Based Evaluation Tool (MCBET)

ISP1: Integration of Science and Practice					
<ul style="list-style-type: none"> Understands and uses evidence-based approach to clinical health psychology practice that integrates the best available research, clinical expertise, and new and emerging health technologies. Demonstrates the ability to formulate and test empirical questions informed by clinical problems encountered, clinical services provided, and the clinical settings within which resident works. 					
Has not Achieved	NOVICE	ADVANCED BEGINNER	COMPETENT	PROFICIENT	EXPERT
	<p>Able to formulate empirical questions applicable to the clinical settings in which one works.</p> <p>Utilizes health information technology to search medical and psychological literature.</p> <p>With guidance, can discuss contribution of scientific literature to improve clinical practice.</p>	<p>Demonstrates an understanding of how to translate research findings into clinical practice.</p> <p>Understands common medical conditions, their treatments, and biomedical measures used to evaluate them.</p> <p>Aware of standard treatment guidelines and used these in clinical practice.</p> <p>Can critically evaluate scientific papers and their contribution to clinical health psychology practice.</p>	<p>Implements individual- or family-level evidence-based treatment interventions to treat health and mental health-related issues.</p> <p>Possesses a full range of knowledge regarding common medical conditions, their treatments, and biomedical measures used to evaluate them.</p> <p>Able to formulate and test empirical questions informed by clinical problems encountered, clinical services provided, and the clinical settings within which one works.</p> <p>Skillfully implements standard treatment</p>	<p>Uses evidence-based intervention and prevention programs to improve individual and systems functioning in areas beyond provision of mental health services (i.e., helping team systematically address glycemic control).</p> <p>Integrates evidenced based new and emerging health technologies into clinical health psychology practice.</p> <p>Monitors the field for new guidelines and evidence and seeks training as appropriate.</p> <p>Works as part of a research team that</p>	<p>Models the use of evidenced-based practice in supervision and training to facilitate learning in others</p> <p>Conducts research investigations to contribute to emerging science and practice</p>

			guidelines in clinical settings.	formulates and tests empirical questions informed by clinical problems	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

Summary ISP Competency Rating:

Has not achieved	Novice	Advance Beginner	Competent	Proficient	Expert
<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>

At 6-18 months: Fellow making progress toward meeting developmental expectation in this area of the Integration of Science and Practice competency?

Yes No N/A

At 24 months: Fellow meets competency in Integration of Science and Practice?

Yes No N/A

Ethical and Legal Standard

ELS1:

- Acts in accord with hospital, medical center, organization bylaws, credential privileges, and staffing responsibilities (e.g. documentation, attendance at staff meeting, etc.) as they pertain to postdoctoral residents.:

Has not Achieved	NOVICE	ADVANCED BEGINNER	COMPETENT	PROFICIENT	EXPERT
	<p>Demonstrates how to access organizational standards regarding conduct, policy, and individual responsibilities.</p> <p>Regularly attends organizational meetings as required.</p> <p>Engages in timely and appropriate completion of documentation as required.</p>	<p>Adheres to organizational standards regarding conduct, policy, and individual responsibilities.</p> <p>Occasionally provides relevant contributions during organizational meetings.</p> <p>Addresses ethical and legal issues related to documentation within the context of supervision.</p>	<p>Independently demonstrates complex knowledge of organizational standards, conduct, policy, and staff responsibilities within the clinical health psychology role.</p> <p>Regularly offers suggestions during organizational meetings.</p> <p>Independently produces quality documentation that appropriately considers ethical and legal factors.</p>	<p>Understands and educates others about organizational standards, conduct, policy, and staff responsibilities in various roles.</p> <p>Demonstrates the ability to engage others and influence the direction of organizational meetings.</p> <p>Reviews and critiques the quality of others documentation and can anticipate ethical and legal concerns.</p>	<p>Participates in the development of organizational standards, conduct, policy, and staff responsibilities.</p> <p>Leads organizational meetings.</p> <p>Provides expert level consultation to the organization.</p>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

At 6-18 months: Fellow making progress toward meeting developmental expectation in Ethical and Legal Standard competency?

Yes No N/A

At 24 months: Fellow meets competency in Ethical and Legal Standard?

Yes No N/A

ELS2: Recognizes and manages ethical and legal issues with respect to self, the profession, and other health care team members.

- Recognizes and manages ethical and legal issues that arise during clinical health psychology professional service, training, and research activities.
- Recognizes and manages conflicts when they arise between the ethical code for a clinical health psychologist (i.e., APA Ethical Principles of Psychologist and Code of Conduct) and ethical codes of other health care team members.

Has not Achieved	NOVICE	ADVANCED BEGINNER	COMPETENT	PROFICIENT	EXPERT
	<p>Demonstrates knowledge of basic ethical standards outlined in the APA Code of Conduct.</p> <p>Willing to explore ethical conflicts identified by supervisor.</p>	<p>Utilizes supervision to reflect on ethical and legal issues that arise during clinical health psychology service, training, and research activities.</p> <p>Has a cursory awareness of potential ethical and legal issues in one’s own professional conduct</p> <p>Able to articulate how one’s own professional conduct adheres to the ethical standards in the APA Code of Conduct when prompted.</p>	<p>Adheres to the ethical standards in the APA Code of Conduct.</p> <p>Able to quickly recognize ethical and legal issues related to health psychology when they arise.</p> <p>Can resolve ethical conflicts from at least a singular perspective or based on a concrete decision making process/protocol.</p> <p>Able to appreciate differences between different professions’ ethical guidelines.</p>	<p>Able to independently identify and manage competing ethical principles.</p> <p>Has an ethical framework supported by theory to manage ethical and legal issues</p> <p>Recognizes conflicts when they arise between clinical health psychology and ethical codes of other health care team members.</p> <p>Can anticipate situation specific ethical and legal issues.</p> <p>Can generate multiple solutions from varying perspectives to resolve.</p>	<p>Provides sound ethical guidance and instruction to supervisees and/or peers.</p> <p>Can anticipate hypothetical ethical and legal issues at various levels.</p> <p>Can adopt multiple perspectives (from different disciplines) and execute various solutions to resolve ethical and legal conflict.</p>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:					

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Summary ELS Competency Rating:

Has not achieved	Novice	Advance Beginner	Competent	Proficient	Expert
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

At 6-18 months: Fellow making progress toward meeting developmental expectation in Ethical and Legal Standard competency?
 Yes No N/A

At 24 months: Fellow meets competency in Ethical and Legal Standard?
 Yes No N/A

Individual and Cultural Diversity

ICD1: <ul style="list-style-type: none"> Demonstrates awareness of and integrates cultural factors in understanding and management of self, others, and relationships. 										
Has not Achieved	NOVICE		ADVANCED BEGINNER		COMPETENT		PROFICIENT		EXPERT	
	<p>Under supervision can identify own cultural background and diversity related factors.</p> <p>With direction, appreciates the impact that own cultural factors play in interactions with patients, colleagues, and the healthcare system.</p>		<p>Able to regularly and independently consider one’s own cultural background in the context of clinical work.</p> <p>Aware of diversity characteristics in others, including patients and health care providers, and views them as cultural beings across a number of diversity-related characteristics.</p> <p>Appreciates the impact cultural factors have on others’ decision-making, values, and healthcare, including healthcare disparities.</p>		<p>Regularly incorporates cultural factors into case conceptualization and treatment.</p> <p>Develops effective and productive relationships with diverse individuals, families, and groups.</p> <p>Selects and utilizes culturally appropriate evaluations and interventions within a clinical health psychology setting.</p>		<p>Encourages health care team to consider diversity factors in medical treatment.</p> <p>Demonstrates a high level of cultural humility, which includes appreciating the complexity of various cultures, and the lifelong learning and development of this domain.</p>		<p>Able to effectively teach others about cultural diversity.</p> <p>Is engaged in community based interventions to promote cultural diversity and enhance larger systems’ and populations’ health, including access to healthcare.</p>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:										

At 6-18 months: Fellow making progress toward meeting developmental expectation in Individual and Cultural Diversity competency?

