

Clinical Psychology Training Programs at Brown: A Consortium of the Providence VA Medical Center, Lifespan, and Care New England Postdoctoral Fellowship Training Program Postdoctoral Fellowship Description: CLINICAL FOCUS

Fellowship: Postdoctoral Fellowship in DBT PE, ACT, and Third Wave Behavioral Treatments for PTSD

APA-accredited: X Yes No

Site: Acceptance and Mindfulness-Based Partial Hospital Program Rhode Island Hospital, Outpatient Psychiatry

Core Trauma Track Supervisor(s): Alex Brake, Ph.D. Rachel Ojserkis, Ph.D. Russell Marks, Ph.D. Sarah Zimage, LMHC Research Supervisor: Kristy Dalrymple, Ph.D. (Research Supervisor)

Fellowship Coordinator for RIH PHP: Katherine Visser, Ph.D. (Coordinator)

Additional General Track Supervisors:

Christina Mele, Psy.D. Dana Morris, Ph.D. Rachel Depner, Ph.D. Joseph Donahue, Ph.D. Helen Day, Psy.D. Hannah Herc, Ph.D. Laura Fischer, Ph.D.

Description of Site: The Acceptance and Mindfulness-Based Partial Hospitalization Program (PHP) at Rhode Island Hospital serves adults aged 18 years and older who present with a range of psychological problems, including mood and anxiety disorders, trauma and stress-related disorders, substance use disorders, and personality disorders. The program provides six hours of treatment five days/week, and all patients attend 3 groups per day, daily individual therapy and medication management sessions with a psychiatrist, and an optional meditation group. The average length of stay for patients is 13 program days.

The Trauma Track is a branch of the PHP that will offer a fully comprehensive treatment track beginning Fall 2023. Our approach is grounded in the Dialectical Behavior Therapy Prolonged Exposure (DBT PE), and also incorporates elements of Acceptance and Commitment Therapy

(ACT) and Cognitive Behavioral Therapy (CBT). Individuals in the Trauma Track go through two stages of treatment based on individual needs and collaborative discussions with their treatment teams. Stage 1 focuses on building readiness for trauma-focused treatment through stabilization of unsafe behaviors, reducing avoidance, learning about PTSD and related issues, and building a toolbox of coping skills. Most patients start in this stage of treatment. Stage 2 consists of Prolonged Exposure (PE) treatment including imaginal and in vivo exposures.

In the morning group, patients learn about PTSD and trauma-related topics such as intrusive symptoms, self-blame, relationship difficulties, and avoidance behaviors, and build DBT, ACT, and CBT skills to cope with PTSD and related challenges. The middle group of the day is divided by treatment stage, with individuals in Stage 1 participating in a DBT skills group tailored to build readiness for PE and address common trauma-related concerns. Those in Stage 2 participate in imaginal exposures and processing in a group format, based on principles of PE and third wave treatments for PTSD. The last group of the day focuses on in vivo exposures, helping patients review in vivo progress and learning, set additional goals, and problem-solve challenges.

Fellows in the Trauma Track will treat individual patients (both in PHP and on an outpatient basis) with PTSD and trauma-related concerns, utilizing evidence-based interventions with a particular focus on DBT-PE, PE, and ACT for PTSD, and also including other second and second and third wave treatments, depending on patients' needs (e.g., CPT, STAIR, TRIGR). Providers working in the Trauma Track have completed training in PE, DBT-PE, and ACT for PTSD. Providers are also involved with efforts to promote sensitivity and responsiveness to diversity issues, including those related to PTSD (e.g., racial trauma, discrimination).

TELEHEALTH NOTE: In the context of global COVID-19 pandemic, staff and patient safety is of highest priority. For this reason in Summer 2020, the Partial Hospital Program converted to an entirely telehealth-based model, providing all clinical care, supervision, and staff meetings virtually via video chat. Of course the COVID-19 pandemic continues to evolve and we cannot foresee precisely how systems of care will adapt to meet this challenge. At present (Spring 2023), with very few exceptions, all fellowship activities described herein are conducted virtually.

Fellowship Aims

- 1. To provide the fellow with post-doctoral training in the areas of Prolonged Exposure Therapy, Dialectical Behavior Therapy Prolonged Exposure Therapy, and Acceptance and Commitment Therapy for PTSD and trauma-related concerns.
- 2. To provide the fellow with post-doctoral training in the delivery of evidence-based individual and group interventions for patients with PTSD and related concerns at partial hospitalization and outpatient levels of care. Fellows will receive specialized training in evidence-based therapies for PTSD, integrating PE, DBT-PE for PTSD, ACT for PTSD, and other second and third wave empirically-supported treatments for PTSD and related concerns.

- 3. To provide the fellow with training in service delivery as part of a multidisciplinary treatment team.
- 4. To provide the fellow with a working knowledge and training on skills necessary to conduct research in the areas of treatment outcomes and adult psychopathology. This may include analyzing data from existing datasets and preparing manuscripts for publication, involvement in ongoing research projects, presenting data at research conferences, writing grant proposals, and attendance at research meetings.

Fellowship Timeline

The duration of the fellowship is 1 year. The anticipated start date is flexible July-September 2024. Activities are distributed as follows: 70% clinical time, 20% research time, and 10% didactic time.

