[NOTE TO TRAINEES AND FACULTY: We have been experiencing difficulties with some hyperlinks contained within this document – if the link does not bring you directly to the document, try copying the link directly into your browser.]
Postdoctoral Fellowship Training Program

Overview

The Postdoctoral Fellowship Training Program (PFTP), within the Clinical Psychology Training Programs at Brown: A Consortium of the Providence VA Medical Center, Lifespan, and Care New England, offers advanced training at the postdoctoral level for qualified individuals.

The primary purpose of the PFTP is to provide training that assures the development of advanced competency in a specific area of clinical psychology (with emphasis on clinical research and clinical service), provide advanced research experiences, and promote the development of independent investigators. It is the philosophy of the PFTP that all postdoctoral fellows in clinical psychology should have both clinical and research exposure during their training. Postdoctoral fellows with non-clinical degrees may focus entirely on developing research skills.

The PFTP has four Divisions:

1) The APA-accredited Clinical Psychology Program (CPP)
2) The APA-accredited Clinical Child Psychology Specialty Program (CCPSP)
3) The APA-accredited Clinical Neuropsychology Specialty Program (CNSP)
4) The Research Fellowship Program (RFP) an unaccredited research program

Questions related to the accreditation status of the Clinical Psychology Program (CPP), Clinical Child Psychology Specialty Program (CCPSP), and the Clinical Neuropsychology Specialty Program (CNSP) should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation
American Psychological Association
750 1st Street, NE, Washington, DC 20002
Phone: 202-336-5979 / E-mail: apaaccred@apa.org
Web: www.apa.org/ed/accreditation
Completion Requirements

In order to successfully complete fellowship and graduate and receive a certificate of completion from the PFTP, the following requirements must be met:

- **Clinical Psychology Program (CPP), Clinical Child Psychology Specialty Program (CCPSP), and Research Fellowship Program (RFP) positions**, 1 full calendar year (2,000 hrs. after deducting 80 hrs. of vacation) must be completed in order to successfully complete fellowship and be considered alumnae of the PFTP (i.e. 7/1/22-6/30/23). The 365-day requirement is mandatory and non-negotiable.

- **Clinical Neuropsychology Specialty Program (CNSP) positions**, 2 full calendar years (4,000 hrs. after deducting 160 hrs. of vacation) must be completed in order to successfully complete fellowship and be considered alumnae of the PFTP (i.e. 7/1/22-6/30/24). The 730-day requirement is mandatory and non-negotiable. This requirement should be taken into consideration when negotiating future job position(s).

If a postdoctoral fellow does not meet the fellowship completion requirements, they cannot list on their CV as completing a postdoctoral fellowship within the PFTP at Brown. The Training Program will not be able to verify training and/or clinical hours towards licensure.

If an individual requires verification of clinical hours during this timeframe, their clinical supervisor may be willing to attest to supervised clinical hours that were completed in a hospital setting, but not as a postdoctoral fellow within the Brown PFTP. Please contact the Director to discuss.
## Important Dates

Prior to start, CPP, CCPSP, & CNSP fellows *(only)* should submit the Fellowship Competencies Self-Assessment Form to the Training Office.

| July          | - Individualized Training Activities Form and Fellow/Supervisor Agreement Form due 3rd week of training (based on individual start date)  
|              | - Select Advisor due 3rd week of training (based on individual start date)  
|              | *(postdoctoral fellows starting in July)* |
| August       | - Individualized Training Activities Form and Fellow/Supervisor Agreement Form due 3rd week of training (based on individual start date)  
|              | - Select Advisor due 3rd week of training (based on individual start date)  
|              | *(postdoctoral fellows starting in August)* |
| September    | - Mandatory Postdoc Orientation  
|              | - Individualized Training Activities Form and Fellow/Supervisor Agreement Form due 3rd week of training (based on individual start date)  
|              | - Select Advisor due 3rd week of training (based on individual start date)  
|              | *(postdoctoral fellows starting in September)* |
| November     | Postdoctoral Fellow Luncheon [pending COVID restrictions]  
|              | *(1st Wednesday of Month - immediately following Grand Rounds)* |
| December     | - Progress evaluations begin. Fellows and Supervisors are evaluated on a 6-month cycle.  
|              | - For those with a 2-year option, supervisor must inform postdoctoral fellow regarding a 2nd year of fellowship. |
| January 1    | Postdoctoral fellow must inform supervisor regarding a 2nd year of fellowship *(if applicable)* |
| March        | Mind Brain Research Day |
| May          | - Program sponsored Academic Grand Rounds  
|              | - Teaching Award Selection Committee |
| June         | - Postdoc Annual Retreat  
|              | - Progress evaluations begin for those continuing for a 2nd yr. Fellows are evaluated on a 6-month cycle (based on individual start date); End of fellowship evaluations due for graduates  
|              | - Exit meeting with Program Director  
|              | - For Graduating Postdoctoral Fellows - all evaluations must be completed before receiving certificate. (Based on start date - Must complete 1 full calendar year of training to be eligible to graduate)  
|              | Graduation |
Program Director Meetings

Postdoctoral fellows will have periodic meetings with their Program Director or Associate Director, if applicable, (CPP, CCPSP, CNSP, or RFP) throughout the fellowship experience (see below timeline). The postdoctoral fellow may request a meeting with the Program Director or the Director of the Postdoctoral Fellowship Training Program (PFTP) at any time.

Clinical Psychology Program (CPP)
October (or 3-4 weeks following start date) – Initial Meeting
July Year 1 (or 3-4 weeks before end date) – CPP Exit Meeting
July Year 2 if applicable (or 3-4 weeks before end date) – PFTP Exit Meeting

Clinical Child Psychology Specialty Program (CCPSP)
October (or 3-4 weeks following start date) – Initial Meeting
July Year 1 (or 3-4 weeks before end of year 1 date) – CCPSP Exit Meeting
July Year 2 if applicable (or 3-4 weeks before end date) – PFTP Exit Meeting

Clinical Neuropsychology Specialty Program (CNSP)
October (or 3-4 weeks following start date) – Initial Meeting
January Year 1 – Progress Meeting
July Year 1 – Progress Meeting
January Year 2 – Progress Meeting
July Year 2 (or 3-4 weeks before end date) – Exit Meeting

Research Fellowship Program (RFP)
October (or 3-4 weeks following start date) – Initial Meeting
June Year 1 – Progress Meeting for 2-year fellowships
June Final Year (or 3-4 weeks before end date) – Exit Meeting

Supervision

Consistent with APA Guidelines for Clinical Supervision in Health Service Psychology, the Postdoctoral Fellowship Training Program (PFTP) views supervision as a collaborative relationship between a fellow and a supervisor that extends over time and that has both facilitative and evaluative components. The overarching goal of supervision is to guide the fellow toward achieving independent competence in research and/or the provision of psychological health services.

All PFTP fellows are expected to provide feedback to their supervisors during each 6-month evaluation time point. However, supervision feedback should occur as part of the ongoing collaborative relationship between the fellow and his or her supervisor(s).

Historically, exclusive reliance on telesupervision has not been allowed in the PFTP. In accordance with APA guidance, telesupervision is now permitted by the PFTP in certain circumstances. In this case, video or telephone format may be necessary to promote trainee and supervisor safety. Documentation of the use of telesupervision as the primary format of supervision is required and should be noted in the Individualized Training Activities.
Clinical Programs

The Clinical Psychology Program (CPP), Clinical Child Psychology Specialty Program (CCPSP), and Clinical Neuropsychology Specialty Program (CNSP) adopt the definitional goals of supervision set forth in the Guidelines on Supervision: to enhance the professional competence and science-informed practice of the supervisee, to monitor the quality of services provided, to protect the public, and to provide a gatekeeping function for entry into the profession. Supervision in the CPP, CCPSP, and CNSP focuses on guiding fellows’ toward achieving independent competency in the domains identified in our program.

Each CPP, CCPSP, and CNSP postdoctoral fellow is provided with a minimum of 2 hours per week of regularly scheduled individual, face-to-face supervision with a minimum of two licensed DPHB faculty supervisors (the primary supervisor is always a licensed psychologist). This supervision is considered part of 4 hours of structured learning activities that each fellow participates in weekly. Fellows in the CPP and CCPSP may also receive group supervision. CPP, CCPSP, and CNSP fellows also receive weekly supervision in their research placement. The majority of CPP fellows have the opportunity to provide supervision to other trainees and CNSP fellows may have opportunities to provide supervision to other trainees, as circumstances permit. In addition, CPP, CCPSP, and CNSP fellows participate in didactic sessions that may include simulated supervision with peers. A faculty member supervises this simulated supervision didactic experience. Fellow and supervisor compliance with supervision requirements is monitored through the clinical supervision log.

Research Program

All first-year Research Fellowship Program (RFP) postdoctoral fellows receive approximately four hours of structured learning activities weekly. This includes a minimum of 1 hour per week of regularly scheduled individual, face-to-face research supervision and an average of 2-3 hours per week of structured learning activities in the form of didactics/educational experiences. Second-year RFP postdoctoral fellows receive a minimum of 1 hour per week of regularly scheduled individual research supervision and participate in selected didactic activities based on interest and program requirements.

For research fellows wishing to be licensed, please see Licensure section of the Training Manual.

Advisor

All postdoctoral fellows have a designated faculty advisor. This is a non-evaluative faculty member who fulfills the responsibilities outlined below. Within the first month of training, fellows in the Clinical Psychology Program (CPP), Clinical Child Psychology Specialty Program (CCPSP), and Research Fellowship Program (RFP) are to identify a faculty member and request that he or she be their advisor for the year. Fellows in the Clinical Neuropsychology Specialty Program (CNSP) are assigned an advisor prior to start.

It is recommended that each postdoctoral fellow secure an advisor who is within their area of specialization and who is a member of the full-time or hospital-based faculty. It is possible for a fellow to select a community-based clinical faculty member as an advisor, provided that they can ensure that all of the responsibilities of the advisory process (see below) will be fully met. Your postdoc program director is available to provide guidance related to selecting
and communicating with a potential advisor. **Submit the name of your advisor to the Training Office by the 3rd week of training HERE.**

If at any point there is a concern with the selected advisor, the postdoctoral fellow should discuss this with their program director and determine whether a new advisor should be identified. If a new advisor is selected, the Training Office should be notified of this change.

**Faculty Advisor Responsibilities:**

1. Assists the postdoctoral fellow in any, and all, matters related to their fellowship experience, and provide not only information, but also guidance and support.

2. Serves as liaison to the Training Committee in the event that such a need arises during the course of the training experience.

3. Provides the postdoctoral fellow advice about job interviews.

**Representatives**

Each year, four Fellows are chosen to represent the postdoctoral fellows in the Clinical Psychology Program (CPP), the Clinical Child Psychology Specialty Program (CCPSP), the Clinical Neuropsychology Specialty Program (CNSP), and the Research Fellowship Program (RFP).

The Postdoctoral Fellow Representative is someone who can be counted upon to serve as an advocate for the postdoctoral fellows and an effective liaison with the training faculty. This involves maintaining communication with postdoctoral fellows as well as with training faculty and leadership. The representatives communicate any issues of concern to the Training Committee, the PFTP Director or their respective Program Director.

Other specific duties of the Fellows are listed below:

1. Attend the monthly Clinical Psychology Training Committee meeting, held on the first Wednesday of the month from 9:00 am – 10:00 am.

2. Assist in the selection process of the Training Program sponsored Grand Rounds speaker.

3. In collaboration with the Social Media Coordinator, Fellow Reps will develop original content and post to the department Instagram and other social media platforms numerous times each month. They will provide "coverage" of the accounts regularly (e.g., 1 week per month). They will solicit and post content from department members that depict trainee, faculty, or staff life, clinical and research placements, and training program events. There may be opportunities to coordinate virtual events for accepted or prospective trainees.

4. Schedule social activities, such as happy hours, hikes, group outings, etc., as a way to facilitate interaction among the fellows approximately 2-4 times per year.
5. Provide feedback to the PFTP Director and Training Committee regarding any ways they feel the overall structure of the postdoctoral program can be improved.

6. Coordinate specific activities including the following:
   - Update licensing exam information
   - Update local teaching opportunities
   - Coordinate the scheduling of the postdoc retreat at the end of the year
   - Coordinate nominations for the annual teaching award
   - Coordinate meetings with current Fellows and applicants to the Fellowship program
   - Share key updates from the Anti-Racism Steering Committee (ARSC) and its subcommittees with postdoctoral Fellows

Compensation of $1,000 is provided to each representative to be used for professional travel expenses or educational supplies. The term of appointment is 10/1 – 8/31. All expenses need to be submitted to the Training Office by June 15.

Invited Speaker Program

Each year the clinical psychology residents and postdoctoral fellows have the opportunity to invite a distinguished psychologist of their choice to Brown to present Academic Grand Rounds in the Department of Psychiatry and Human Behavior.

The faculty coordinator of this activity is Dr. Tracy O’Leary Tevyaw. The clinical psychology resident and postdoctoral fellows are requested to meet as soon as possible to elect a delegate to work with Dr. O’Leary Tevyaw in coordinating this activity. The representatives will serve as liaison between the clinical psychology residents, postdoctoral fellows and Dr. O’Leary Tevyaw; and assist in making arrangements for the invited speaker of their choice. The clinical psychology residents and postdoctoral fellows are requested to nominate their choices for invited speakers no later than September 15.