Yes No N/A

At 24 months: Fellow meets competency in Individual and Cultural Diversity?

Yes No N/A

ICD2:

- Selects, implements, and monitors prevention, assessment, and intervention efforts based on knowledge of diversity-related characteristics, including health belief models and attitudes towards health and wellness.

Has not Achieved	NOVICE	ADVANCED BEGINNER	COMPETENT	PROFICIENT	EXPERT
	Aware that there are a variety of assessments and interventions which have differing levels of appropriateness for use within different cultures/populations.	<p>Selects appropriate assessments and interventions which are culturally sensitive.</p> <p>Demonstrates knowledge of factors that influence health care and access to health care (e.g., developmental, cultural, socioeconomic, religious, sexual orientation)</p> <p>Open to direction regarding modification of assessment and intervention when linguistic, visual, hearing, and any other interpreters/accommodations are needed.</p>	<p>Consistently implements appropriate interventions which are culturally sensitive and meet the needs of diverse populations.</p> <p>Attempts to apply health belief model to patients when explicit.</p> <p>Consistently and independently modifies assessment and intervention when linguistic, visual, hearing, and any other interpreters/accommodations are needed.</p>	<p>Demonstrates a robust understanding of health belief models.</p> <p>Integrates health belief models and attitudes into care of patients.</p> <p>Able to effectively teach others about culturally appropriate assessment and interventions.</p>	<p>Provides education to others on health belief models and other diversity-related factors.</p> <p>Participates in research to modify or develop culturally specific assessments, interventions.</p>

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:									
At 6-18 months: Fellow making progress toward meeting developmental expectation in Individual and Cultural Diversity competency? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A									
At 24 months: Fellow meets competency in Individual and Cultural Diversity? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A									

ICD3:

- Accounts for the relations between environmental, social, health disparity, and cultural factors on the development and maintenance of health problems.

Has not Achieved	NOVICE	ADVANCED BEGINNER	COMPETENT	PROFICIENT	EXPERT
	<p>With the assistance of supervision, aware of the concept of health disparities.</p> <p>Actively seeks out more information and education on environmental, social, and cultural factors' effects on healthcare.</p>	<p>Appreciates how health disparities and other culturally-related systemic factors play a role in treating health conditions.</p>	<p>Displays an understanding of the specific or common disparities seen in the local population.</p> <p>Implements appropriate prevention efforts in order to minimize disparities and provide optimal healthcare for all populations.</p> <p>Incorporates local population-based information and research findings in the provision of health care service.</p>	<p>Develops effective methods for combating health disparities.</p> <p>Regularly addresses environmental, social, and cultural factors in own work.</p> <p>Joins local and/or regional efforts to address health disparities.</p>	<p>Able to effectively teach others about systemic issues related to cultural diversity, particularly regarding health disparities.</p> <p>Provides education to others in both formal and informal (curb-side consultation/conversations) manner on minimizing disparities and enhancing healthcare within a diverse population.</p>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

At 6-18 months: Fellow making progress toward meeting developmental expectation in Individual and Cultural Diversity competency?

Yes No N/A

At 24 months: Fellow meets competency in Individual and Cultural Diversity?

Yes No N/A

ICD4:

- Pursues professional development, continuing education, and multicultural experiences to enhance knowledge of individual and cultural diversity.

Has not Achieved	NOVICE	ADVANCED BEGINNER	COMPETENT	PROFICIENT	EXPERT
	Aware that there are experiences available to enhance knowledge of cultural diversity, and shows an interest in pursuing them.	Has identified specific individual goals related to enhancing multicultural knowledge, cultural diversity, and cultural humility.	Participates in professional development and/or continuing education on topics related to cultural diversity, multiculturalism, and cultural humility.	Has adequately achieved goals related to professional development in the area of cultural diversity. Can demonstrate acquisition of knowledge and skills related to multiculturalism and cultural humility.	Provides professional development to others on cultural diversity, multiculturalism, and/or cultural humility. On a national level, disseminates knowledge to others regarding cultural humility.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

Summary ICD Competency Rating:

Has not	Novice	Advance	Competent	Proficient	Expert
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achieved		Beginner			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

At 6-18 months: Fellow making progress toward meeting developmental expectation in Individual and Cultural Diversity competency?
 Yes No N/A

At 24 months: Fellow meets competency in Individual and Cultural Diversity?
 Yes No N/A

Research and/or Program Evaluation

RPE1: Applies scientific methods from psychology and related health disciplines to examine biopsychosocial processes as they relate to health promotion, illness prevention, or disease progression or maintenance.									
Has not Achieved	NOVICE	ADVANCED BEGINNER		COMPETENT		PROFICIENT		EXPERT	
	Gains exposure to health-related research methods and applied clinical research areas through literature review and didactics	Demonstrates ability to summarize findings of Clinical Health Psychology research literature		Demonstrates ability to critically evaluate relevant health and behavior research		Demonstrates ability to conduct scientifically rigorous research individually and within a research team		Applies diverse methodologies to scientifically examine biopsychosocial processes as they relate to health promotion, illness prevention, and/or disease progression	
		Demonstrates familiarity with health-related research methods		Uses research skills for development of empirical studies, program development, and/or quality improvement in health care settings		Develops empirical studies with sufficient rigor to submit for publication		Leads an interdisciplinary research team	
						Teaches and provides guidance on basic research methodologies with other learners.		Gains knowledge regarding research funding options and demonstrates capability of participating in grant writing process	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:									

At 6-18 months: Fellow making progress toward meeting developmental expectation in Research and/or Program Evaluation competency?

Yes No N/A

At 24 months: Fellow meets competency in Research and/or Program Evaluation?

Yes No N/A

RPE2: Analyzes data from a research or program evaluation project that evaluates the effectiveness or quality of clinical health psychology services within health care settings and communicates findings clearly.

Has not Achieved	NOVICE	ADVANCED BEGINNER	COMPETENT	PROFICIENT	EXPERT
	<p>Demonstrates general awareness of different data analytic strategies</p> <p>Recognizes that different strategies are applied depending on the research question</p>	<p>With assistance and/or supervision, demonstrates ability to select and apply data analytic strategies</p> <p>With assistance, communicates research, quality improvement, or program evaluation findings in ways that can be understood by other psychologists</p>	<p>With assistance and/or supervision, demonstrates ability to conduct data analysis and interpret results</p> <p>Effectively communicates research, quality improvement, or program evaluation findings in ways that can be understood by psychologists and professionals from other disciplines</p>	<p>Independently conducts appropriate data analysis and effectively interprets results</p> <p>Accurately communicates research, quality improvement, or program evaluation findings in ways that can be understood by professionals from other disciplines and lay audiences</p>	<p>Demonstrates ability to teach selection and application of data analytic strategies and interpretation of results</p> <p>Skillfully and efficiently models/teaches ways to communicate research, quality improvement, or program evaluation findings to different audiences</p>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:					
Summary RPE Competency Rating:					

Has not achieved	Novice	Advance Beginner	Competent	Proficient	Expert
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

At 6-18 months: Fellow making progress toward meeting developmental expectation in Research and/or Program Evaluation competency?
 Yes No N/A

At 24 months: Fellow meets competency in Research and/or Program Evaluation?
 Yes No N/A

Professional Values and Attitudes

PVA1: Develops and grows with respect to professional identity

- Demonstrates an emerging professional identity as a clinical health psychologist who understands unique contributions of clinical health psychology to health care.
- Demonstrates awareness of issues and challenges unique to working in health care settings and systems.