<u>Clinical Activity Plan (70%)</u>

70% of the Fellow's time (28 hours/week) will be devoted to clinical activities in the Trauma Track of the Acceptance and Mindfulness-Based Adult Partial Hospitalization Program and the Outpatient Psychiatry Practice. In order to ensure that the fellow receives a high level of clinical training in the area of evidence-based treatment of PTSD, the following activities will be required during the fellowship:

 <u>Treatment Services (25 hours per week)</u>: The Fellow will provide treatment services in the PHP Trauma Track, which will include individual and group psychotherapy. The program runs from 8:00AM to 2:00PM. In addition, the Fellow will have the opportunity to provide individual trauma-focused therapy patients on an outpatient basis, some of whom may be stepping down from their partial hospitalization. The Fellow will demonstrate competence in treating PTSD and trauma-related concerns using an integrative approach incorporating DBT-PE, PE, and ACT. The Fellow also will demonstrate competency in developing sophisticated case conceptualizations that reflect working knowledge of the theoretical models noted above and creating individualized evidence-based treatment plans that will allow for objectively measuring treatment effectiveness.

<u>Clinical Documentation (included in the activity above)</u>: The Fellow will have the ability to maintain accurate records and to document case formulations, treatment plans, discharge plans, and progress notes in a timely, concise, and clear manner.

2. <u>Clinical Assessment (1.5 hours per week)</u>: The Fellow will conduct individual therapy on an outpatient basis as part of the standing outpatient practice after partial hospital hours. Competency will be demonstrated in using evidence-based biopsychosocial principles to conceptualize mental disorders (e.g., applying when useful: DSM-5 criteria, contextual behavioral principles, cognitive behavioral models, etc.), integrating information and preparing case conceptualizations, and implementing evidence-based care on an outpatient basis. The Fellow will also demonstrate competency in the assessment of PTSD through use of semi-structured interviews (e.g., the DBT PE Trauma Interview) to determine readiness to begin trauma treatment. They will select relevant measures to monitor treatment through use

of validated instruments (e.g., PCL-5). The Fellow will be encouraged to develop a caseload that aligns with their clinical and training interests.

- 3. <u>Membership on a Multidisciplinary Treatment Team (1.5 hour per week)</u>: The Fellow will demonstrate the ability to function as an independent clinician as a member of a multidisciplinary treatment team consisting of psychologists, master's-level therapists, psychiatrists, and trainees from a variety of disciplines (e.g., physician assistants). Their interactions with other providers will demonstrate an understanding of the responsibilities and limitations of a psychologist in a psychiatric setting. The Fellow will demonstrate competency in communicating with providers of different disciplines and developing comprehensive treatment plans in full collaboration with the treatment team.
- 4. <u>Licensure</u>: The Fellow will apply for licensure as a psychologist in relevant states for their post-training employment.

Research Activity Plan (20%)

20% (approximately 8 hours/week) of the Fellow's time will be spent on research activities related to treatment outcomes for adults at the partial hospital program and adult psychopathology in a partial hospital or outpatient setting. The Fellow will have access to an existing database of treatment outcome measures as part of the partial hospital's ongoing treatment outcome research, as well as existing databases of adult psychopathology in psychiatric outpatient and bariatric surgery populations. Potential areas for research participation and collaboration, under the supervision of Dr. Dalrymple, will include the following:

- Review of the literature on the treatment efficacy of ACT.
- Outcomes for adults with a range of mental health problems receiving ACT in a partial hospital setting.
- The effect of baseline characteristics on treatment outcomes, and changes in process variables over time.
- The development and validation of new measures for use with patients in a partial hospital and/or outpatient setting.

The Fellow will work with their research supervisors to identify areas of interest, review relevant literature, and pursue a research question by using the existing research infrastructure and/or by implementing additional data collection techniques. The Fellow will be encouraged to collaborate with other researchers on the team on preparation of manuscripts for publication and/or for presentation at national conferences. The Fellow also may choose to collaborate with researchers on the team on grant preparation to pursue funding for new research initiatives. Ad hoc reviewing opportunities may be made available with the research mentors for fellows interested in learning about the editorial review process for refereed journals. Finally, research activities will include collecting data on functioning, diagnosis, and treatment outcomes as part of group and individual treatment at the partial program.

Didactics (10%)

10% time (approximately 4 hours/week) is available for didactics. The Fellow will participate in post-doctoral seminars through the Brown Postdoctoral Training Program. If the optional didactic (Academic Friday) is chosen, this time will come out of the 20% research time.

Mandatory Didactics:

Core Seminar Series (1 per month, 1.5 hours); DPHB Academic Grand Rounds (1 per month, 1 hour); Clinical Ethics Seminar Series (1 per month, 1 hour) Clinical Postdoctoral Seminar Series (1 per month, 1 hour) Optional Didactics: Grantsmanship Seminars (1 hour per week) Special Topics in Statistics and Research Methods (1 hour per week)

Supervision and Evaluation

Supervision (4 hours/week) will be provided in the form of three hours of weekly individual clinical supervision with licensed psychologists or Brown-appointed clinical faculty on site (Core Supervisors: Alex Brake, Sarah Zimage, Rachel Ojserkis, Russ Marks), one of whom will be primary clinical supervisor overseeing PHP individual cases, another will supervise PHP groups, and a third will supervise outpatient psychotherapy. One hour per week of individual/group research supervision will be provided by Dr. Dalrymple. Dr. Katie Visser serves as the coordinator for the fellowship.

At every 6 months for the duration of the fellowship, the fellow and the supervisors will provide formal evaluations, and evaluations of the program relative to the goals and learning objectives of the fellowship.

Please visit the **Brown Faculty** page to view supervisor profiles.

Resource Requirements

Fellow will be provided with the following resources:

- Access to space appropriate for clinical care
- A computer and project specific software
- Internet access
- Telephone
- For CPP fellows, individual office space is provided.

<u>**Path toward licensure</u>**: YES_X_ NO____ The Fellow will receive clinical hours toward licensing through the clinical activity plan.</u>

Reporting and Approval

This fellowship will be part of the CPP. The position will be discussed at an upcoming meeting of the Adult Track

Director, Clinical Psychology Program (CPP)

Director, Postdoctoral Fellowship Training Program (PFTP)