Please contact Tracy O'Leary Tevyaw at Tracy.O'Leary-Tevyaw@va.gov with specific questions.
Didactics
Nicole McLaughlin, PhD, Didactics Coordinator

[NOTE: DUE TO COVID-19, SEMINARS WILL BE HELD IN VIRTUAL FORMAT UNTIL FURTHER NOTICE. PLEASE VIEW SEMINAR SCHEDULE FOR SPECIFICS]

Postdoctoral fellows participate in a variety of required didactics designed to develop knowledge-based competencies in professional issues, ethics, clinical practice, and research. Some required didactics series involve joint participation of trainees in both the Clinical Psychology Internship Training Program and Postdoctoral Fellowship Training Program (PFTP). Other required didactics are specific to certain programs.

Trainees are able to miss up to 10% of seminars within each seminar series without need for making up the content. If more than 10% of seminars are missed, trainees should discuss options for making them up with the seminar coordinator.

Postdoctoral fellows are encouraged to become familiar with other ongoing seminars and courses at Brown University and within the Department of Psychiatry and Human Behavior (DPHB). Please keep an eye out for emails announcing relevant didactic opportunities. There are also numerous other educational opportunities at various teaching hospitals and on campus!

Each of the Postdoc seminars associated with the PFTP has a Google Calendar accessible to anyone with a Brown email address. Within the calendar, postdoctoral fellows will have access to:

- Seminar Series Schedule
- Handouts *(if applicable)*
- Attendance & Evaluation Forms *(must be completed at end of each seminar)*

View Didactics section for:

- Clinical Psychology Program (CPP)
- Clinical Child Psychology Specialty Program (CCPSP)
- Clinical Neuropsychology Program (CNSP)
- Research Fellowship Program (RFP)

Check with your supervisor to see if your fellowship has any requirements outside of what is listed for your specific program.
Evaluation
Melanie Dubard, PhD, Coordinator

Overview
At the start of each training year, postdoctoral fellows collaborate with their fellowship supervisor(s) to establish Individualized Training Activities. These may be informed by trainee self-evaluation (see below). Each fellow’s Individualized Training Activities are reviewed by the Director or Associate Director in their respective program: i.e., Clinical Psychology Program (CPP); Clinical Child Psychology Specialty Program (CCPSP), Clinical Neuropsychology Specialty Program (CNSP); or the Research Fellowship Program (RFP), and primary supervisor.

Evaluations are in a competency-based format, which emphasizes acquisition of special clinical skills and/or research abilities. Individualized Training Activities are achieved through an apprenticeship model where the fellow works closely with their supervisor(s) in the provision of clinical services and/or in conducting research.

Evaluations are an integral part of the supervisor/fellow relationship. The evaluation process should involve an ongoing dialogue between postdoctoral fellows and their supervisors. Formal evaluations of trainees and of supervisors occur every six months. Evaluations should occur in face-to-face meetings between the postdoctoral fellow and their primary supervisor (or appropriate designee) and possibly other supervisors.

Minimal Expected Levels of Achievement
At each evaluation time point, fellows are expected, at minimum, to demonstrate satisfactory progress toward achieving independent competence on each specific-level competency item required by their specific PFTP program (listed below). The CPP, CCPSP, and CNSP fellows should have training activities listed in all Objective areas I-XI. RFP fellows should have training activities listed in Objectives areas I-III and VII-XI, but may not have training activities listed in Objective areas IV-VI unless sitting for licensure:

I. Integration of Science and Practice
II. Ethical and Legal Standards
III. Individual and Cultural Diversity
IV. Assessment
V. Intervention
VI. Consultation and Interprofessional/Interdisciplinary Skills
VII. Teaching/Supervision/Mentoring
VIII. Leadership
IX. Communication and Interpersonal Skills
X. Professional Values, Attitudes, and Behaviors
XI. Research

Typically, fellows making satisfactory progress need additional, ongoing practice and supervision with these competency domains to achieve independence. At the end of APA-accredited training year/fellowship, fellows are expected to demonstrate competence to perform independently. That is, they should have demonstrated the ability to perform each specific competency skill at the level expected of an independent practitioner in the field.

Postdoctoral fellows should be engaged in an open, ongoing dialogue with their supervisor(s) regarding their progress. Fellows have the right to appeal any formal evaluation.
(see Remediation/Grievance Policy). Supervisors and fellows take mutual responsibility for ensuring that these evaluations are completed in a timely fashion.

Evaluation - Instructions

Getting Started....

MyEvaluations

Evaluations (e.g., Evaluations of Postdoctoral Fellows and of Supervisor/Mentor) are completed online through MyEvaluations.com. You will receive your username and password via e-mail directly from MyEvaluations.com. If you have not received this e-mail, please inform Brett_Requintina@Brown.edu in the Training Office.

To login, follow the steps below:

1) Web address: www.MyEvaluations.com

2) Login:
   - Type in your username and password.
   - Select the login button in order to securely log into MyEvaluations.com. (If you do not remember your username/password, then click "Forgotten Your Username/Password" and enter your registered e-mail address. Click "OK" - your information will be immediately e-mailed to you.)

Download General Evaluation Instructions!

Evaluations are assigned based on the information entered in your Supervision/Evaluations Google spreadsheet. Please keep this information up to date. When a change is made, the Training Office will receive an alert and will edit your evaluations accordingly.

View Evaluation section for specific instructions & forms:

- Clinical Psychology Program (CPP)
- Clinical Child Psychology Specialty Program (CCPSP)
- Clinical Neuropsychology Specialty Training Program (CNSP)
- Research Fellowship Program (RFP)

A graduation certificate will only be distributed upon completion of all evaluations.
Clinical Psychology Program (CPP)
Karen Oliver, PhD, Director

The APA-accredited Clinical Psychology Program (CPP) provides general training in clinical psychology (Traditional Practice Program) within hospital-based settings. This program offers emphasis areas in Adult and Health Psychology/Behavioral Medicine. Postdoctoral fellows in clinically-focused fellowships spend approximately 50-70% time conducting clinical work.

The three aims of the CPP are:

1. To produce psychologists who exhibit an advanced competency level with regard to professional skills/conduct and ethical standards (consistent with APA principles and local regulations) to function effectively as independent practitioners within health service settings;
2. To produce psychologists who exhibit an advanced competency level with regard to knowledge and skills related to research in order to function effectively as scientist-practitioners within health service settings; and
3. To produce psychologists who demonstrate an advanced competency level with regard to evidence-based practice and the provision of effective psychological services within health service settings.

Clinical training supports postdoctoral fellows in establishing clinical proficiency, while integrating a professional role that is well grounded in ethics and the integration of science and practice. By the end of the fellowship, the postdoctoral fellow should attain advanced competence in the knowledge-base and clinical skills to function independently in a similar clinical program in a new location.

APA-accredited CPP fellowship positions are one year in duration. In some cases, a second year of fellowship may be available when there are opportunities to continue clinical and research training in more depth. [Note: This second year is not an “APA-accredited” fellowship year, but is designated as a Brown postdoctoral fellowship year.] Agreement to continue for a second year of training, when available, is decided upon by the postdoctoral fellow and the primary supervisor midway through the first year. The supervisor informs the postdoctoral fellow that he/she would like him/her to stay a second year by mid-December. Postdoctoral fellows must make a decision by January 1 in order to allow sufficient time to recruit a replacement. Although postdoctoral fellows are paid for a 40-hour week, most find it necessary to work approximately 50 hours a week to best achieve their personal research and clinical career goals during their fellowship training year.

Definition of 20% Research Component

All approved postdoctoral fellowships in the PFTP will contain a minimum of 20% effort devoted to research. It is the supervisor’s responsibility to provide a training experience that will meet this requirement. A day may be set aside specifically for research or the time may be spread out across more than one day, dependent upon the clinical schedule.

The 20% research experience should be active work that is conducted by the postdoctoral fellow (not completely delegated to others), and it should be geared toward producing a traditional scientific product (e.g. manuscript, presentation at a national professional meeting, grant application, instrument development). Postdoctoral fellows decide on the appropriate research activity in conjunction with the faculty supervisor. Ultimately, it is the postdoctoral
fellow’s choice to determine the specific project. Examples of appropriate activities include generating a project from the supervisor’s existing database; designing and implementing a new study; publishing work on projects begun prior to the fellowship including the dissertation. All individualized training activities for postdoctoral fellows must include explicit goals and activities for this research component.

Primary supervisors are responsible for working with Fellows to identify a research supervisor for their postdoctoral fellows. While not required, we encourage the research mentor to be different from the primary supervisor. It is the responsibility of the primary supervisor to monitor that the fellow’s research goals are being met, and that research opportunities reasonably allow for these goals to be achieved. The primary supervisor should coordinate with the research supervisor to work out a mechanism to ensure that this is accomplished. A meeting between both supervisors and the Fellow is recommended for the start of the training year to outline research responsibilities and coordinate integration of these activities into the Fellow’s schedule. In the event that the primary supervisor and research supervisor are the same, the Program Director should meet with the trainee and primary supervisor at the beginning of the year to ensure research activities may be reasonably accomplished given the required clinical responsibilities.

It is the supervisor’s and home institution’s obligation to provide at least minimal resources for the postdoctoral fellow to achieve their research goals (e.g., computing, access to statistical software, research administration/IRB services, assessment space).

The 20% effort (8 hours per week) may include the research didactic component of the PFTP (RFP Core Seminars). Clinical seminars are not included in the 20% time.

Any one of the following would represent an appropriate product from a research activity:

- Peer reviewed publications e.g. journal article
- Book chapter
- Invited articles in professional journals
- Academic presentations outside of Brown Medical School
- Poster presentation, or paper presentation at a regional or national professional meeting, preferably with a published abstract
- Poster presentation at Mind/Brain Research Day
- Grant award from postdoctoral fellow initiated activity
CPP Didactics

CPP Didactics are listed below:

[NOTE: DUE TO COVID-19, SEMINARS WILL BE HELD IN VIRTUAL FORMAT UNTIL FURTHER NOTICE. PLEASE VIEW SEMINAR SCHEDULE FOR SPECIFICS]

Trainees are able to miss up to 10% of seminars within each seminar series without need for making up the content. If more than 10% of seminars are missed, trainees should discuss options for making them up with the seminar coordinator.

### Department Required

<table>
<thead>
<tr>
<th>Title</th>
<th>Coordinator</th>
<th>Description</th>
<th>Time &amp; Location</th>
<th>Attendance Required</th>
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<tbody>
<tr>
<td>DPHB Academic Grand Rounds</td>
<td>Chair’s Office</td>
<td>Grand Rounds is offered monthly to all fellows, residents, and faculty and features nationally known faculty presenting their research</td>
<td>1st Wednesday of each month (Sept-June) 11-12:15pm (virtual)</td>
<td>Mandatory all trainees</td>
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### Postdoctoral Fellowship Training Program Seminars

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<thead>
<tr>
<th>Title</th>
<th>Coordinator</th>
<th>Description</th>
<th>Time &amp; Location</th>
<th>Attendance Required</th>
</tr>
</thead>
<tbody>
<tr>
<td>Postdoc Core Seminar</td>
<td>Carla Correia, PsyD</td>
<td>Monthly seminar series is offered to all fellows. Recognizing that most of the Fellows will likely spend some reasonable percentage of their career in clinical practice, many of the topics in this seminar series focus on practice issues such as: the licensure process, career development, supervising and mentoring, and developing an office-based practice.</td>
<td>2nd Tuesday of each month (Sept-June) 5:00-6:30pm Butler Hospital Duncan Building, Room 159 or Zoom (as noted on schedule)</td>
<td>Mandatory for all first-year fellows with a clinical psychology degree and optional for others</td>
</tr>
<tr>
<td>Clinical Ethics Seminars</td>
<td>Heather Hunter, PhD</td>
<td>Monthly seminar on Clinical Ethics is offered to all fellows</td>
<td>1st Wednesday of each month (Oct-May) 10-11am Butler Hospital Duncan Building, Room 159 or Zoom (as noted on schedule)</td>
<td>Mandatory for all first-year fellows intending to be licensed</td>
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CPP Specific Didactics

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<thead>
<tr>
<th>Title</th>
<th>Coordinator</th>
<th>Description</th>
<th>Time &amp; Location</th>
<th>Attendance Required</th>
</tr>
</thead>
<tbody>
<tr>
<td>CPP Seminar</td>
<td>Alexandra Burns, PsyD</td>
<td>Weekly seminar is offered to all CPP fellows</td>
<td>1st Monday of Month (Sept-July) 4:00-5:30pm VA Medical Center 5th Floor Classroom #1 or Zoom (as noted on schedule)</td>
<td>Mandatory for all first-year, CPP fellows</td>
</tr>
</tbody>
</table>

Seminar Schedule Links
Note: If links do not work, please copy and paste the address directly into your browser.