Has not Achieved	NOVICE	ADVANCED BEGINNER	COMPETENT	PROFICIENT	EXPERT
	<p>Aware of the history of clinical health psychology and common arenas of clinical work.</p> <p>Familiar with the biopsychosocial model.</p> <p>Seeks exposure to more diverse areas of clinical health psychology practice.</p> <p>Basic awareness of challenges to working in health care system</p>	<p>Able to articulate to patients or other professionals how one’s clinical skills uniquely contribute to the team.</p> <p>Able to integrate knowledge of the biopsychosocial model within one’s clinical work.</p> <p>Demonstrates awareness of differences in training and focus of other health professionals.</p> <p>Observes and comprehends issues and challenges unique to working in health care settings when directed by supervisor</p>	<p>Recognizes both the unique contributions and limitations of clinical health psychology skills in working with patients.</p> <p>Successfully provides assessments and interventions that complement the contributions of other team members.</p> <p>Assists others, or demonstrates interest in leadership opportunities that promote involvement of psychologists in medical settings.</p> <p>Is able to predict and manage issues that regularly occur in the intersection of psychology and health care settings</p>	<p>Advocates for patients or programs from a psychological perspective.</p> <p>Works at an organizational or local level to advocate for the contribution of health psychology</p> <p>Can fluidly manage challenges unique to working as a clinical health psychologist in a medical setting.</p>	<p>Able to mentor others in development of clinical health psychology professional identity.</p> <p>Fluidly negotiates the role of health psychologist in treatment teams while recognizing unique areas for oneself to contribute.</p> <p>Works at a national level to define the identity and culture of clinical health psychology.</p>

									Is able to model the successful management of challenges unique to practicing clinical health psychology in a medical setting.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:									
At 6-18 months: Fellow making progress toward meeting developmental expectation in Professional Values and Attitudes competency? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A									
At 24 months: Fellow meets competency in Professional Values and Attitudes? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A									

PVA2: <ul style="list-style-type: none"> Engagement in ongoing self-assessment of competencies in clinical health professional activities 					
Has not Achieved	NOVICE	ADVANCED BEGINNER	COMPETENT	PROFICIENT	EXPERT
	Recognizes the need for self-assessment of competencies related to clinical health psychology.	With supervision, can identify strengths and opportunities for growth in competency.	Independently able to seek out and engage in ongoing self-assessment of professional activity skills/development	Effectively develops a growth plan based on self-assessment of strengths and weaknesses in	Skillfully coaches others and models ongoing self-assessment of leadership and

	Open to supervisor's assessment of competencies in clinical health professional activities.	Open to growth opportunities to expand one's competency in professional activities.	Actively seeks out and incorporates feedback from one or two supervisors or colleagues regarding competency in professional activities	professional development. Regularly asks for and incorporates feedback from multiple sources (supervisors, colleagues) regarding competency in professional activities	professional activities.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:					
At 6-18 months: Fellow making progress toward meeting developmental expectation in Professional Values and Attitudes competency? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A					
At 24 months: Fellow meets competency in Professional Values and Attitudes? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A					

PVA3:					
<ul style="list-style-type: none"> Applies scientific knowledge and skills in clinical health psychology to advocate for needs of individuals/groups across systems and to advocate for equity and access to quality care. 					
Has not Achieved	NOVICE	ADVANCED BEGINNER	COMPETENT	PROFICIENT	EXPERT
	With close supervision, can begin to utilize knowledge of clinical health psychology in individual advocacy efforts (e.g., for an assigned patient).	Able to apply knowledge and skills in clinical health psychology to individual advocacy for clinical cases when advocacy is clearly indicated.	Is able to independently work towards effective advocacy for the needs of individuals and groups. Advocates for equity and access to quality clinical health psychology care for	Works at the system level to increase equity and access to quality care. Mentors other with respect to advocacy needs and strategies	Advocates at a regional or national level to increase issue of equity and access to multiple facets of health care.

	Aware of importance of advocacy for equity and access to quality care.			the majority of one's treatment population.		Recognizes that competing interests of different stakeholders in the health care system (e.g., patients, providers, payers, employers and government)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

Summary PVA Competency Rating:

Has not achieved	Novice	Advance Beginner	Competent	Proficient	Expert
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

At 6-18 months: Fellow making progress toward meeting developmental expectation in Professional Values and Attitudes competency?

Yes No N/A

At 24 months: Fellow meets competency in Professional Values and Attitudes?

Yes No N/A

Management/Administration and Leadership

MAL1:

- Communicates effectively and develops productive relationships with peers, trainees, supervisors, other professionals, and members of the community.

Has not Achieved	NOVICE	ADVANCED BEGINNER	COMPETENT	PROFICIENT	EXPERT
	<p>Recognizes that effective relationships are important to productive treatment teams</p> <p>Understands the importance of the health care team and shows respect for the skills and contributions of others.</p>	<p>Communicates collaboratively with the health care team by listening attentively, and sharing information</p> <p>Consistently shows a willingness to listen to different viewpoints and takes steps to ensure understanding has taken place.</p> <p>With supervision demonstrates consultative exchange that includes clear expectations and timely, appropriate exchange of information.</p>	<p>Maintains effective relationships with the majority of one's colleagues.</p> <p>Creates a non-judgmental, safe environment to actively engage colleagues to share information and their perspectives.</p> <p>Provides and receives constructive feedback with the health care team.</p> <p>Demonstrates consultative exchange that includes clear expectations and timely, appropriate exchange of information.</p>	<p>Connects with colleagues in a continuous manner that fosters trust, respect, and understanding, including the ability to manage conflict.</p> <p>Sustains collaborative working relationships during complex and challenging situations, including transitions of care.</p> <p>Effectively negotiates and manages conflict among members of the health care team in the best interest of the patient.</p> <p>Skillfully coaches/mentors trainees at various levels and other members of the medical community.</p>	<p>Role models effective, continuous, personal relationships that optimize the well-being of the work environment and the broader community</p> <p>Role models effective collaboration with other providers that emphasizes efficient patient-centered care.</p>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

At 6-18 months: Fellow making progress toward meeting developmental expectation in Management/Administration and Leadership competency?
 Yes No N/A

At 24 months: Fellow meets competency in Management/Administration and Leadership?

Yes No N/A

MAL2: Able to develop or enhance a clinical health psychology practice, educational program, or program of research.

Has not Achieved	NOVICE	ADVANCED BEGINNER	COMPETENT	PROFICIENT	EXPERT
	Describes basic program components of effective clinical health psychology practice, training, and research (i.e. rounds, clinical practice, lectures, etc.).	Identifies pros and cons of various clinical health psychology practice, training, and research models. Recognizes inefficiencies, inequities, variation, and quality gaps in clinical health psychology care delivery, training, and research. Initiates or collaborates in research to fill knowledge gaps in clinical health psychology.	Conducts a needs assessment that employs both a focus on the needs of the health care system and the perceived needs of patients and their families. Participates in a quality improvement project for continuous review and comparison of clinical health psychology practice, educational program or research.	Establishes protocols for continuous review and comparison of clinical health psychology educational program and implements changes to address areas needing improvement. Develops and implements standards for evaluating behavioral health care providers in the health care setting. Has a systematic approach to track and pursue emerging clinical, education, and research questions	Works with organizational leaders to ensure appropriate resources are available for an effective clinical health psychology practice, educational program, or research. Creates business plans that track costs and quality associated with integration of behavioral health care within the health care environment.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

At 6-18 months: Fellow making progress toward meeting developmental expectation in Management/Administration and Leadership competency?