Postdoc Core Seminar –
https://docs.google.com/document/d/174P5Ma4ehAinqdp8H1muii8WhfjV2JckhPez3-rBul/edit?usp=sharing

Clinical Ethics Seminar –
https://docs.google.com/document/d/1op3NL4DDPVsDx9DoyuPvFG96CKdQW_sXR0GbrypE2OA/edit?usp=sharing

CPP Seminar –
https://docs.google.com/document/d/1wNSf9v4g0u50JVktnjG1FHA3DdSnew2Y0RWTNncE5Qc/edit?usp=sharing
CPP Evaluations

Evaluation Time Frame & Forms

Fellows receive a Certificate of Completion from the Postdoctoral Fellowship Training Program only after they have completed 1 full calendar year of training and all evaluations have been completed and submitted.

- **Self-Assessment**
- **Postdoctoral Fellowship Supervision/Evaluations**
- **Individualized Training Activities Form**
- **Fellow/Supervisor Agreement Form**
- **Progress Evaluation**
- **End Evaluation**
- **Supervisor Evaluation**

### Self-Assessment

Prior to start of fellowship, you should have submitted your [CPP Fellowship Competencies Self-Assessment Form](#) to the Training Office. This form is a self-assessment of your level of competence in each major training area of your fellowship, and is used to assist you in writing your Individualized Training Activities. The Self-Assessment is reviewed by the Director of the CPP and put in your trainee file.

### Postdoctoral Fellowship Supervision/Evaluations

By your 3rd week of training, and at the beginning of each new training year, all fellows are required to fill out the [Postdoctoral Fellowship Supervision/Evaluations Google spreadsheet](#). This is a listing of faculty supervisor(s), which will be used to accurately assign your evaluations within the MyEvaluations system.

### Individualized Training Activities

By your 3rd week of training you will have submitted a signed hard copy your Individualized Training Activities to the Training Office. All fellows and their supervisors/mentors should establish, and mutually agree upon the fellowship Individualized Training Activities for the year. Fellows’ Self Evaluation helps guide development of their Individualized Training Activities.

Using the [Individualized Training Activities Form](#), insert your activities for each of our program’s competency domains of training (i.e. I. Integration of Science and Practice; II. Ethical and Legal Standards; III. Individual and Cultural Diversity; IV. Assessment; V. Intervention; VI. Consultation and Interprofessional/Interdisciplinary Skills; VII. Teaching/Supervision/Mentoring; VIII. Leadership; IX. Communication and Interpersonal Skills; X. Professional Values, Attitudes, and Behaviors; and XI. Research). CPP fellows' Individualized Training Activities form should list training activities in all competency domains. Click here for a [Sample of Individualized Training Activities](#).

Fellows and supervisors/mentors should review all training activities and discuss the training experiences that will enable the fellow to achieve and demonstrate competency in all domains.

Fellows submit the signed copy of their Individualized Training Activities form to the Training Office where it will be added to the fellow’s training file. The Individualized Training Activities are reviewed and approved by the fellows’ supervisor(s) and CPP Director.
Although supervisors/mentors should provide ongoing feedback regarding your performance throughout the year, formal evaluations will be completed every six months of training. E-mails are sent automatically from MyEvaluations.com letting you know what evaluations need to be completed and the due date.

**Fellow/Supervisor Agreement:** [Fellow/Supervisor Agreement Form](#) (*completed annually and/or if significant changes*)
The Clinical Fellowship Fellow/Supervisor Agreement is completed within MyEvaluations.com. The Fellow/Supervisor Agreement is devised to ensure that the fellow and supervisor/mentor fully understand the fellow’s Individual Training Activities, have discussed what is expected of the fellow to successfully complete the fellowship, and the frequency of supervision and expectation of the supervisor.

Fellows will be assigned by MyEvaluations.com to complete a new Fellow/Supervisor Agreement at the beginning of each training year or at any other time significant changes are made to Individualized Training Activities and/or supervision plan (*e.g., there is a change in your primary supervisor or there are significant changes in your primary clinical or research responsibilities from what was agreed upon previously*). You must inform the Training Office of any changes to your Fellow/Supervisor Agreement.

If, at the beginning of the training year, there are no changes to the fellow’s Individualized Training Activities, he/she will still complete the Fellow/Supervisor Agreement and indicate “No” when asked if the plan reflects a change from the previous one.

If the Fellow/Supervisor Agreement does include changes, clicking “Yes” will prompt your Program Director to review your new training activities. New version signed Individualized Training Activities Form should be submitted to the Training Office. [Note: The Fellowship/Supervisor Agreement is not an evaluation form. Ratings are only done on the Progress Evaluations that are completed every six months of training and the End Evaluations that are completed at the end of the fellowship.]

**Progress Evaluations:** [CPP Clinical Fellowship - Progress](#) (*completed every six months*)
Fellows will receive formal evaluations of their progress every six months of training. The evaluation process involves a face-to-face evaluation meeting between the fellow and supervisor/mentor. The supervisor/mentor then enters form evaluation ratings on MyEvaluations.com. E-mails are sent automatically at the time evaluations are assigned from MyEvaluations.com, letting supervisors know what evaluations need to be completed and the due date.

After the Progress Evaluation is completed, you and your supervisor/mentor can create new Individualized Training Activities or modify existing activities for the remainder of the year if you have already accomplished your annual activities or the activities are determined to be no longer appropriate for another reason. [As noted above, any changes to your Individualized Training Activities should be mutually agreed upon by you and your supervisor/mentor, and any significant changes to your training activities and/or supervision plan should be documented with a new Fellow/Supervisor Agreement.]

**End Evaluations:** [CPP Clinical Fellowship - End](#) (*completed at the end of APA-accredited fellowship year and at the end of unaccredited fellowship year, if a second year of training is available*)
This form must be completed in MyEvaluations.com by your supervisor/mentor at the end of
your fellowship training. Please inform the Training Office as soon as you are aware of the end date of your fellowship training, and the final evaluation forms will be assigned.

**Minimal Expected Levels of Achievement**
At each evaluation time point, fellows are expected, at minimum, to demonstrate satisfactory progress toward achieving independent competence on each item within each competency domain.

Typically, fellows making satisfactory progress need additional, ongoing practice and supervision with these competency domains to achieve independence. At the end of fellowship, fellows are expected to demonstrate competence to perform at the level of an independent practitioner in the field within all domains.

Postdoctoral fellows should be engaged in an open, ongoing dialogue with their supervisor(s) regarding their progress. Fellows have the right to appeal any formal evaluation (please see the Remediation/Grievance Policy).

**Supervisor Evaluations:** *Supervisor Evaluation* *(completed every six months)*
Fellows will be prompted by MyEvaluations.com to complete an Evaluation of Supervisor/Mentor every six months of training. The timing of this evaluation coincides with the fellow’s Progress and End Evaluations. At each six-month evaluation time point, the fellow enters his/her evaluation ratings and comments via MyEvaluations.com, then prints a hard copy of the evaluation form to give to the supervisor/mentor during the face-to-face evaluation meeting to discuss this feedback. After this meeting is held, the final evaluation should be submitted by clicking on the “Finish / Final Submission” button at the bottom of the evaluation form.

**Anonymous Evaluation of Supervisor/Mentor.** Although trainees are encouraged to share feedback with their supervisors directly, it is understood that there are some circumstances in which it can be difficult to deliver feedback. If you find yourself in such a situation, you are encouraged to seek out guidance from your Program Director regarding how you might be able to approach your supervisor in a professional manner to discuss your feedback constructively.

If you do not feel comfortable doing this, or if you and your Program Director determine that it would not be in your best interest to deliver your feedback directly to your supervisor, you can utilize the *Confidential Comments* text box at the bottom of your Supervisor/Mentor Evaluation form to provide feedback to the PFTP Director, which will not be viewed by your supervisor or any other members of the faculty. You may also check the box to request a meeting with the PFTP Director to further discuss any concerns that you have regarding your supervision or training experience.

If anonymous/confidential comments are provided to the PFTP Director in this manner, feedback will not be shared with your supervisor that could identify you as the source of information. However, feedback may be collected over time and shared with the supervisor, when it can be done in an anonymous manner, to improve the overall quality of supervision and training in the program.
Clinical Child Psychology Specialty Program (CCPSP)

Christopher Houck, PhD, Director

The APA-accredited Clinical Child Psychology Specialty Program (CCPSP), provides specialty training in clinical child psychology within hospital-based settings. Postdoctoral fellows in clinically-focused fellowships spend approximately 50-70% time conducting clinical work.

The three aims of the CCPSP are:

1. To produce child psychologists who exhibit an advanced competency level with regard to professional skills/conduct and ethical standards (consistent with APA principles and local regulations) to function effectively as independent practitioners within health service settings;
2. To produce child psychologists who exhibit an advanced competency level with regard to knowledge and skills related to research in order to function effectively as scientist-practitioners within health service settings.
3. To produce child psychologists who exhibit an advanced competency level with regard to the knowledge and skills specific to the specialty of clinical child psychology (consistent with the APA Standards of Accreditation for Health Service Psychology) to function effectively as independent scientist-practitioners in health service settings.

Clinical training supports postdoctoral fellows in establishing clinical proficiency, while integrating a professional role that is well grounded in ethics and the integration of science and practice. By the end of the fellowship, the postdoctoral fellow should attain advanced competence in the knowledge-base and clinical skills of clinical child psychology to function independently in a similar clinical program in a new location.

CCPSP fellowship positions are one year in duration. In some cases, a second year of fellowship may be available when there are opportunities to continue clinical and research training in more depth. [Note: This second year is not an “APA-accredited” fellowship year, but is designated as a Brown postdoctoral fellowship year.] Agreement to continue for a second year of training, when available, is decided upon by the postdoctoral fellow and the primary supervisor midway through the first year. The supervisor informs the postdoctoral fellow that he/she would like him/her to stay a second year by mid-December. Postdoctoral fellows must make a decision by January 1 in order to allow sufficient time to recruit a replacement. Although postdoctoral fellows are paid for a 40-hour week, most find it necessary to work approximately 50 hours a week to best achieve their personal research and clinical career goals during their fellowship training year.

Definition of 20% Research Component

All approved postdoctoral fellowships in the PFTP will contain a minimum of 20% effort devoted to research. It is the supervisor’s responsibility to provide a training experience that will meet this requirement. A day may be set aside specifically for research or the time may be spread out across more than one day, dependent upon the clinical schedule.

The 20% research experience should be active work that is conducted by the postdoctoral fellow (not completely delegated to others), and it should be geared toward producing a traditional scientific product (e.g. manuscript, presentation at a national professional meeting, grant application, instrument development). Postdoctoral fellows decide on the appropriate research activity in conjunction with the faculty supervisor. Ultimately, it is the postdoctoral
fellow’s choice to determine the specific project. Examples of appropriate activities include generating a project from the supervisor’s existing database; designing and implementing a new study; publishing work on projects begun prior to the fellowship including the dissertation. All individualized training activities for postdoctoral fellows must include explicit goals and activities for this research component.

Primary supervisors are responsible for working with Fellows to identify a research supervisor for their postdoctoral fellows. While not required, we encourage the research mentor to be different from the primary supervisor. It is the responsibility of the primary supervisor to monitor that the fellow’s research goals are being met, and that research opportunities reasonably allow for these goals to be achieved. The primary supervisor should coordinate with the research supervisor to work out a mechanism to ensure that this is accomplished. A meeting between both supervisors and the Fellow is recommended for the start of the training year to outline research responsibilities and coordinate integration of these activities into the Fellow’s schedule. In the event that the primary supervisor and research supervisor are the same, the Program Director should meet with the trainee and primary supervisor at the beginning of the year to ensure research activities may be reasonably accomplished given the required clinical responsibilities.

It is the supervisor’s and home institution’s obligation to provide at least minimal resources for the postdoctoral fellow to achieve their research goals (e.g., computing, access to statistical software, research administration/IRB services, assessment space).

The 20% effort (8 hours per week) may include the research didactic component of the PFTP (RFP Core Seminars). Clinical seminars are not included in the 20% time.

Any one of the following would represent an appropriate product from a research activity:
- Peer reviewed publications e.g. journal article
- Book chapter
- Invited articles in professional journals
- Academic presentations outside of Brown Medical School
- Poster presentation, or paper presentation at a regional or national professional meeting, preferably with a published abstract
- Poster presentation at Mind/Brain Research Day
- Grant award from postdoctoral fellow initiated activity
CCPSP Didactics

CCPSP Didactics are listed below:

[NOTE: DUE TO COVID-19, SEMINARS WILL BE HELD IN VIRTUAL FORMAT UNTIL FURTHER NOTICE. PLEASE VIEW SEMINAR SCHEDULE FOR SPECIFICS]

Trainees are able to miss up to 10% of seminars within each seminar series without need for making up the content. If more than 10% of seminars are missed, trainees should discuss options for making them up with the seminar coordinator.

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<td>Mandatory all trainees</td>
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*Noted on the DPHB Grand Rounds announcement

### Postdoctoral Fellowship Training Program Seminars

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<td>2nd Tuesday of each month (Sept-June) 5:00-6:30pm Butler Hospital Duncan Building, Room 159 or Zoom (as noted on schedule)</td>
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### CCPSP Specific Didactics

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<td>Clinical Child Psychology Specialty Seminar</td>
<td>Casey Cragin, Ph.D</td>
<td>Rotating topics including: case conference, peer supervision, job talks, research presentations, and professional development topics for clinical child psychologists</td>
<td>Wednesdays 8-9:30am Butler Hospital, Bradley Hospital, and Coro Building or Zoom (as noted on schedule)</td>
<td>Mandatory for CCPSP fellows</td>
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Postdoc Core Seminar –  
[https://docs.google.com/document/d/174P5Ma4ehAinqdp8H1mii8WhfjV2JckhPez3-rBul/edit?usp=sharing](https://docs.google.com/document/d/174P5Ma4ehAinqdp8H1mii8WhfjV2JckhPez3-rBul/edit?usp=sharing)

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CCPSP Evaluations

Evaluation Time Frame & Forms

Fellows receive a Certificate of Completion from the Postdoctoral Fellowship Training Program only after they have completed 1 full calendar year of training and all evaluations have been completed and submitted.

- Self-Assessment
- Postdoctoral Fellowship Supervision/Evaluations
- Individualized Training Activities Form
- Fellow/Supervisor Agreement Form
- Progress Evaluation
- End Evaluation
- Supervisor Evaluation

Self-Assessment

Prior to start of fellowship, you should have submitted your CCPSP Fellowship Competencies Self-Assessment Form to the Training Office. This form is a self-assessment of your level of competence in each major training area of your fellowship, and is used to assist you in writing your Individualized Training Activities. The Self-Assessment is reviewed by the Director of the CCPSP and put in your trainee file.

Postdoctoral Fellowship Supervision/Evaluations

By your 3rd week of training, and at the beginning of each new training year, all fellows are required to fill out the Postdoctoral Fellowship Supervision/Evaluations Google spreadsheet. This is a listing of faculty supervisor(s), which will be used to accurately assign your evaluations within the MyEvaluations system.

Individualized Training Activities

By your 3rd week of training you will have submitted a signed hard copy your Individualized Training Activities to the Training Office. All fellows and their supervisors/mentors should establish, and mutually agree upon the fellowship Individualized Training Activities for the year. Fellows' Self Evaluation helps guide development of their Individualized Training Activities.

Using the Individualized Training Activities Form, insert your activities for each of our program’s competency domains of training (i.e. I. Integration of Science and Practice; II. Ethical and Legal Standards; III. Individual and Cultural Diversity; IV. Assessment; V. Intervention; VI. Consultation and Interprofessional/Interdisciplinary Skills; VII. Teaching/Supervision/Mentoring; VIII. Leadership; IX. Communication and Interpersonal Skills; X. Professional Values, Attitudes, and Behaviors; and XI. Research). CCPSP fellows' Individualized Training Activities form should list training activities in all competency domains. Click here for a Sample of Individualized Training Activities.

Fellows and supervisors/mentors should review all training activities and discuss the training experiences that will enable the fellow to achieve and demonstrate competency in all domains.

Fellows submit the signed copy of their Individualized Training Activities form to the Training Office where it will be added to the fellow’s training file. The Individualized Training Activities are reviewed and approved by the fellows' supervisor(s) and CCPSP Director.
Although supervisors/mentors should provide ongoing feedback regarding your performance throughout the year, formal evaluations will be completed every six months of training. E-mails are sent automatically from MyEvaluations.com letting you know what evaluations need to be completed and the due date.

**Fellow/Supervisor Agreement:** [Fellow/Supervisor Agreement Form](#) *(completed annually and/or if significant changes)*

The Clinical Fellowship Fellow/Supervisor Agreement is completed within MyEvaluations.com. The Fellow/Supervisor Agreement is devised to ensure that the fellow and supervisor/mentor fully understand the fellow's Individual Training Activities, have discussed what is expected of the fellow to successfully complete the fellowship, and the frequency of supervision and expectation of the supervisor.

Fellows will be assigned by MyEvaluations.com to complete a new Fellow/Supervisor Agreement at the beginning of each training year or at any other time significant changes are made to Individualized Training Activities and/or supervision plan (e.g., there is a change in your primary supervisor or there are significant changes in your primary clinical or research responsibilities from what was agreed upon previously). You must inform the Training Office of any changes to your Fellow/Supervisor Agreement.

If, at the beginning of the training year, there are no changes to the fellow’s Individualized Training Activities, he/she will still complete the Fellow/Supervisor Agreement and indicate “No” when asked if the plan reflects a change from the previous one. If the Fellow/Supervisor Agreement does include changes, clicking “Yes” will prompt your Program Director to review your new training activities. New version signed Individualized Training Activities Form should be submitted to the Training Office. [Note: The Fellowship/Supervisor Agreement is not an evaluation form. Ratings are only done on the Progress Evaluations that are completed every six months of training and the End Evaluations that are completed at the end of the fellowship.]

**Progress Evaluations:** [CCPSP Clinical Fellowship - Progress](#) *(completed every six months)*

Fellows will receive formal evaluations of their progress every six months of training. The evaluation process involves a face-to-face evaluation meeting between the fellow and supervisor/mentor. The supervisor/mentor then enters form evaluation ratings on MyEvaluations.com. E-mails are sent automatically at the time evaluations are assigned from MyEvaluations.com, letting supervisors know what evaluations need to be completed and the due date.

After the Progress Evaluation is completed, you and your supervisor/mentor can create new Individualized Training Activities or modify existing activities for the remainder of the year if you have already accomplished your annual activities or the activities are determined to be no longer appropriate for another reason. (As noted above, any changes to your Individualized Training Activities should be mutually agreed upon by you and your supervisor/mentor, and any significant changes to your training activities and/or supervision plan should be documented with a new Fellow/Supervisor Agreement.)

**End Evaluations:** [CCPSP Clinical Fellowship - End](#) *(completed at the end of APA-accredited fellowship year and at the end of unaccredited fellowship year, if a second year of training is available)*

This form must be completed in MyEvaluations.com by your supervisor/mentor at the end of your fellowship training. Please inform the Training Office as soon as you are aware of the end date of your fellowship training, and the final evaluation forms will be assigned.
**Minimal Expected Levels of Achievement**

At each evaluation time point, fellows are expected, at minimum, to demonstrate satisfactory progress toward achieving independent competence on each item within each competency domain.

Typically, fellows making satisfactory progress need additional, ongoing practice and supervision with these competency domains to achieve independence. At the end of fellowship, fellows are expected to demonstrate competence to perform at the level of an independent practitioner in the field within all domains.

Postdoctoral fellows should be engaged in an open, ongoing dialogue with their supervisor(s) regarding their progress. Fellows have the right to appeal any formal evaluation (please see the [Remediation/Grievance Policy](#)).

---

**Supervisor Evaluations: Supervisor Evaluation (completed every six months)**

Fellows will be prompted by MyEvaluations.com to complete an Evaluation of Supervisor/Mentor every six months of training. The timing of this evaluation coincides with the fellow’s Progress and End Evaluations. At each six-month evaluation time point, the fellow enters his/her evaluation ratings and comments via MyEvaluations.com, then prints a hard copy of the evaluation form to give to the supervisor/mentor during the face-to-face evaluation meeting to discuss this feedback. After this meeting is held, the final evaluation should be submitted by clicking on the “Finish / Final Submission” button at the bottom of the evaluation form.

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**Anonymous Evaluation of Supervisor/Mentor.** Although trainees are encouraged to share feedback with their supervisors directly, it is understood that there are some circumstances in which it can be difficult to deliver feedback. If you find yourself in such a situation, you are encouraged to seek out guidance from your Program Director regarding how you might be able to approach your supervisor in a professional manner to discuss your feedback constructively.

If you do not feel comfortable doing this, or if you and the Program Director determine that it would not be in your best interest to deliver your feedback directly to your supervisor, you can utilize the [Confidential Comments](#) text box at the bottom of your Supervisor/Mentor Evaluation form to provide feedback to the PFTP Director, which will not be viewed by your supervisor or any other members of the faculty. You may also check the box to request a meeting with the PFTP Director to further discuss any concerns that you have regarding your supervision or training experience.

If anonymous/confidential comments are provided to the PFTP Director in this manner, feedback will not be shared with your supervisor that could identify you as the source of information. However, feedback may be collected over time and shared with the supervisor, when it can be done in an anonymous manner, to improve the overall quality of supervision and training in the program.
Clinical Neuropsychology Specialty Program (CNSP)

Jennifer Davis, PhD, ABPP-CN, Director
Anjali Palav, PhD, Associate Director

The APA-accredited Clinical Neuropsychology Specialty Program (CNSP) provides specialty training in clinical neuropsychology within a hospital-based setting that is consistent with Houston Conference Guidelines.

The Clinical Neuropsychology Specialty Program (CNSP) offers postdoctoral specialty training in both adult and pediatric clinical neuropsychology. CNSP fellows are expected to complete two full calendar years of CNSP fellowship training which is consistent with the Houston Conference Guidelines on Specialty Education and Training in Clinical Neuropsychology and requirements for ABPP Board Certification. Training experiences vary across settings depending on patient populations. CNSP fellows devote 70% time to clinical activities, 20% time to research, and 10% to formal required didactic experiences.

The philosophy of the Postdoctoral Fellowship Training Programs (PFTP) is that all postdoctoral fellows in clinical psychology should have clinical and research exposure during their training. The exact nature of training is decided on an individual basis in collaboration with each of the faculty mentors.

The three aims of the Clinical Neuropsychology Specialty Program (CNSP) are:

1. To produce neuropsychologists who exhibit an advanced competency level with regard to professional skills/conduct and ethical standards (consistent with APA principles and local regulations) to function effectively as independent practitioners within health service settings;
2. To produce neuropsychologists who exhibit an advanced competency level with regard to knowledge and skills related to research in order to function effectively as scientist-practitioners within health service settings; and
3. To produce neuropsychologists who exhibit an advanced competency level with regard to the knowledge and skills specific to the specialty of clinical neuropsychology (consistent with the Houston Conference Guidelines) to function effectively as independent scientist-practitioners in health service settings.

Clinical training supports postdoctoral fellows in establishing clinical proficiency, while integrating a professional role that is well grounded in ethics and mental health practice. By the end of the fellowship, the postdoctoral fellow should attain advanced competence in the knowledge-base and clinical skills required for their area of emphasis and should be able to function independently in a similar clinical program in a new location.

Although fellows are paid for a 40-hour week, most find it necessary to work more hours to best achieve their personal research and clinical career goals during their fellowship training year.

Definition of 20% Research Component

All approved postdoctoral fellowships in the PFTP will contain a minimum of 20% effort devoted to research. It is the supervisor’s responsibility to provide a training experience that will meet this requirement. A day may be set aside specifically for research or the time may be spread out across more than one day, dependent upon the clinical schedule.
The 20% research experience should be active work that is conducted by the postdoctoral fellow (not completely delegated to others), and it should be geared toward producing a traditional scientific product (e.g., manuscript, presentation at a national professional meeting, grant application, instrument development). Postdoctoral fellows decide on the appropriate research activity in conjunction with the faculty supervisor. Ultimately, it is the postdoctoral fellow’s choice to determine the specific project. Examples of appropriate activities include generating a project from the supervisor’s existing database; designing and implementing a new study; publishing work on projects begun prior to the fellowship including the dissertation. All individualized training activities for postdoctoral fellows must include explicit goals and activities for this research component.

Primary supervisors are responsible for working with Fellows to identify a research supervisor for their postdoctoral fellows. While not required, we encourage the research mentor to be different from the primary supervisor. It is the responsibility of the primary supervisor to monitor that the fellow’s research goals are being met, and that research opportunities reasonably allow for these goals to be achieved. The primary supervisor should coordinate with the research supervisor to work out a mechanism to ensure that this is accomplished. A meeting between both supervisors and the Fellow is recommended for the start of the training year to outline research responsibilities and coordinate integration of these activities into the Fellow’s schedule. In the event that the primary supervisor and research supervisor are the same, the Program Director should meet with the trainee and primary supervisor at the beginning of the year to ensure research activities may be reasonably accomplished given the required clinical responsibilities.

It is the supervisor’s and home institution’s obligation to provide at least minimal resources for the postdoctoral fellow to achieve their research goals (e.g., computing, access to statistical software, research administration/IRB services, assessment space).

The 20% effort (8 hours per week) may include the research didactic component of the PFTP (DPHB Core Seminars). Clinical seminars are not included in the 20% time.

Any one of the following would represent an appropriate product from a research activity:

- Peer reviewed publications e.g. journal article
- Book chapter
- Invited articles in professional journals
- Academic presentations outside of Brown Medical School
- Poster presentation, or paper presentation at a regional or national professional meeting, preferably with a published abstract
- Poster presentation at Mind/Brain Research Day
- Grant award from postdoctoral fellow initiated activity
CNSP Didactics

CNSP Didactics are listed below:

[NOTE: DUE TO COVID-19, SEMINARS WILL BE HELD IN VIRTUAL FORMAT UNTIL FURTHER NOTICE. PLEASE VIEW SEMINAR SCHEDULE FOR SPECIFICS]

Trainees are able to miss up to 10% of seminars within each seminar series without need for making up the content. If more than 10% of seminars are missed, trainees should discuss options for making them up with the seminar coordinator.