Yes No N/A

At 24 months: Fellow meets competency in Management/Administration and Leadership?

Yes No N/A

MAL3: Conducts the business of a health psychology practice, educational program, and/or research management using knowledge of the structure, regulation, and financing of the health care system.

Has not Achieved	NOVICE	ADVANCED BEGINNER	COMPETENT	PROFICIENT	EXPERT
	<p>Aware of chains of communication and organizational structure within health care system.</p> <p>Knowledge of organizational mission of current health care system.</p> <p>Aware of how clinical health psychologists fit with in the broader health care organizational structure.</p>	<p>Knowledgeable of technological advances (e.g. telemedicine, mobile applications) and, with supervision, can describe how these factors influence management of clinical health psychology practice, research, and educational programs.</p> <p>Understands electronic coding and management of electronic records.</p> <p>With guidance, understands and uses psychotherapy, assessment, and Health and Behavior Codes when applicable.</p>	<p>Collaborates in organizational change within one's own department or section.</p> <p>Understands methods and principles of recruiting, selecting and retaining appropriate staff for clinical health psychology clinical and training programs.</p> <p>Identifies and can describe various financing models of the health care system (e.g. private and public insurance, capitated care).</p> <p>Skillfully and efficiently uses the electronic medical records and coding for documentation.</p>	<p>Able to facilitate organizational change within one's own department or section.</p> <p>Recruits and retains appropriate staff to provide behavioral health care services and/or training programs.</p> <p>Develops policy and procedures manuals for a clinical health psychology practice, educational, or research program.</p> <p>Models and teaches others about efficient and effective use of the electronic medical record.</p>	<p>Able to enact organizational change within complex health care systems.</p> <p>Successfully manages a budget of an interdisciplinary practice, research, or educational project.</p> <p>Monitors income and expenses to assure the practice lives within its annual budget.</p> <p>Provides systemic consultation to troubleshoot and enact improvements in the electronic medical records that integrates clinical health psychology</p>
□	□	□	□	□	□

Comments:

At 6-18 months: Fellow making progress toward meeting developmental expectation in Management/Administration and Leadership competency?

Yes No N/A

At 24 months: Fellow meets competency in Management/Administration and Leadership?

Yes No N/A

MAL4: Demonstrates leadership within an interprofessional team or organization in the health care setting (e.g., coordinating data collection for an interdisciplinary research project, team leadership, leadership of a committee).

Has not Achieved	NOVICE	ADVANCED BEGINNER	COMPETENT	PROFICIENT	EXPERT
	<p>Recognition of own role in creating policy, participation in system change, and management structure.</p> <p>Knowledge of theories of effective management and leadership.</p>	<p>Implements procedures to accomplish goals and objectives.</p> <p>Applies theories of effective management and leadership to form an evaluation of organization.</p> <p>Identifies strengths and weaknesses of management and leadership or organization.</p> <p>Provides input and participates in organizational assessment.</p>	<p>Coordinating data collection for an interdisciplinary clinical or research project.</p> <p>Participates and provides in-service and continuing education offerings to maintain and improve skills of providers</p> <p>Can apply team-building and motivational skills to enhance team functioning.</p> <p>Demonstrates leadership skills within interprofessional teams in the health care environment.</p>	<p>Integrates talents and skills of professionals from different disciplines and different levels of training (e.g., masters, doctoral) to optimize treatment</p> <p>Coordinates in-service and continuing education offerings to maintain and improve skills of providers.</p> <p>Serves as a liaison between various groups on a health care project and/or research.</p>	<p>Administers clinical programs that fully utilize the skills of the providers hired to be part of the treatment team.</p> <p>Plans and implements ongoing in-services and continuing education offerings to maintain and improve skills of providers.</p> <p>Role models actions to be effective manager or leader appropriate to the specifics of the organization</p>

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

Summary PVA Competency Rating:

Has not achieved	Novice	Advance Beginner	Competent	Proficient	Expert
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

At 6-18 months: Fellow making progress toward meeting developmental expectation in Management/Administration and Leadership competency?

Yes No N/A

At 24 months: Fellow meets competency in Management/Administration and Leadership?

Yes No N/A

Assessment

AST1: Select and applies evidence-based biopsychosocial assessment methods appropriately for the patient’s physical illness, injury, or chronic health condition/disability and collects relevant data using multiple sources and methods appropriate for identified presenting problems and assessment question					
Has not Achieved	NOVICE	ADVANCED BEGINNER	COMPETENT	PROFICIENT	EXPERT
	<p>With supervision is able to identify what the biopsychosocial model is and how it translates in a health psychology setting.</p> <p>Communicates effectively with the patient to gather information.</p> <p>With supervision selects, administers, scores, and interprets assessment tools within the patient population.</p>	<p>With minimal supervision, can begin to utilize the knowledge of the biopsychosocial model and apply it to gathering pertinent patient information.</p> <p>Identifies the presenting problem(s).</p> <p>With minimal supervision identifies how a patient’s physical illness, injury, or chronic health effects treatment outcome.</p> <p>Comfortably asks questions that address the biological, psychological, and social factors of the patient.</p>	<p>Identifies appropriate interventions based on the assessment of the presenting problem.</p> <p>Independently selects, administers, scores, and interprets appropriate assessment tools.</p> <p>Skillfully conducts a mental status exam when indicated.</p>	<p>Effectively integrates and problem solves multiple factors that contribute to patients presenting symptoms from a biopsychosocial frame.</p> <p>Demonstrates the ability to multi-task effectively while still gathering pertinent data (i.e., crisis) teaching medical students, medical residence, and interacting with other treatment team members.</p> <p>Skillfully uses a wide range of assessment tools, including those specific to clinical health psychology</p>	<p>Applies knowledge and skill set on effective communication and information gathering to other specialties within medicine to adequately assess the patient.</p> <p>Demonstrates understanding and incorporates the knowledge of environmental and systemic factors related to presenting problem.</p> <p>Models and teaches evidence based biopsychosocial assessment methods.</p>

								Serves as a consultant for system level biopsychosocial assessment strategies.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:								
At 6-18 months: Fellow making progress toward meeting developmental expectation in Assessment competency? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A								
At 24 months: Fellow meets competency in Assessment? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A								

AST2: Able to utilize the biopsychosocial model effectively to interview and evaluate patients

- Conducts comprehensive biopsychosocial interviews; evaluates and incorporates objective biological and psychosocial findings related to physical health or illness, injury or disability, to inform case conceptualizations and recommendations.
- Assesses the biopsychosocial impact of undergoing medical procedures (e.g., screening, diagnostic and intervention/prevention procedures).

Has not Achieved	NOVICE	ADVANCED BEGINNER	COMPETENT	PROFICIENT	EXPERT
	<p>Is aware of biopsychosocial model in conducting interviews.</p> <p>With supervision, begins discussing components of the biopsychosocial model</p>	<p>With minimal supervision, conceptualizes common patient presentations from a biopsychosocial perspective</p> <p>Identifies pertinent problems, history, and environmental factors (e.g., mental health,</p>	<p>Independently gathers pertinent information from patient and multiple sources, (collateral, EMR, treatment team etc.)</p> <p>Conceptualizes complex patients with multi-comorbidities from a biopsychosocial</p>	<p>Helps treatment team appreciate the biopsychosocial conceptualization.</p> <p>Creatively demonstrates effective approaches to gather information from patients that may present</p>	<p>Conducts other opportunities of learning such as developing case studies/ presentations, to the medical and mental health field.</p>

	Demonstrate the ability to start a meaningful relevant conversation by identifying the key patient information	medications, legal, developmental, substance abuse, financial status, transportation, etc.) With minimal supervision is able to identify and incorporate additional sources to get biological and psychosocial findings as it relates to the patients recommendations and conceptualizations. Develops rapport with a wide variety of patients when interviewing.	perspective and identifies appropriate recommendations. Identifies how physical, behavioral, lifestyle, and psychological factors affect the patient's ability to function appropriately (i.e., sleep disturbances, pain, avoidance, guilt, poor memory, anhedonia). Understands the risk and benefits associated with various procedures and assesses patients' understanding same.	with challenges both medically and psychologically. Conducts interviews to assess the biopsychosocial impact of medical procedures, including screening for medical intervention procedures (e.g., pre-surgical evaluations.)	Models high level interviewing skills and provides constructive feedback to learners. Think beyond the medical setting in terms of effective treatment recommendations. Ability to organize information and symptoms hierarchically that reflects a deeper understanding of the problem.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

At 6-18 months: Fellow making progress toward meeting developmental expectation in Assessment competency?
 Yes No N/A

At 24 months: Fellow meets competency in Assessment?
 Yes No N/A

AST3: Communicate an accurate and effective oral and written documents assessment findings to patients and interprofessional healthcare team members.					
Has not Achieved	NOVICE	ADVANCED BEGINNER	COMPETENT	PROFICIENT	EXPERT

	<p>With supervision, can discuss and document general findings.</p> <p>Utilizes a genuine tone and is aware of nonverbal communication when speaking with patients.</p> <p>Communicates in an encouraging, positive, and non-judgmental manner.</p> <p>Respect the patient and their presenting problem.</p> <p>Has awareness of clinical interviewing models techniques, and the components of a mental status exam.</p>	<p>With minimal supervision, can verbally report findings and document in a clear specific and concise manner.</p> <p>With minimal supervision, can identify symptoms, discuss symptoms in detail and document relevant information.</p> <p>With minimal supervision demonstrates ability to concisely summarize pertinent patient information in the medical record.</p>	<p>Ability to communicate the results of assessments to both professional and lay audiences in the health care setting</p> <p>Modifies language appropriately when communicating assessment findings and results to specific audiences (i.e., free of psychological/ medical jargon).</p> <p>Maintains clear, concise, and accurate documentation communicating assessment findings.</p>	<p>With challenging cases, can present objective findings to interprofessional team members.</p> <p>Regularly engages in collaborative treatment planning with patients and other health professionals when communicating assessment findings.</p> <p>Establishes rapport with patients to the degree that patients accept challenging health information, unanticipated results, or complex diagnoses.</p>	<p>Models skillful communication of findings to patient and professionals.</p> <p>Teaches how to share diagnostic information with patients.</p> <p>Contributes to the evidence based knowledge around health care communication.</p> <p>Seek to close gaps in ability to communicate with specific patient populations (e.g., sign language, Spanish, mandarin).</p>
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Comments:

Summary AMT Competency Rating:

Has not achieved	Novice	Advance Beginner	Competent	Proficient	Expert
■	■	■	■	■	■

At 6-18 months: Fellow making progress toward meeting developmental expectation in Assessment competency?

Yes No N/A

At 24 months: Fellow meets competency in Assessment?

Yes No N/A

Intervention

Int1: Development and implementation of biopsychosocial evidence-based interventions within the continuum of care.

- Accesses, evaluates, utilizes, and integrates biopsychosocial information in designing and implementing treatment, disease management, health promotion, or prevention interventions; using new and emerging health technologies when applicable/available.
- Implements evidence-based biopsychosocial interventions to treat or prevent health and behavioral health-related issues of patients and, when applicable populations.

Has not Achieved	NOVICE	ADVANCED BEGINNER	COMPETENT	PROFICIENT	EXPERT
	<p>With the assistance of supervision, is able to access and evaluate basic biopsychosocial information in the development of treatment planning and delivery of intervention.</p> <p>Is aware of evidence based treatment techniques for the treatment and prevention of behavioral health related issues.</p>	<p>Begins to independently access, evaluate, and utilize biopsychosocial information in designing and implementing treatment plans.</p> <p>Demonstrates basic knowledge of health promotion and disease prevention interventions.</p> <p>Can describe and select evidence based treatment techniques for common clinical health psychology issues.</p>	<p>Fully integrates biopsychosocial information in designing and implementing treatment autonomously.</p> <p>Is able to identify current EBP regarding patient’s biopsychosocial needs and the care continuum.</p> <p>Is able to apply evidence based treatment techniques successfully in practice.</p>	<p>Can integrate and communicate to other team members the purpose of biopsychosocial intervention (e.g. moderators and mediators impacting health and well-being).</p> <p>Demonstrates an advanced knowledge of the continuum of care.</p> <p>Considers the entire continuum of care and tailors various forms of biopsychosocial intervention to individual patient needs.</p> <p>Can identify emerging health technologies</p>	<p>Able to educate others through utilization of sophisticated models of biopsychosocial integration that informs treatment development and health promotion.</p> <p>Can appropriately/consistently utilize emerging health technologies in the design and implementation of treatment interventions and health promotion.</p>

								relevant to disease management and health promotion	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:									
At 6-18 months: Fellow making progress toward meeting developmental expectation in Intervention competency? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A									
At 24 months: Fellow meets competency in Intervention? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A									

12:					
<ul style="list-style-type: none"> Evaluates, selects, and administers appropriate biopsychosocial assessments to monitor and evaluate the process and outcomes of treatment for patients and, when applicable, populations. 					
Has not Achieved	NOVICE	ADVANCED BEGINNER	COMPETENT	PROFICIENT	EXPERT
	<p>Is aware of basic biopsychosocial assessment principles.</p> <p>Aware of common psychological assessment instruments (PHQ, GAD-7, SF-36, etc.).</p> <p>With guidance, can assess social, cultural, financial, familial or environment factors that facilitate or inhibit health functioning</p>	<p>Recognizes names of common psychotropic medications</p> <p>Understands meanings of common medical assessments and results (e.g., BP, HbA1c)</p> <p>Uses common psychological and social assessment strategies in working with patients (e.g., PHQ-9, CAPQ Pain scale, Columbia Suicide Scale, MMSE).</p>	<p>Skillfully and independently selects, evaluates, and uses common psychological and social assessment strategies for working with patients (e.g., PHQ-9, CAPQ Pain scale, Columbia Suicide Scale, MMSE).</p> <p>Recognizes and understands both common medical conditions and their treatments (pharmacologic and procedural)</p>	<p>Demonstrates efficiency in utilizing biological, psychological, and social assessment in work with individuals.</p> <p>Guides practice of interdisciplinary teams with regard to biopsychosocial assessment of individuals and programs (e.g., health adherence, screening measures).</p>	<p>Participates in research or professional societies addressing use of appropriate biopsychosocial assessment measures.</p> <p>Helps systems identify and implement appropriate biopsychosocial assessment</p>

		Considers broader assessments of environmental factors known to promote health and health care utilization.	Able to assess bio- psychosocial and behavioral risk factors for development of physical illness, injury or disability (e.g., tobacco use, social support). Able to thoroughly evaluate patients using evidenced based treatment guidelines for suitability for medical interventions (e.g., bariatric evaluations, spinal cord stimulator evaluations).	Models for others how to skillfully integrate biopsychosocial assessment on both individuals and programmatic projects.	principles in improving health outcomes, while also addressing cost-efficiency.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:					
<p>At 6-18 months: Fellow making progress toward meeting developmental expectation in Intervention competency? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A</p> <p>At 24 months: Fellow meets competency in Intervention? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A</p>					

Int4: Monitors and promotes adherence to treatment interventions across health care

- Monitors adherence to medical treatment and psychological interventions and demonstrates skill in addressing health behaviors to improve adherence.