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<td>Child Grand Rounds is offered monthly to all fellows, residents, and faculty and features nationally known faculty presenting their research</td>
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*Noted on the DPHB Grand Rounds announcement

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<td>Clinical Neuropsychology Specialty Program Seminar</td>
<td>Anjali Palav, PhD</td>
<td>CNSP seminar series focuses on topics of relevance to the practice of clinical neuropsychology as well as issues of professional development and preparation for board certification. This is a two-year series of seminars</td>
<td>Weekly Thursdays, 4-5:30pm Neurology Conference Room Fifth Floor, Ambulatory Patient Care (APC) Building Rhode Island Hospital or Zoom (as noted on schedule)</td>
<td>Mandatory for first-year and second-year CNSP fellows</td>
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**Postdoc Core Seminar** –  
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**CNSP Seminar** –  
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Evaluation Time Frame & Forms

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- **Self-Assessment**
- **Postdoctoral Fellowship Supervision/Evaluations**
- **Individualized Training Activities Form**
- **Fellow/Supervisor Agreement Form**
- **Progress Evaluation**
- **End Evaluation**
- **Supervisor Evaluation**

**Self-Assessment**
Prior to start of fellowship, you should have submitted your CNSP Fellowship Competencies Self-Evaluation Form to the Training Office. This form is a self-assessment of your level of competence in each major training area of your fellowship, and is used to assist you in writing your Individualized Training Activities. The Self-Assessment is reviewed by the Director of the CNSP and put in your trainee file.

**Postdoctoral Fellowship Supervision/Evaluations**
By your 3rd week of training, and at the beginning of each new training year, all fellows are required to fill out the Postdoctoral Fellowship Supervision/Evaluations Google spreadsheet. This is a listing of faculty supervisor(s), which will be used to accurately assign your evaluations within the MyEvaluations system.

**Individualized Training Activities**
By your 3rd week of training you will have submitted a signed hard copy your Individualized Training Activities to the Training Office. All fellows and their supervisors/mentors should establish, and mutually agree upon the fellowship Individualized Training Activities for the year.

Fellows’ Self Evaluation helps guide development of their Individualized Training Activities. Using the Individualized Training Activities Form, insert your activities for each of our program’s competency domains of training (i.e. I. Integration of Science and Practice; II. Ethical and Legal Standards; III. Individual and Cultural Diversity; IV. Assessment; V. Intervention; VI. Consultation and Interprofessional/Interdisciplinary Skills; VII. Teaching/Supervision/Mentoring; VIII. Leadership; IX. Communication and Interpersonal Skills; X. Professional Values, Attitudes, and Behaviors; and XI. Research). CNSP fellows' Individualized Training Activities form should list training activities in all competency domains. Click here for a Sample of Individualized Training Activities.

Fellows and supervisors/mentors should review all training activities and discuss the training experiences that will enable the fellow to achieve and demonstrate competency in all domains.

Fellows submit the signed copy of their Individualized Training Activities form to the Training Office where it will be added to the fellow’s training file. The Individualized Training Activities are reviewed and approved by the fellows' supervisor(s), CNSP Associate Director, and CNSP Director.
Although supervisors/mentors should provide ongoing feedback regarding your performance throughout the year, formal evaluations will be completed every six months of training. E-mails are sent automatically from MyEvaluations.com letting you know what evaluations need to be completed and the due date.

**Fellow/Supervisor Agreement:** Fellow/Supervisor Agreement Form *(completed annually and/or if significant changes)*
The Fellow/Supervisor Agreement is completed within MyEvaluations.com. The Fellow/Supervisor Agreement is devised to ensure that the fellow and supervisor/mentor fully understand the fellow’s Individual Training Activities, have discussed what is expected of the fellow to successfully complete the fellowship, and the frequency of supervision and expectation of the supervisor.

Fellows will be assigned by MyEvaluations.com to complete a new Fellow/Supervisor Agreement at the beginning of each training year or at any other time significant changes are made to your Individualized Training Activities and/or supervision plan (e.g., there is a change in your primary supervisor or there are significant changes in your primary clinical or research responsibilities from what was agreed upon previously). You must inform the Training Office of any changes to your Fellow/Supervisor Agreement.

If there are no changes to your individualized training activities, you will still complete the Fellow/Supervisor Agreement and indicate “No” when asked if the Fellow/Supervisor Agreement reflects a change.

If the Fellow/Supervisor Agreement does include changes, clicking “Yes” will prompt your Program Director to review your new training activities. New version signed Individualized Training Activities Form should be submitted to the Training Office.

[Note: The Fellow/Supervisor Agreement is not an evaluation form; therefore, supervisors are not asked to rate any goals. Ratings are only done on the Progress Evaluations that are completed every six months of training and the End Evaluations that are completed at the end of the fellowship.]

**Progress Evaluations:** CNSP Clinical Fellowship - Progress *(completed every six months)*
Fellows will receive formal evaluations of their progress every six months of training. The evaluation process involves a face-to-face evaluation meeting between the fellow and supervisor/mentor. The supervisor/mentor then enters form evaluation ratings on MyEvaluations.com. E-mails are sent automatically at the time evaluations are assigned from MyEvaluations.com, letting supervisors know what evaluations need to be completed and the due date.

After the Progress Evaluation is completed, you and your supervisor/mentor can create new Individualized Training Activities or modify existing activities for the remainder of the year if you have already accomplished your annual activities or the activities are determined to be no longer appropriate for another reason. (As noted above, any changes to your Individualized Training Activities should be mutually agreed upon by you and your supervisor/mentor, and any significant changes to your training activities and/or supervision plan should be documented with a new Fellow/Supervisor Agreement.)

**End Evaluations:** CNSP Clinical Fellowship - End *(completed at the end of the fellowship)*
This form must be completed by your supervisor/mentor at the end of your fellowship training.
Please inform the Training Office as soon as you are aware of the end date of your fellowship training, and the final evaluation forms will be assigned.

**Minimal Expected Levels of Achievement**
At each evaluation time point, fellows are expected, at minimum, to demonstrate satisfactory progress toward achieving independent competence on each item within each competency domain.

Typically, fellows making satisfactory progress need additional, ongoing practice and supervision with these competency domains to achieve independence. At the end of fellowship, fellows are expected to demonstrate competence to perform at the level of an independent practitioner in the field within all domains.

Postdoctoral fellows should be engaged in an open, ongoing dialogue with their supervisor(s) regarding their progress. Fellows have the right to appeal any formal evaluation (please see the [Remediation/Grievance Policy](#)). Supervisors and fellows take mutual responsibility for ensuring that these evaluations are completed in a timely fashion.

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**Supervisor Evaluations:** Supervisor Evaluation *(completed every six months)*
Fellows will be prompted by MyEvaluations.com to complete an Evaluation of Supervisor/Mentor every six months of training. The timing of this evaluation coincides with the fellow’s Progress and End Evaluations. At each six-month evaluation time point, the fellow enters his/her evaluation ratings and comments via MyEvaluations.com, then prints a hard copy of the evaluation form to give to the supervisor/mentor during the face-to-face evaluation meeting to discuss this feedback. After this meeting is held, the final evaluation should be submitted by clicking on the “Finish / Final Submission” button at the bottom of the evaluation form.

**Anonymous Evaluation of Supervisor/Mentor.** Although trainees are encouraged to share feedback with their supervisors directly, it is understood that there are some circumstances in which it can be difficult to deliver feedback. If you find yourself in such a situation, you are encouraged to seek out guidance from your faculty advisor and/or CNSP Director or Associate Director regarding how you might be able to approach your supervisor in a professional manner to discuss your feedback constructively.

If you do not feel comfortable doing this, or if you and your faculty advisor or Program Director determine that it would not be in your best interest to deliver your feedback directly to your supervisor, you can utilize the **Confidential Comments** text box at the bottom of your Supervisor/Mentor Evaluation form to provide feedback to the PFTP Director, which will not be viewed by your supervisor or any other members of the faculty. You may also check the box to request a meeting with the PFTP Director to further discuss any concerns that you have regarding your supervision or training experience.

If anonymous/confidential comments are provided to the PFTP Director in this manner, feedback will not be shared with your supervisor that could identify you as the source of information. However, feedback may be collected over time and shared with the supervisor, when it can be done in an anonymous manner, to improve the overall quality of supervision and training in the program.
Research Fellowship Program (RFP)
Elissa Jelalian, PhD, Director
Jennifer Freeman, PhD, Associate Director

The postdoctoral Research Fellowship Program (RFP) provides postdoctoral research training for individuals from various disciplines related to behavioral science. These research focused fellowships are funded by individual faculty research grants or NIH T32/F32 Training Grants (Child Mental Health, Cardiovascular Behavioral Medicine, Adolescent/Young Adult Biobehavioral HIV, Suicide Research, and Childhood Stress, Trauma, and Resilience). This program offers emphasis areas in Adult, Child, Health Psychology/Behavioral Medicine, and Neuropsychology. This is a research program and not APA-accredited.

Postdoctoral fellows in a research-focused fellowship spend at least 60% and up to 90% of their time on research. The primary goal of the research track is to develop both the knowledge base and the skills to begin an independent research career within the chosen area of emphasis. This will include:

1) a critical understanding of the literature and the current issues in the field; and
2) the ability to independently develop a specific research project.

Postdoctoral fellows whose positions have a primary research focus are most often provided with experience working on grant-funded projects. Close supervision is provided for experimental design, research techniques and grant writing. Grant writing is a focus of the training in some, but not all, of the fellowships.

Primary independent activities on a research fellowship may include: developing a grant proposal which is submitted for funding; proposing, designing, and implementing a small research project; and/or conducting secondary data analyses on existing data sets. Projects are typically conducted in collaboration with the faculty advisor and can take advantage of ongoing programmatic research at Brown University.

Postdoctoral fellowship appointments are granted for a period of one year, with start dates typically ranging from July to September. Agreement to continue for a second year of training (if available) is decided upon by the fellow and the primary supervisor midway through the first year. The supervisor informs the fellow that he/she would like the fellow to stay a second year by mid-December. Postdoctoral fellows must make a decision by January 1st in order to allow sufficient time to recruit a replacement.

Although fellows are paid for a 40-hour week, most find it necessary to work more hours to best achieve their personal research and clinical career goals during their fellowship training year.

If fellows in the research track intend to practice upon program completion, we recommend they construct their Individualized Training Activities to meet all requirements for licensure in Rhode Island by the end of the fellowship. Postdoctoral fellows pursuing licensure are asked to identify a primary clinical supervisor at the start of their training experience. A meeting with the research mentor and primary clinical supervisor should be scheduled to facilitate development of a comprehensive clinical activity plan. The directors of the Research Fellowship Program are available to assist with identifying clinical supervisors and activities as needed.
Institutional (T32) and Individual (F32) NIH-Funded Fellowships

OVERVIEW

The Department of Psychiatry and Human Behavior (DPHB) in the Warren Alpert Medical School of Brown University offers research training at the postdoctoral level for qualified individuals. Research fellowships are funded by T32 Institutional Research Service Awards (Child Mental Health, Cardiovascular Behavioral Medicine, Adolescent/Young Adult Biobehavioral HIV, Suicide Research, and Childhood Stress, Trauma, and Resilience) and F32 Individual National Research Service Awards.

The Postdoctoral Fellowship Training Program (PFTP) is coordinated by the Training Committee of the Clinical Psychology Training Programs at Brown: A Consortium of the Providence VA Medical Center, Lifespan, and Care New England in conjunction with the NIH Institutional Research Training Committee composed of all the Directors and Associate Directors of the various T32 grants in the DPHB. The Consortium is centrally controlled through a committee, which is within the DPHB of the Brown Medical School. The Training Committee, under the leadership of the Director, is the central coordinating body of the NIH Research Training Program’s policies and goals. A fellow, elected by the postdoctoral fellows, is also on the Training committee.

Postdoctoral research training at Brown allows the fellows to have as much autonomy as possible. The exact nature of training (the mixture of didactic experiences, exposure to ongoing faculty research, direct research involvement of the fellow, grant writing etc.) is decided on an individual basis by each of the faculty mentors and fellows.

The primary goal of NIH-funded research fellowships is to develop both the knowledge base and the skills to begin an independent research career within the chosen specialty area. This will include:

1) a critical understanding of the literature and the current issues in the field;
2) the ability to independently develop a specific research project; and
3) the ability to write a competitive grant proposal. Fellows are typically provided with experience working on grant-funded projects. Close supervision is provided for experimental design, research techniques, and grant writing. A primary expectation is to propose and develop a K, RO3, R21, R34 or New Investigator RO1 grant proposal.

NIH-funded Specific Fellowship Requirements

A fellow must spend at least one full calendar year in the training program to successfully graduate. NIH encourages all fellows to complete the entire two-year research fellowship. If a fellow would like to leave more than one month prior to the official date of completion during the second year, they should discuss their departure with their mentor early on in the process so a mutually beneficial departure date can be arranged. Remember, there is a payback requirement of this fellowship that will need to be negotiated with NIH if a fellow decides to leave early and is not continuing in a research position. Once a fellow has agreed to complete a second year of research training, the program fully expects the fellow to complete the entire second year of training.
RFP Didactics

RFP Didactics are listed below:

[NOTE: DUE TO COVID-19, SEMINARS WILL BE HELD IN VIRTUAL FORMAT UNTIL FURTHER NOTICE. PLEASE VIEW SEMINAR SCHEDULE FOR SPECIFICS]

Trainees are able to miss up to 10% of seminars within each seminar series without need for making up the content. If more than 10% of seminars are missed, trainees should discuss options for making them up with the seminar coordinator.

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**Department Required**

<table>
<thead>
<tr>
<th>Title</th>
<th>Coordinator</th>
<th>Description</th>
<th>Time &amp; Location</th>
<th>Attendance Required</th>
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<tbody>
<tr>
<td>DPHB Academic Grand Rounds</td>
<td>Chair’s Office</td>
<td>Grand Rounds is offered monthly to all fellows, residents, and faculty and features nationally known faculty presenting their research</td>
<td>1st Wednesday of each month (Sept-June) 11-12:15pm (virtual)</td>
<td>Mandatory all trainees</td>
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<tr>
<td>Child &amp; Adolescent Grand Rounds</td>
<td>Child Psychiatry</td>
<td>Child Grand Rounds is offered monthly to all fellows, residents, and faculty and features nationally known faculty presenting their research</td>
<td>2nd Wednesday of each month (Sept-June) 11-12:00pm Bradley Hospital Pine Room; remote sessions available at RIH campus</td>
<td>If in a Child-focused fellowship, you may be required to attend. Speak with your supervisor</td>
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**Postdoctoral Fellowship Training Program Seminars**

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<thead>
<tr>
<th>Title</th>
<th>Coordinator</th>
<th>Description</th>
<th>Time &amp; Location</th>
<th>Attendance Required</th>
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<tbody>
<tr>
<td>Postdoc Core Seminar</td>
<td>Carla Correia, PsyD</td>
<td>Monthly seminar series is offered to all fellows. Recognizing that most of the Fellows will likely spend some reasonable percentage of their career in clinical practice, many of the topics in this seminar series focus on practice issues such as: the licensure process, career development, supervising and mentoring, and developing an office-based practice.</td>
<td>2nd Tuesday of each month (Sept-June) 5:00-6:30pm Butler Hospital Duncan Building, Room 159 or Zoom (as noted on schedule)</td>
<td>Mandatory for all first-year fellows with a clinical psychology degree and optional for others</td>
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<tr>
<td>Clinical Ethics Seminars</td>
<td>Heather Hunter, PhD</td>
<td>Monthly seminar on Clinical Ethics is offered to all fellows</td>
<td>1st Wednesday of each month (Oct-May)</td>
<td>10-11am Butler Hospital Duncan Building, Room 159 or Zoom (as noted on schedule)</td>
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<tr>
<th>RFP Specific Didactics</th>
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<tr>
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</thead>
<tbody>
<tr>
<td>RFP Seminar</td>
<td>Graham Thomas, PhD</td>
<td>Weekly research seminar series is required for all RFP fellows from the various hospitals. The Brown T32 programs combine efforts to produce a comprehensive research seminar series each academic year. The series is coordinated by representatives from each of the T32 programs. Three core areas (research methods, grant related information and writing, and research ethics) are currently offered.</td>
<td>Weekly Friday Mornings 9-10am Butler Hospital Duncan Building, Room 159 or Zoom (as noted on schedule)</td>
<td>Mandatory for all first-year RFP fellows. Research Ethics portion of the seminars are MANDATORY for all first- and second-year RFP fellows. A Special Topics in Statistics seminar is optional for all attend. Clinical fellows negotiate attendance at all or part of this series with their supervisor.</td>
</tr>
<tr>
<td>Adult &amp; Behavioral Medicine Grant Writing Seminars</td>
<td>Tracie Shea, PhD</td>
<td>Grant writing with an Adult and Behavioral Medicine focus</td>
<td>Weekly Wednesday’s 9:00-10:00am - Beginning September 14 Butler Hospital Ray Hall, Room 5 (Upstairs) or Zoom (as noted on schedule)</td>
<td>Mandatory for all first-year Behavioral Medicine T32 fellows and F32 fellows, unless they elect to attend the Child Grant Writing Seminar. Optional for all others</td>
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<tr>
<td>Child Grant Writing Seminar</td>
<td>Elissa Jelalian, PhD &amp; Jennifer Freeman, PhD</td>
<td>Grant writing seminar with a child focus</td>
<td>Weekly, Friday Mornings (Sept-May) 10-11am Butler Hospital Duncan Building, Room 159 or Zoom (as noted on schedule)</td>
<td>Mandatory for all first- and second-year Child T32 and F32 fellows. Optional for all others.</td>
</tr>
<tr>
<td><strong>Cardiovascular Behavioral Medicine T32 Research Seminars</strong></td>
<td>Carly Goldstein, PhD</td>
<td>The goal of this course is to provide grounding in cardiovascular disease with a focus on the role of behavior and behavioral intervention in reducing CVD burden.</td>
<td>Tuesday afternoons (September - December) 1-3:00pm Weight Control and Diabetes Research Center 196 Richmond Street, 3rd Floor Conf. Room 309 or Zoom (as noted on schedule)</td>
<td>Mandatory for all 1st &amp; 2nd yr Beh Med T32 fellows, encouraged for Beh Med focused RFP fellows. Optional for all others.</td>
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<td><strong>Suicide T32 Research Seminars</strong></td>
<td>Michael Armey, PhD</td>
<td>This comprehensive series is focused on key matters related to research on suicide and suicide prevention, inclusive of methods, regulatory concerns, and ethical issues.</td>
<td>Monthly, second Wednesday (September-May) 10-11:00am Butler Hospital, Duncan Building, Rm. 159 or Zoom (as noted on schedule)</td>
<td>Mandatory of all Suicide T32 Research Fellows. Optional for all others if space allows.</td>
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Postdoc Core Seminar –  
https://docs.google.com/document/d/174P5Ma4ehAinqdp8H1muii8WhfjV2JckhPez3_-rBul/edit?usp=sharing

Clinical Ethics Seminar –  
https://docs.google.com/document/d/1op3NL4DDPVsDx9DoyuPvFG96CKdQW_sXR0GbrypE2OA/edit?usp=sharing

RFP Seminar –  https://docs.google.com/document/d/1PiL7KT0wuE8BBxe9kcBBS8FsSMqA7RZBh3JsPxrzMg/edit?usp=sharing

Adult & Behavioral Medicine Grant Writing Seminar –  
https://calendar.google.com/calendar/u/0?cid=YnJvd24uZWR1XzBzcG52dnZrcmVsMXY1bXBn3QyMzFhZ3JrQGdyb3VwLmNhGVuZGFyLmdvb2dsZS5jb20

Child Grant Writing Seminar -  
https://calendar.google.com/calendar/u/0?cid=YnJvd24uZWR1X3J0anR2M2FrOHBlMmxrNmg0dT1cWxtbXVrQGdyb3VwLmNhGVuZGFyLmdvb2dsZS5jb20

Suicide T32 Research Seminar –  
https://docs.google.com/document/d/1tw6l1WZh5wJK62Sq1s_rFWxGs4ZexkKrM1OUJtv4I/edit?usp=sharing
RFP Evaluations

Evaluation Time Frame:
Fellows receive a Certificate of Completion from the Postdoctoral Fellowship Training Program only after they have completed 1 full calendar year of training and all evaluations have been completed and submitted.

- Postdoctoral Fellowship Supervision/Evaluations
- Individualized Training Activities Form
- Fellow/Supervisor Agreement Form
- Progress Evaluation
- End Evaluation
- Supervisor Evaluation

Postdoctoral Fellowship Supervision/Evaluations
By your 3rd week of training, and at the beginning of each new training year, all fellows are required to fill out the Postdoctoral Fellowship Supervision/Evaluations Google spreadsheet. This is a listing of faculty supervisor(s), which will be used to accurately assign your evaluations within the MyEvaluations system.

Individualized Training Activities
By your 3rd week of training you will have submitted a signed hard copy your Individualized Training Activities to the Training Office. All fellows and their supervisors/mentors should establish, and mutually agree upon the fellowship Individualized Training Activities for the year.

Using the Individualized Training Activities Form, insert your activities for each of our program’s competency domains of training (i.e. I. Integration of Science and Practice; II. Ethical and Legal Standards; III. Individual and Cultural Diversity; IV. Assessment; V. Intervention; VI. Consultation and Interprofessional/Interdisciplinary Skills; VII. Teaching/Supervision/Mentoring; VIII. Leadership; IX. Communication and Interpersonal Skills; X. Professional Values, Attitudes, and Behaviors; and XI. Research). RFP fellows should have training activities listed in Objectives areas I-III and VII-XI, but may not have training activities listed in Objective areas IV-VI unless sitting for licensure. If this is the case simply put “n/a”. Click here for a Sample of Individualized Training Activities.

Fellows and supervisors/mentors should review all training activities and discuss the training experiences that will enable the fellow to achieve and demonstrate competency in all domains.

Fellows submit the signed copy of their Individualized Training Activities form to the Training Office where it will be added to the fellow’s training file. The Individualized Training Activities are reviewed and approved by the fellows’ supervisor(s), Director of the RFP, and Director of the PFTP.

Although supervisors/mentors should provide ongoing feedback regarding your performance throughout the year, formal evaluations will be completed every six months of training. E-mails are sent automatically from MyEvaluations.com letting you know what evaluations need to be completed and the due date.

Fellow/Supervisor Agreement: Fellow/Supervisor Agreement Form (completed annually and/or if significant changes)
The Fellow/Supervisor Agreement is completed within MyEvaluations.com. The
Fellow/Supervisor Agreement is devised to ensure that the fellow and supervisor/mentor fully understand the fellow’s Individual Training Activities, have discussed what is expected of the fellow to successfully complete the fellowship, and the frequency of supervision and expectations of the supervisor.

Fellows will be assigned by MyEvaluations.com to complete a new Fellow/Supervisor Agreement at the beginning of each training year or at any other time significant changes are made to Individualized Training Activities and/or supervision plan (e.g., there is a change in your primary supervisor or there are significant changes in your primary clinical or research responsibilities from what was agreed upon previously). You must inform the Training Office of any changes to your Fellow/Supervisor Agreement.

If, at the beginning of the training year, there are no changes to the fellow’s Individualized Training Activities, he/she will still complete the Fellow/Supervisor Agreement and indicate “No” when asked if the plan reflects a change from the previous one.

If the Fellow/Supervisor Agreement does include changes, clicking “Yes” will prompt your Program Director to review your new training activities. New version signed Individualized Training Activities Form should be submitted to the Training Office.

[Note: The Fellow/Supervisor Agreement is not an evaluation form. Ratings are only done on the Progress Evaluations that are completed every six months of training and the End Evaluations that are completed at the end of the fellowship.]

**Progress Evaluations: RFP Research Fellowship - Progress** *(completed every six months)*

Fellows will receive formal evaluations of their progress every six months of training. The evaluation process involves a face-to-face evaluation meeting between the fellow and supervisor/mentor. The supervisor/mentor then enters form evaluation ratings on MyEvaluations.com. E-mails are sent automatically at the time evaluations are assigned from MyEvaluations.com, letting supervisors know what evaluations need to be completed and the due date.

After the **Progress Evaluation** is completed, you and your supervisor/mentor can create new Individualized Training Activities or modify existing activities for the remainder of the year if you have already accomplished your annual activities or the activities are determined to be no longer appropriate for another reason. *(As noted above, any changes to your Individualized Training Activities should be mutually agreed upon by you and your supervisor/mentor, and any significant changes to your training activities and/or supervision plan should be documented with a new Fellow/Supervisor Agreement.)*

**End Evaluations: RFP Research Fellowship - End** *(completed at the end of the fellowship)*

This form must be completed in MyEvaluations.com by your supervisor/mentor at the end of your fellowship training. Please inform the Training Office as soon as you are aware of the end date of your fellowship training, and the final evaluation forms will be assigned.

**Minimal Expected Levels of Achievement**

At each evaluation time point, fellows are expected, at minimum, to demonstrate satisfactory progress toward achieving independent competence on each item within each competency domain.
Typically, fellows making satisfactory progress need additional, ongoing practice and supervision with these competency domains to achieve independence. At the end of fellowship, fellows are expected to demonstrate competence to perform at the level of an independent practitioner in the field within all domains.

Postdoctoral fellows should be engaged in an open, ongoing dialogue with their supervisor(s) regarding their progress. Fellows have the right to appeal any formal evaluation (please see the Remediation/Grievance Policy).

**Supervisor Evaluations: Supervisor Evaluation (completed every six months)**

Fellows will be prompted by MyEvaluations.com to complete an Evaluation of Supervisor/Mentor every six months of training. The timing of this evaluation coincides with the fellow’s Progress and End Evaluations. At each six-month evaluation time point, the fellow enters his/her evaluation ratings and comments via MyEvaluations.com, then prints a hard copy of the evaluation form to give to the supervisor/mentor during the face-to-face evaluation meeting to discuss this feedback. After this meeting is held, the final evaluation should be submitted by clicking on the “Finish / Final Submission” button at the bottom of the evaluation form.

**Anonymous Evaluation of Supervisor/Mentor.** Although trainees are encouraged to share feedback with their supervisors directly, it is understood that there are some circumstances in which it can be difficult to deliver feedback. If you find yourself in such a situation, you are encouraged to seek out guidance from your Program Director regarding how you might be able to approach your supervisor in a professional manner to discuss your feedback constructively.

If you do not feel comfortable doing this, or if you and your Program Director determine that it would not be in your best interest to deliver your feedback directly to your supervisor, you can utilize the Confidential Comments text box at the bottom of your Supervisor/Mentor Evaluation form to provide feedback to the PFTP Director, which will not be viewed by your supervisor or any other members of the faculty. You may also check the box to request a meeting with the PFTP Director to further discuss any concerns that you have regarding your supervision or training experience.