Has not Achieved	NOVICE	ADVANCED BEGINNER	COMPETENT	PROFICIENT	EXPERT
	<p>With guidance, can identify issues related to nonadherence in own patients and willing to discuss potential strategies for addressing said issues.</p>	<p>Can independently identify patients with whom nonadherence has become a challenge, and attempts to intervene with basic skills in an effort to improve adherence.</p> <p>Can appreciate challenges with adherence across various fields (i.e., medicine and psychology).</p>	<p>Effectively engages patients in discussion and interventions which improve adherence.</p> <p>Able to provide recommendations for other team members on strategies/interventions for improving adherence to health care plan.</p> <p>Actively collaborates with physicians to improve adherence with shared patients.</p>	<p>Appreciates the complexity of nonadherence, including patient, provider, and systems contributions.</p> <p>Engages in self-reflection and performance-based learning and improvement in order to address self/provider contributions to nonadherence in patients.</p>	<p>Teaches others about nonadherence as a complex, multifaceted construct, and includes effective interventions, promoting collaborative care.</p> <p>Actively participates in systems-based interventions, such as quality improvement projects and hospital committees, in order to reduce nonadherence rates in the overall health care system.</p>

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Comments:

Summary INT Competency Rating:

Has not achieved	Novice	Advance Beginner	Competent	Proficient	Expert
<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>

At 6-18 months: Fellow making progress toward meeting developmental expectation in Intervention competency?

Yes No N/A

At 24 months: Fellow meets competency in Intervention?

Yes No N/A

Teaching and Supervision

TAS1: Provides effective teaching activities for clinical health psychology concepts and practices or methods and procedures for health-related research to other health care professions (i.e., interprofessional education).					
Has not Achieved	NOVICE	ADVANCED BEGINNER	COMPETENT	PROFICIENT	EXPERT
	<p>Recognizes the importance of being familiar with and able to teach concepts and practices from the Clinical Health Psychology literature</p> <p>Recognizes the need to translate relevant evidence-based Clinical Health Psychology concepts and practices OR methods and procedures for health-related research with language that is understandable by other health professions</p> <p>Recognizes the range of students/trainees learning in healthcare settings</p>	<p>Demonstrates basic familiarity with the Clinical Health Psychology literature</p> <p>With supervision and/or assistance, demonstrates ability to deliver relevant evidence-based Clinical Health Psychology concepts and practices OR health-related research practices to other health care professionals</p> <p>With assistance and/or supervision, can identify the differing needs of different types of learners in healthcare settings</p> <p>Aware of multiple teaching methods (e.g., lecture, experiential, precepting)</p>	<p>Demonstrates in-depth knowledge of the Clinical Health Psychology literature</p> <p>Effectively translates relevant evidence-based Clinical Health Psychology concepts and practices OR methods and procedures for health-related research in a way that is jargon-free and understandable by other health care professions</p> <p>Demonstrates ability to identify developmentally appropriate needs of learners from various disciplines in healthcare settings and adjusts teaching to fit learner needs</p> <p>With guidance, selects and uses multiple teaching methods in interprofessional education</p>	<p>Demonstrates mastery of knowledge of Clinical Health Psychology literature</p> <p>Independently and skillfully translates relevant evidence-based Clinical Health Psychology concepts and practices OR methods and procedures for health-related research in a way that is jargon-free and understandable by other health care professions</p> <p>Skillfully models to other psychologists the ability to identify and adapt teaching to needs of the learner to other psychologists</p> <p>Independently and skillfully engages learners utilizes a wide variety of educational methods</p>	<p>Contributes to teaching of Clinical Health Psychology concepts, methods, and procedures to broad range of learners at the national level</p> <p>Delivers relevant evidence-based information about Clinical Health Psychology concepts or practices OR methods and procedures for health-related research in novel ways</p> <p>Skillfully models to other</p>

									disciplines the ability to identify and adapt teaching to needs of different types of learners
									Develops and models cutting edge teaching strategies for engaging learners of all types
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:									
At 6-18 months: Fellow making progress toward meeting developmental expectation in Teaching and Supervision competency? <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A									
At 24 months: Fellow meets competency in Teaching and Supervision? <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A									

TAS2:					
<ul style="list-style-type: none"> • Applies knowledge of supervision in the supervision of clinical health psychology skills, conceptualizations, and interventions for psychologists, psychology trainees, or behavioral health providers from other health professions. • Provides feedback in a supervisory relationship that is direct, clear, timely, and behaviorally anchored. 					
Has not Achieved	NOVICE	ADVANCED BEGINNER	COMPETENT	PROFICIENT	EXPERT

	Seeks information about effective practices and strategies for providing supervision	Understands supervision models, theories, and effective practices and strategies Demonstrates basic individual and/or group supervision skills Demonstrates ability to provide behavioral feedback to other learners with supervision and assistance	Engages with supervisor about learning supervision models, theories, and strategies With opportunity, implements individual and/or group level supervision skills through direct supervision with trainees Provides effective behavioral feedback in the moment to other learners Provides behaviorally anchored positive and constructive feedback to psychology or other health professions trainees	Skillfully applies chosen model of supervision and implements effective supervision strategies Guides or co-leads group supervision or similar process group Models skillful provision of behaviorally anchored positive and constructive feedback to other psychologists and physicians	Skillfully coaches other professionals regarding behaviorally anchored, positive, and constructive feedback to their own trainees Demonstrates openness to being provided positive and constructive feedback by supervisees without defensiveness Skillfully ensures ethical, legal, and contextual issues are addressed in supervision
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:					
Summary TAS Competency Rating:					
Has not achieved	Novice	Advance Beginner	Competent	Proficient	Expert

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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At 6-18 months: Fellow making progress toward meeting developmental expectation in Teaching and Supervision competency?

Yes No N/A

At 24 months: Fellow meets competency in Teaching and Supervision?

Yes No N/A

Consultation and Interprofessional /Interdisciplinary Skills

CIS1: Fulfills the roles and expectations of a clinical health psychologist and recognizes and demonstrates understanding of and respect for the roles and perspectives of interprofessional colleagues and teams in healthcare settings.									
Has not Achieved	NOVICE	ADVANCED BEGINNER		COMPETENT		PROFICIENT		EXPERT	
	<p>With guidance, recognizes the unique nature of consultation and the role of clinical health psychologist in the healthcare setting (e.g., hospital, primary care setting, etc.).</p> <p>Understands the importance of a timely response to medical consultation</p>	<p>Explores and appreciates the unique nature of consultation within a medical team.</p> <p>Assists others in fulfilling role and expectations of CHP in practice</p> <p>Responds in a timely way to medical consultation requests</p> <p>With guidance, recognizes and demonstrates respect for the roles and perspectives of interprofessional colleagues and teams in healthcare settings.</p>			<p>Manages the roles and expectations of a clinical health psychologist in routine situations (i.e., provides CHP perspective and specialty specific skills).</p> <p>Routinely elicits and appreciates the roles and perspectives of interprofessional colleagues and teams in healthcare settings.</p>			<p>Exceeds the standard roles and expectations of a clinical health psychologist.</p> <p>Manages the roles and expectations of a clinical health psychologist in complex and challenging situations (i.e., provides CHP perspective and specialty specific skills).</p> <p>Navigates challenging interprofessional colleagues and teams in ways to enhance the roles of a clinical health psychologist.</p>	<p>Demonstrates leadership in expanding the roles and expectations of a clinical health psychologist in health care settings.</p> <p>Role models respectful interprofessional relationships in a variety of settings.</p>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:									
<p>At 6-18 months: Fellow making progress toward meeting developmental expectation in Consultation and Interprofessional/Interdisciplinary Skills competency?</p> <p> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A </p>									

At 24 months: Fellow meets competency in Consultation and Interprofessional/Interdisciplinary Skills?