If anonymous/confidential comments are provided to the PFTP Director in this manner, feedback will not be shared with your supervisor that could identify you as the source of information. However, feedback may be collected over time and shared with the supervisor, when it can be done in an anonymous manner, to improve the overall quality of supervision and training in the program.
Licensure

Policy Statement on Clinical Hours toward Licensure

Clinical Psychology Program (CPP), the Clinical Child Specialty Program (CCPSP), and the Clinical Neuropsychology Specialty Program (CNSP) fellowship positions are designed to meet criteria for licensure. The following information is provided for postdoctoral fellows in Research Fellowship (RFP) positions.

The Clinical Hours Log is to be used to track your clinical hours toward licensure. This record should be retained by the fellow for use when seeking verification of training for licensure.

If postdoctoral fellows are interested in applying for licensure during their fellowship, they should plan the clinical training portion of their fellowship to ensure that it meets the minimal requirements set by the training committee. The Brown guidelines stipulate that to earn sufficient clinical experience for licensure, postdoctoral fellows should take part in a minimum of 500 hours of professional psychological services, typically 25% time over a one-year period or 12.5% time over a two-year period based on a standard 40-hour week.

Only supervision provided by a licensed psychologist (or psychiatrist in some states) is covered. Individuals hoping to be licensed in other states should carefully check state requirements; some states require more hours and/or more specificity about types of activities. Please note that the 500-hour minimum applies even if the state requires fewer hours. The 500-hour requirement is stipulated by the training program and may not be over ridden by other guidelines. Board certification entities may require more than 500 hours. Fellows who plan to pursue board certification should familiarize themselves with the clinical hours requirement of the board certifying entity and plan accordingly.

Clinical activities for licensure must be noted on the Individualized Training Activities form, formally evaluated by the clinical supervisor, and the experience must occur at an affiliated institution. Moonlighting hours may not be used as supervised training activities and do not count toward the 500 hours.

According to APPIC, professional psychological services are defined as services to patients/clients, students, consultees and/or agencies. These services may include psychotherapy, intervention, assessment, and/or consultation either as part of clinical care or a clinical research protocol. Clinical policy-making, program design and implementation, clinical report writing, and serving as a clinical supervisor (of clinical or research staff conducting clinical interviews or intervention with patient populations) are also covered. Clinical research, i.e. research activities that are primarily clinical in nature and involve direct patient care are also covered. Some clinical activities that directly affect patient care, such as developing a treatment manual, may also count as hours.

Activities that would not count toward clinical hours include research protocols with non-patient populations, assessment of non-clinical populations, supervision of research data collection (even with patient populations), supervising research staff on research tasks (such as data entry or data analysis on clinical data sets) and clinical activities with patient populations that are not supervised by a licensed clinician.
When seeking supervisor verification of training for licensure, postdoctoral fellows in primarily research positions must submit the completed Clinical Hours Log form and the Licensure Board’s Supervisor Verification Form to the Training office for review by the Director of the PFTP. Individual supervisors should not sign licensure forms. Postdoctoral Fellows in APA-accredited postdoctoral fellowships or fellows in primarily clinical fellowships do not need to submit the Clinical Hours Log form to the Training Office.

For more information regarding Licensure in the State of Rhode Island go to the RI Department of Health Website to obtain application materials or call: 401-272-2827.

**Committee on Diversity, Equity, Inclusion and Belonging (DEIB)**

The Postdoctoral Fellowship Training Program is committed to increasing the number of trainees from diverse backgrounds, supporting research with diverse populations, and promoting attention to diversity, equity, and inclusion in training and clinical services. We have a strong commitment to integrating diverse cultural perspectives into our core curriculum, providing ongoing educational opportunities for trainees and faculty, and promoting awareness of issues of diversity within all components of the training program. Key commitments in this area are reflected in the work of two committees whose missions focus on diversity, equity, inclusion, and anti-racism. Both the Committee on Diversity, Equity, Inclusion, and Belonging (DEIB) and the Anti-Racism Steering Committee (ARSC; described below) encourage participation by postdoctoral fellows. Please consider these opportunities if they are of interest to you and the time commitment can be accommodated within your schedule.

The Clinical Psychology Training Programs at Brown established a Diversity Committee in 2000, which has been an ongoing, vibrant element of our program. Recently renamed, the Committee on Diversity, Equity, Inclusion and Belonging (DEIB) informs didactics and assists in recruiting trainees and faculty from diverse backgrounds, as well as those interested in diversity-related research or clinical practice. Postdoctoral fellows and faculty interested in joining the DEIB, are asked to contact Dr. Ernestine Jennings.

The DEIB also coordinates a “Diversity Mentoring Program” to match trainees of diverse backgrounds and/or interested in diversity research with faculty mentors. The primary objectives of the Diversity Mentoring Program are to facilitate networking and career development among trainees and faculty of the Department of Psychiatry and Human Behavior (DPHB) and the Center for Alcohol and Addiction Studies (CAAS), as well as to offer trainees and faculty opportunities to discuss clinical, research, and professional issues relevant to diversity in a supportive collegial environment. For our purposes, diversity is defined broadly to include, but is not limited to, issues of gender, religion, culture, age, race/ethnicity, sexual orientation, nationality, disabilities, and socio-economic background. You are qualified to be a mentee if you are a trainee or a junior faculty member affiliated with DPHB or CAAS. Look for the next enrollment opportunity via email or contact Dr. Athene Lee.
Department of Psychiatry and Human Behavior Anti-Racism Steering Committee (ARSC)

In early 2021, DPHB partnered with the Diversity, Equity, Inclusion, and Belonging Committee and other local groups focused on anti-racism, diversity, equity, and inclusion to develop an Anti-Racism Steering Committee. This committee, comprised of trainees and faculty, is responsible for developing a coordinated and effective anti-racism action plan. Postdoctoral fellows are invited to consider joining the Steering Committee or one of the ARSC Working Groups described below.

Communications: Collaborates with the steering committee and other working groups to share anti-racism-related goals, plans, and actions with our academic and broader community.

Community Outreach: Focuses on assessing the needs of BIPOC communities, involving community partners and stakeholders in planning and implementation of clinical, educational and research interventions, and continuously seeking feedback to enhance future partnerships in mental health services.

Educational Programming: Aims to support all trainees and faculty in the department in developing a working foundation of knowledge and practice in anti-racist clinical care, research, supervision, teaching, advocacy, and leadership.

Faculty Policies: Aims to create and sustain policies that actively promote anti-racism in DPHB by clearly defining, supporting, and incentivizing anti-racist actions among faculty in the areas of research, training, evaluation, supervision, and clinical practice.

Recruitment & Retention: Focuses on recommendations for ways to make the DPHB a more welcoming and inclusive department and to increase recruitment and retention of historically underrepresented faculty members.

Moonlighting

Some postdoctoral fellows may choose to seek employment outside of their clinical and research settings. There are several requirements that fellows must follow regarding the nature of these moonlighting activities:

- Fellows may not engage in activities for which they are not professionally prepared. For example, providing direct psychological services requires that the provider be licensed in the jurisdiction where the services are rendered. Thus, an unlicensed fellow may not provide such services.
- Fellows may not present themselves as affiliated with Brown University when they engage in moonlighting employment activities (unless the employment is at a Brown affiliated site). This prohibition includes advertising, use of business cards, description of credentials, etc.
- Fellows must assume liability for the professional activities associated with their moonlighting employment. Malpractice and liability coverage provided in the Brown clinical and research sites does not extend outside of those settings. It is the professional obligation of fellows to be appropriately insured when working outside of their clinical and research settings.
- Moonlighting experiences cannot in any way interfere with the usual work schedule of the fellow in his or her clinical and research settings. Any request to alter work...
schedules must be approved by the supervisor(s) in advance, and such approval is at the total discretion of the supervisor(s).

- For fellows who are not meeting their research and/or clinical training goals, supervisors may legitimately question whether moonlighting activities are contributing to poor performance in the training program. A remediation plan (mutually agreed upon by fellows and supervisors) may include a provision that the fellow will not engage in any moonlighting employment.
- All moonlighting employment experiences that involve activities that fall under the broad sphere of the fellow’s professional group must adhere to the ethical standards of that profession.
- Fellows may not engage in moonlighting employment with any of their clinical or research supervisors. This is considered a conflict of interest, which could be to the detriment of the fellows’ training experience. Fellows may, however, moonlight in their home institutions if they are under the supervision of individuals who are not part of their primary training supervision team. In this case, fellows are encouraged to confirm that there is an established method of payment for moonlighting activities.
- Supervised clinical hours accumulated during moonlighting activities are not part of the supervised activities to which Brown faculty supervisors can ethically attest as part of the fellow’s training experience. These experiences must be confirmed by the moonlighting supervisor. Moonlighting activities are unlikely to provide sufficient hours for licensure, even when confirmed by moonlighting supervisor.
- Fellows are strongly advised to discuss moonlighting opportunities with their supervisors prior to making commitments to those activities. This will minimize the possibility that the moonlighting will interfere with their training experience. Although moonlighting is considered the fellow’s private and personal experience, this advice is meant to minimize potential problems that might arise.
- Federal guidelines stipulate that T32/F32 fellows must limit their moonlighting to 10 hours per week. All clinical/research fellows are strongly advised to limit moonlighting employment to no more than 10 hours per week. Although the time commitment of these experiences is not regulated by the Brown program, exceeding this 10-hour limit will typically interfere with the quality of the training experience. Furthermore, fellows may not engage in employment activities that would violate time or salary limits specified in the policies of their home institutions.
- Failure to adhere to these policies and procedures will be considered as cause for termination from the Clinical Psychology Training Programs at Brown.

All fellows are asked to sign the PFTP Fellowship Commitment Agreement which certifies that they understand the conditions under which they may engage in moonlighting employment experiences.

**Media Requests**

On occasion clinical psychology residents and postdoctoral fellows have been approached by the media to give an interview or provide information on a topic in which they may have special knowledge or involvement. However, special procedures must be followed by the trainee prior to any communication with the media including television, radio or newspapers. Clinical psychology residents and postdoctoral fellows who are approached by the media must obtain approval from their respective hospital Chief of Service and the PFTP Director to ensure that all administrative and ethical issues have been properly addressed prior to their appearance or the provision of information.
Stipends & Benefits

Stipends

Postdoctoral fellows may be hired by Brown University or one of its affiliated hospitals. Although the Consortium makes every effort to keep stipends uniform across all postdoctoral fellowships, individual hospital administrations set stipend levels. Postdoctoral fellowships, which are primarily or exclusively research, versus those which are primarily or exclusively clinical, follow the same guidelines with regard to stipends.

For the 22-23 year hospital stipends should be $54,840 for first year and $55,224 for second year postdoctoral fellows and VA Medical Center stipends to be $51,592 for first year and $54,381 for second year postdoctoral fellows.

Learn more about T32/F32 grant-funded fellowship Support & Eligibility.

Benefits

As noted below, benefits and leave policies vary by training site, and potentially by funding source. Fellows should consult with supervisor(s) and their employing institution’s HR office for clarification.

- **Health Insurance**: Benefits are included in all fellowship positions. Cost varies by institution. Dental is typically not included.

- **Vacation Days**: Vacation is provided and varies by site.

- **Sick Days**: Sick time is provided and varies by site.

- **Professional Days**: Time to attend conferences, job interviews, etc., is provided and varies by site. Professional time should be negotiated individually.

- **Family Leave**: Individual hospital or university administration set leave policy and it varies by site.

- **Travel**: Availability of travel and research funds varies across fellowships and should be individually negotiated.

In addition, the Clinical Psychology Training Programs at Brown has an Extended Leave Policy if a longer medical leave of absence is required due to:

- the birth of a child, or placement of a child for adoption of foster care or guardianship
- to care for a spouse, child, or parent who has a serious health condition
- for the trainee’s own serious health condition
- Any other leave consistent with the Family and Medical Leave Act (FMLA)
Support

Postdoctoral fellows are provided with appropriate office space and equipment. If a postdoctoral fellow is unable to obtain necessary support, they are instructed to contact the Director of Training who will make every effort to meet all reasonable requests.

Support for the postdoctoral fellow’s personal or private use, such as copying, is not the responsibility of the Postdoctoral Fellowship Training Program.

Brown Benefits

Postdoctoral Fellows in the Department of Psychiatry and Human Behavior in the Alpert Medical School of Brown University receive an academic appointment of Research Fellow in Psychology (The title "Research Fellow" is your official Brown University title only. "Postdoctoral Fellow" is your Department of Psychiatry and Human Behavior and Hospital title).

Your official term of appointment as a trainee is determined through the Training Program and the Department of Psychiatry and Human Behavior. All verifications of training should be directed to the Postdoctoral Fellowship Training Program.

Brown ID

As a clinical psychology resident or a postdoctoral fellow you are entitled to receive a Brown University ID card which will provide you access to Brown University facilities and the libraries. With a Brown ID, Ride RIPTA Buses or Trolleys for Free! Current faculty, staff, and students are able to ride any RIPTA bus or trolley anytime, anywhere in the state at no charge. How it Works: Swipe your Brown ID through RIPTA's farebox and take a seat – it's that easy! Rides will be electronically counted and RIPTA will bill the University monthly.