Yes No N/A

CIS2:

- Conceptualizes referral questions that incorporate understanding of the roles of patient, caregiver, other provider, and/or health system to answer the consultation questions effectively.
- Translates and clearly communicates relevant scientific findings as they bear on healthcare consultation/liaison questions.

Has not Achieved	NOVICE	ADVANCED BEGINNER	COMPETENT	PROFICIENT	EXPERT
	<p>Understands the importance of a timely response to medical consultation.</p> <p>With guidance, conducts a thorough review of the health record of the referred patient</p>	<p>Responds directly to the initial consultation question</p> <p>Describes the roles of patient, caregiver, other provider, and/or health system in relation to the referral question.</p> <p>Describes relevant scientific findings as they bear on healthcare consultation/liaison questions.</p>	<p>Incorporates the role of patient, caregiver, other provider, and/or health system in relation to the referral question.</p> <p>Communicates clear recommendations to the referral source in both written and verbal reports</p> <p>Writes a succinct consultation note on the electronic health record in jargon-free language</p> <p>Incorporates principles of evidence-based care and information mastery into consultation and clinical practice.</p>	<p>Shapes the referral question into meaningful professional communication between clinical health psychologist and medical providers.</p> <p>Identifies potential issues missing from the medical record that are relevant to the referral question.</p>	<p>Independently teaches and assesses evidence-based practice and information mastery techniques.</p> <p>Models interprofessional communication of scientific findings as they relate to consultation/liaison questions and findings.</p> <p>Translates scientific findings as they relate to the broader population and adjusts protocols to address newest evidence.</p>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

At 6-18 months: Fellow making progress toward meeting developmental expectation in Consultation and Interprofessional/Interdisciplinary Skills competency?

Yes No N/A

At 24 months: Fellow meets competency in Consultation and Interprofessional/Interdisciplinary Skills?

Yes No N/A

CIS3: Engages interprofessional individuals and teams to increase the likelihood of appropriate early referrals to clinical health psychologists as opposed to “last resort” consultation.

Has not Achieved	NOVICE	ADVANCED BEGINNER	COMPETENT	PROFICIENT	EXPERT
	Understands that quality patient care requires coordination and teamwork, and participates as a respectful and effective team member	Understands the roles and responsibilities of oneself, patients, families, consultants, and interprofessional team members needed to optimize care, and looks for opportunities for coordination of care With guidance & supervision, engages with interprofessional teams to optimize the health of patients.	Develops relationships with potential referral agents, educating them regarding CHP professional competencies Assumes responsibility for the engagement of multiple interprofessional teams to optimize the health of patients	Creates and maintains an open dialogue with interprofessional team members to proactively identify areas of potential coordination of care and intervene early. Participates in system level change that improves the timeliness and appropriateness of consultations (e.g., attends interprofessional meetings, assists in development of hospital protocols, etc.)	Role models leadership, integration, and optimization of care teams to provide quality, individualized patient care Leads system level change to improve efficiency and quality of consultative care
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

Summary CIS Competency Rating:

Has not achieved	Novice	Advance Beginner	Competent	Proficient	Expert
■	■	■	■	■	■

At 6-18 months: Fellow making progress toward meeting developmental expectation in Consultation and Interprofessional/Interdisciplinary Skills competency?

Yes No N/A

At 24 months: Fellow meets competency in Consultation and Interprofessional/Interdisciplinary Skills?

Yes No N/A

MICAPT Clinical Health Psychology Self-Evaluation and Appraisal Performance

Name of Fellow: _____

Evaluation Period: _____

Supervisor
completing this
evaluation: _____

Fellow's level of training (check one): 6 months 18 months
 12 months 24 months

Performance Rating Scale

Progress toward competency in the fellowship is evaluated formally at 6-month intervals. Fellows are specifically evaluated on APA competencies for professional psychologist and clinical health psychology. Competency is expected to advance over the course of the fellowship, as demonstrated by growth in evaluation performance ratings over time. In order to meet competency requirements for graduation, fellows are expected to achieve an average rating of 3.0 or higher on their final, 24-month evaluation.

1 - Improvement Required: The fellow performance clearly falls below what would be expected of a fellow as compared with peers at a similar level of training. There are serious deficiencies which require planned remediation. Failure to meet remediation goals may result in dismissal from the program.

2 - Improvement Expected: The fellow is performing at a level below expectations as compared to peers at a similar level of training. Suggestions are provided as part of the fellow's appraisal discussion. If the fellow fails to improve performance, planned remediation may be necessary.

3 - Meets Expectations: The fellow is performing at an advanced level consistent with peers at a similar level of training.

4 - Exceeds Expectations: The fellow is performing at an exceptionally high level, unusual and unique, compare with peers at a similar level of training. This rating is given only rarely.

N/A – Not Applicable: Opportunity to perform the identified skills is not available or very limited

Please refer to MCBET as fellows use that evaluation to self-evaluate.

MICAPT Clinical Health Psychology Fellow Evaluation of Supervisor



Subject Name

Status
Employer
Program
Rotation
Evaluation Dates

Evaluated by:

Evaluator Name

Status
Employer
Program

Fellow Evaluation of Supervisor

Instructions:

IMPORTANT NOTICE: This form is confidential. It will be anonymously reviewed by the MICAPT Board after your evaluation meeting. Directors who are evaluated as supervisors do not review this form. An overview of performance is given, as a whole, by the hospital's Director of Medical Education to the Program Director.

1* My supervisor is knowledgeable about a variety of therapeutic and assessment techniques relevant to my supervision needs.

1- Strongly Disagree	2- Disagree	3- Neutral	4- Agree	5- Strongly Agree	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

2* My supervisor is knowledgeable about a variety of methods used in medical education.

1- Strongly Disagree	2- Disagree	3- Neutral	4- Agree	5- Strongly Agree	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3* My supervisor suggests relevant articles and/or text to me.

1- Strongly Disagree	2- Disagree	3- Neutral	4- Agree	5- Strongly Agree	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4* My supervisor's clinical suggestions are often effective.

1- Strongly Disagree	2- Disagree	3- Neutral	4- Agree	5- Strongly Agree	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5* My supervisor displays knowledge and sensitivity in regard to issues of cultural diversity.

1- Strongly Disagree	2- Disagree	3- Neutral	4- Agree	5- Strongly Agree	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

6* My supervisor maintains a mutually respectful and trusting relationship with me.

1- Strongly Disagree	2- Disagree	3- Neutral	4- Agree	5- Strongly Agree	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

7* My supervisor encourages me to fully express my ideas.

1- Strongly Disagree	2- Disagree	3- Neutral	4- Agree	5- Strongly Agree	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

8 My supervisor provides the right amount of feedback in a constructive manner.

1- Strongly Disagree	2- Disagree	3- Neutral	4- Agree	5- Strongly Agree	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9* My supervisor is respectful and helpful in suggesting ways to manage counter transference when indicated.

1- Strongly Disagree	2- Disagree	3- Neutral	4- Agree	5- Strongly Agree	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10* My supervisor encourages me to take initiative in designing treatment plans for my patients.

1- Strongly Disagree	2- Disagree	3- Neutral	4- Agree	5- Strongly Agree	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

11* My supervisor is supportive and/or acts as a mentor in the development and collaboration of my senior project (second year only).

1- Strongly Disagree	2- Disagree	3- Neutral	4- Agree	5- Strongly Agree	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

12* My supervisor encourages me to be active in professional societies and organizations.

1- Strongly Disagree	2- Disagree	3- Neutral	4- Agree	5- Strongly Agree	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

13* My supervisor is rarely late or absent for sessions.

1- Strongly Disagree	2- Disagree	3- Neutral	4- Agree	5- Strongly Agree	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

14* My supervisor gives me his/her full attention during sessions.

1- Strongly Disagree	2- Disagree	3- Neutral	4- Agree	5- Strongly Agree	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

15* My supervisor attempts to remain current with my patient load.

1- Strongly Disagree	2- Disagree	3- Neutral	4- Agree	5- Strongly Agree	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

16* My supervisor is reasonably prompt in following up with my questions and concerns.

1- Strongly Disagree	2- Disagree	3- Neutral	4- Agree	5- Strongly Agree	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

17* My supervisor models professional conduct with patients and other professionals.

1- Strongly Disagree	2- Disagree	3- Neutral	4- Agree	5- Strongly Agree	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

18* My supervisor is accessible.

1- Strongly Disagree	2- Disagree	3- Neutral	4- Agree	5- Strongly Agree	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

19* Overall, my supervisor is effective.

1- Strongly Disagree	2- Disagree	3- Neutral	4- Agree	5- Strongly Agree	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

20* What do you like most about your supervisor's approach?

21 How might the supervision be improved?

Overall Comment

MICAPT Clinical Health Psychology Fellow Evaluation of the Program

Date of Evaluation: _____

Year in Program: _____

Performance Rating Scale

Program in General

Rate the overall performance of the program for each item

		1	2	3	4	5	N/A
		<i>Strongly disagree</i>	<i>Disagree</i>	<i>Neutral</i>	<i>Agree</i>	<i>Strongly Agree</i>	
1.	I am consistently provided with sufficient orientation to the program and my duties/responsibilities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	The right amount of structure is provided to maximize my opportunity for growth.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	The host site is well informed and supportive of my role.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	The workload is sufficient and reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	The degree of professional challenge is satisfactory.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	I have adequate access to supervision.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	I have adequate resources to complete my duties (space, testing materials, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	I receive prompt and reasonable responses to any problems that impact the quality of the program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.	I feel comfortable in my work environment. I was not subject to sexual harassment or discrimination based on race, religion, ethnicity or sexual orientation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Program Aims.

Rate the training provided by the fellowship for each aim.

		1	2	3	4	5	N/A
		<i>Poor</i>	<i>Fair</i>	<i>Adequate</i>	<i>Good</i>	<i>Exceptionally Good</i>	
10.	Clinical Expertise. Develop advanced competency in Clinical Health Psychology.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.	Teaching-Supervision. Develop the ability to assume a leadership role in medical education and supervisory training.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12.	Team Approach. Develop expertise in both hospital and ambulatory practice involving a transdisciplinary model within a team approach.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13.	Scholarly Activity. Develop the ability to critically review research, adopting a commitment to lifelong learning while making scholarly contributions to the field.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Program Training Methods

Rate each method of training for reaching the fellowship aims and objectives.

1 2 3 4 5 N/A
Poor Fair Adequate Good Exceptionally Good

		1	2	3	4	5	N/A
14.	Individual supervision (clinical)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15.	Individual supervision (teaching)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16.	Clinical Health Psychology Core Curriculum Seminars	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17.	Rehabilitation Psychology	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18.	Psychopharmacology	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19.	Clinical care: consultation-liaison service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20.	Clinical care: psychotherapy, assessment, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21.	Integrated primary care clinic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22.	Precepting/shadowing of medical learners	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23.	Leadership and management seminars (PGYII only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24.	Senior Project (PGYII only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25.	Rate your overall opinion of the MICAPT CHP Program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please comment on the strengths and weakness of the program. How could it be improved?

What do you like most about the program?

Overall Comments:

MICAPT Clinical Health Psychology Fellow Evaluation of the MICAPT Seminar



Subject Name

Status
Employer
Program
Rotation
Evaluation Dates

Evaluated by: **Evaluator Name**

Status
Employer
Program

Fellow Evaluation of MICAPT Seminar

1* Please indicate date of didactic.

2* Please choose one of the following didactic

- Clinical Health Psychology & Core Curriculum (CHP)-Chronic and Terminal Illness
- Clinical Health Psychology & Core Curriculum (CHP)-Functioning as a Psychologist in a Medical Setting
- Clinical Health Psychology & Core Curriculum (CHP)-Professionalism & Diversity
- Clinical Health Psychology & Core Curriculum (CHP)-Psychology in Primary Care
- Diversity Committee (DC)
- Leadership & Management (LM)
- Psychopharmacology
- Rehabilitation Psychology (RP)
- Site Specific (SS)
- Wellness

3* Please enter the topic



4 Please free text any additional speakers (ie: fellow group diversity presentations, etc.)

- Other (please indicate in comments section)
- N/A

Comment

5* Speaker stated seminar objectives clearly.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
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6* Speaker met stated objectives.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

7* Content was pertinent to the goals and objectives of the fellowship.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

8* Content will be useful in improving my knowledge and skills.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9* Material was presented in a quality manner (preparation, organization, and clarity of presentation).

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10* Speaker communicated well.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

11* Speaker exhibited a receptive attitude toward fellows' concerns, views, and participation.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

12* Content advanced my understanding of the topic.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

13* Diversity was clearly discussed as appropriate to content.

[Diversity: MICAPT promotes competency and understanding in working with diverse populations which include individual characteristics, including age; race; ethnicity; sexual orientation; gender; gender identity and expression; people with disabilities (mental/physical including morbid obesity); immigrant status; socioeconomic status; religion/spirituality and national origin.]

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
-------------------	----------	---------	-------	----------------

14* Content was pertinent to module selected at the beginning of this evaluation.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
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15* Comments and/or suggestions

Michigan Center for Advanced Psychology Training Senior Project Presentation Evaluation Form

Project Title: _____

Fellow Name: _____

Project Type: _____

Instructions: Check the number that best corresponds to performance evidenced.

Rating Scale: 5= Excellent; 4 = Good; 3 = Neutral; 2 = Fair; 1=Poor

Evaluation Area	5	4	3	2	1	N/A
Preparation						
Formulated a scholarly question informed by clinical problems encountered, clinical services, and /or clinical settings related to work in Clinical Health Psychology						
Identified appropriate evidence-based literature, references, and/or resources						
Integrated the best of available research, cultural considerations, and clinical expertise into the project						
Execution						
Formulated appropriate hypothesis, aims, and/or objectives						
Developed appropriate methodology						
Included an appropriate number of subjects, trials and/or observations						
Implemented the project as designed, in an appropriate and thoughtful manner						
Adhered to the ethical codes and policies of the profession and sponsoring institution						
Identified limitations, issues or challenges unique to working in health care settings or systems, ruled out alternative explanations for findings, and/or future directions of findings						
Presentation						
Provided a clear, well-organized, and interesting engaging project review summary of the project						
Explained the project, including hypothesis/aims, methods, and findings with clarity and accuracy						
Exhibited knowledge/expertise in the content area under discussion						
Demonstrated an appropriate level of preparation						
Effectively delivered Clinical Health Psychology concepts, practices, methods and/or procedures						
Employed an appropriate approach to eliciting adequate audience participation						
Demonstrated a contribution to health care, population health, or advancing the field, consistent with an emerging professional identity as a clinical health psychologist.						

Identify 2 key strengths of the senior project and/or presentation:

1. _____

2. _____

Identify 2 ways this senior project and/or presentation could be improved:

1. _____

2. _____

Summary Rating: _____

Faculty Member: _____

Date: _____