Your Brown card also allows you to receive discounts at area stores! Visit the Faculty Perks and Benefits page (Bear Bargains) on University’s website for more information.

The Brown I.D. card also provides access to Brown facilities such as the athletic complex and the libraries. It should be noted that the athletic facilities can be used only with purchase of membership for "Brown/RISD Faculty/Staff Individual or Spouse".

A Brown email account is established for each postdoctoral fellow.

Loan Deferment

Student loan deferments are common during postdoctoral training. The Training Office can submit the paperwork to defer loans for 1 year at a time (based on start date). A copy of the deferment letter will be kept in your file.

Please direct all requests for verification to: Brett Requintina, Clinical Psychology Training Programs at Brown, Box G-BH

If you have any questions you may contact Ms. Requintina via e-mail at Brett_Requintina@brown.edu, or call 444-1938.
Resources

Although the Brown Office of Graduate and Postdoctoral Studies only oversees the training of Brown-paid postdoctoral fellows the website is a valuable resource for Hospital-paid postdoctoral fellows for professional development, career resources, etc.

The Sheridan Center for Teaching and Learning offers a broad range of programs, services and activities. For example, some of the Consulting Services of interest may be Preparation for the Academic Job Market, Individual Teaching Consultations or Presentation/Conference Paper Consultations.

Teaching Opportunities

Potential Teaching Opportunities in RI and MA

RHODE ISLAND:

University of Rhode Island
Shepard Building
80 Washington Street
Providence, RI 02903
401-277-5164

Community College of Rhode Island
Department of Psychology
1762 Louisquisset Pike
Lincoln, RI 02865
401-333-7275

Providence College
Department of Psychology
Providence, RI 02918
401-865-2616

Rhode Island College
Chair, Department of Psychology
600 Mount Pleasant Avenue
Providence, RI 02908
401-456-8575

Roger Williams University
Department of Psychology
Bristol, RI 02809
401-254-3238

Johnson & Wales University
Chair, Department of Social Sciences
8 Abbott Park Place
Providence, RI 02903
401-598-1815
Bryant College
Department of History & Social Sciences
1150 Douglas Pike
Smithfield, RI 02917
401-232-6433

MASSACHUSETTS:

UMass Dartmouth
285 Old Westport Rd
North Dartmouth, MA 02747
508-999-8000

Massasoit Community College
1 Massasoit Boulevard
Brockton, MA 02302
781-821-2222

Newbury College
129 Fisher Avenue
Brookline, MA 02455
617-730-7209

Stonehill College
320 Washington St.
Easton, MA 02357
508-565-1000

Assumption College
Dept of Graduate Psychology
500 Salisbury St.
Worcester, MA 01609
508-767-7000

Bristol Community College
Director of Human Resources
777 Elsbree Street
Fall River, MA 02720
508-678-2811 x2194

Bay State College
122 Commonwealth Ave.
Boston, MA 02116
800-81-LEARN

Dean College
Office of Academic Affairs
99 Main Street
Franklin, MA 02038
508-528-9100
Social Media Committee
Carly M. Goldstein, PhD, Coordinator

Mission and Projects
The Social Media Committee is dedicated to disseminating snapshots of department life, connecting current trainees with alumni, and displaying trainee and faculty accomplishments through social media. The Social Media Committee collaborates with trainee representatives to share glimpses of trainee life for both other trainees and prospective applicants.

Currently Available Resources:
@brownclinicalpsych (instagram)
@brownclinspsych (twitter)
Brown Clinical Psychology Training Consortium on Facebook

Partners
Senior Postdoctoral Fellows
Internship Training Committee Representatives
Remediation/Grievance Policy

APA (2017) Standards of Accreditation state that all postdoctoral programs must have policies and procedures for "identification and remediation of insufficient competence and/or problematic behavior, which shall include necessary due process steps of notice, hearing and appeal", as well as "grievance procedures for residents including due process." The following procedures have been established to meet the requirements of these APA guidelines at the postdoctoral level, and to ensure our faculty full support postdoctoral fellows toward successful completion of the program in a fair and ethical manner.

A. Problems detected by a Faculty Member
B. Problems detected by a Postdoctoral Fellow

A. Remediation/Grievance Policy and Procedures for Problems with a Postdoctoral Fellow Detected by a Faculty Member.
It is recognized that problems in a postdoctoral fellow's professional or personal conduct can take many forms. For example, a supervisor may feel that a postdoctoral fellow has a marked deficiency in skills or motivation; a postdoctoral fellow may be unable to function professionally because of emotional or substance abuse problems; or a postdoctoral fellow may have a physical illness which precludes him or her from completing assignments or attending critical training sessions. Clearly, each of these situations requires a different intervention. Many of these stressors and demands may be beyond the fellow's control. Nonetheless, any of these issues may prevent the fellow from completing the training program or make it impossible for him or her to function clinically for a period of time. The mechanism for handling such problems must have sufficient flexibility to protect the program and the public, while providing the fellow with appropriate support and remedial training.

The procedures described below are followed by faculty who perceive that a postdoctoral fellow has any serious difficulty affecting his or her professional conduct, or that is likely to affect it in the future. There are three general problem areas to which the following procedures apply (1) a postdoctoral fellow has a serious deficit in knowledge or skill(s); (2) physical or emotional difficulties that impair or compromise expected standards of performance; and (3) professionally inappropriate behavior. (A procedure to be used by postdoctoral fellows who wish to appeal decisions of the faculty grievance is also included)

1) A Problem is Detected by a Faculty Supervisor:
The faculty supervisor and the postdoctoral fellow should discuss the problem and attempt to arrive at a mutually acceptable solution. Such a situation is not unusual, and in the vast majority of instances would require no further action.

2) A Problem Remains Uncorrected, or the Faculty Supervisor and Postdoctoral Fellow are Unable to Reach an Acceptable Solution:
The Director of the respective program (CPP, CPPSP, CNSP, or RFP) is informed by the faculty supervisor and fully apprised of the problem. A third faculty member may be appointed to serve in an advisory capacity to the fellow. This person will be selected by the Director of the PFTP, with input from the fellow. The Director of the respective program gathers information from the concerned parties and from other faculty or postdoctoral fellows in positions to provide relevant information. Consistent with APA ethical guidelines, the Director of the respective program should proceed in a manner so as to protect confidentiality to the fullest extent possible. If the
Director of the program can act as a mediator and suggest a method of resolving the problem, no further action is necessary.

3) In the Case of Personal/Health Problems which Seriously Impair Professional Performance, the Supervisor should Request that the Postdoctoral Fellow's Clinical Activities be Suspended Immediately:

In taking this action, there must be a substantial likelihood that the clinical conduct or activities of the postdoctoral fellow would be detrimental to the patients under his or her care. Discussion would involve the fellow, the Chief of Psychology at the hospital where the fellow is based, the Director of the respective program (CPP, CCPSP, CNSP, and RFP), and the Director of the PFTP. The final decision regarding suspension of clinical activities would rest with the hospital's Chief of Staff, upon the recommendation of the Chief of Psychology and the Director of the respective program. Any decision to suspend clinical activities must be documented in the postdoctoral fellow's record. Where appropriate, the Director of the specific program should assist the postdoctoral fellow in locating the proper resources to deal with the difficulty. For example, the Director should aid the postdoctoral fellow in seeking referral for treatment as necessary. The Training Committee should be notified about the situation and the corrective actions taken at its next regularly scheduled meeting. All other actions regarding remediation, suspension or termination from the program, as well as appeals would be subject to the procedures outlined below.

4) Further Remedial Action is Deemed Necessary:

The Director of the respective program (CPP, CCPSP, CNSP, and RFP) will notify, in writing, the involved faculty member(s), Chiefs of Psychology, and Director of the PFTP of the proposed remediation plan. The postdoctoral fellow also is informed in writing of the required actions that he or she must take, and the possible consequences for failing to do so. The written remediation plan should define specifically (in behavioral terms) the deficits or problematic behaviors in relation to expected standards of performance, required actions or changes, the faculty and timetable involved, and method(s) of evaluation noting the criteria for successful completion. A copy of this correspondence will be placed in the fellow's file. The Director of the specific program informs the Training Committee of the situation and the proposed plan at the next Training Committee meeting.

5) Postdoctoral Fellow Progress is reviewed at a Predetermined Interval to Ensure Compliance with the Remedia Program:

If the problem is determined by the Director of the respective program (CPP, CCPSP, CNSP, or RFP) to be rectified, no further action is necessary, beyond a letter to that affect which is distributed in accordance to Step 4. The Training Committee is apprised of the outcome. If the problem has not been rectified: (a) further remediation is proposed and reviewed at an appropriate interval (return to Step 4 for documentation and distribution); or (b) recommendation for termination. Remediation plans may be granted a renewal or extension only once during the fellowship year. In no case, however, will an extension exceed the duration of the originally recommended time interval for remediation.

6) The Director of respective program (CPP, CCPSP, CNSP, or RFP) Recommends that the Postdoctoral Fellow be Terminated from the Program:

The Training Committee votes on whether a fellow shall be terminated from the program. The postdoctoral fellow is informed in writing of the outcome. This decision is forwarded to the Chair of the Department of Psychiatry and Human Behavior and to the Chief of Psychology at the hospital where the postdoctoral fellow is based.

7) Identifying another Faculty Member to Serve in an Advocacy Role for the Fellow:
In the CPP, CCPSP, CNSP, and RFP fellowships, if the Director of the respective program is also serving as the supervisor in charge of the remediation program, or if a conflict exists between the postdoctoral fellow and the Director of the respective program, another faculty member will be identified by the Director of the PFTP to serve in an advocacy role for the postdoctoral fellow.

8) Appeals:
Disagreements should be immediately resolved among the parties whenever possible, as outlined. Once formal remediation has been approved by the Training Committee, the involved postdoctoral fellow or faculty who disagree with the decision may appeal in writing to either the Director of the respective program (CPP, CCPSP, CNSP, or RFP). The Director may attempt to mediate the dispute or may choose to present the case to the Training Committee for further consideration. The postdoctoral fellow has the right to appeal before the Training Committee to appeal a decision. The postdoctoral fellow may also solicit additional faculty to present on his or her behalf during this appeal if desired. Consistent with Brown University policy, the hierarchy for filing appeals or grievances is as follows: (1) Director of the respective program (CPP, CCPSP, CNSP, or RFP), (2) Director of PFTP, (3) Director of the Division of Clinical Psychology, (4) Chair, Department of Psychiatry and Human Behavior who will involve Departmental Appeals Procedures (see below), and (5) Hospital Grievance Committee of the institution in which the postdoctoral fellow is currently based. NOTE: Departmental Appeals Procedures require that the Chair appoint a three-person advisory committee to review the appeal. In the case of the Fellowship, the advisory committee would consist specifically of three psychologists on the senior faculty who have no direct supervisory relationship with the postdoctoral fellow who has filed the appeal. A written report delineating the committee's findings and recommendations must be submitted to the Director of Training within 30 days.

9) In the Event of Professionally Inappropriate Behavior, A Supervisor may Initiate Procedures Leading to the Suspension of a Postdoctoral Fellow as Follows:
The supervisor should notify the Director of the respective program (CPP, CCPSP, CNSP, or RFP) immediately and apprise them of the problem. If a suspension is in order, the Director of the respective program will bring the issue to the Director of the Division of Psychology, the Chair of the Department of Psychiatry and Human Behavior and the Chief of Psychology at the hospital where the postdoctoral fellow is based. The final decision regarding suspension of clinical activities would rest with the hospital's chief of staff, upon the joint recommendation of the Chief of Psychology and the Director of the respective program. Any decision to suspend a postdoctoral fellow, as well as the terms of the suspension, must be documented in the postdoctoral fellow's record. All other actions, including the postdoctoral fellow's right to appeal, are subject to the procedures outlined above.

B. Remediation/Grievance Policy and Procedures for a Problem with a Faculty Member Detected by a Postdoctoral Fellow.
Postdoctoral fellows are instructed to call grievance issues to the attention of their supervisor directly to the Director of the respective program (CPP, CCPSP, CNSP, or RFP). Depending on the severity of the situation, the procedures outlined below will be followed. Basically, there are three general problem areas to which the following procedures apply (1) a faculty member has a serious deficit in knowledge or skill(s); (2) physical or emotional difficulties that impair or compromise expected standards of performance; and (3) professionally inappropriate behavior, including insufficient attention to the training needs of the trainee. A trainee may request guidance from a faculty advisor, track coordinator, or program director regarding how to address a concern with a faculty member. In addition, a faculty member may initiate a grievance process on a trainee’s behalf.
1) A Problem is Detected by the Trainee:
The faculty supervisor and the trainee should discuss the problem and attempt to arrive at a mutually acceptable solution. Such a situation is not uncommon, and in the vast majority of instances would require no further action. The Director of the respective program (CPP, CCPSP, CNSP, and RFP) maintains a record of verbal complaints that have not been officially lodged against a supervisor. If the Director detects a pattern of complaints over time, then he/she can intervene.

2) A Problem Remains Uncorrected, the Faculty Supervisor and Trainee are Unable to Reach an Acceptable Solution, or the Problem is of such Severity that Additional Contact between Trainee and the Faculty Member is not Advised:
In this case, the trainee may file a grievance requesting that the concern be addressed by the Training Program. Either the trainee, or a faculty member acting on their behalf, should contact the appropriate Director of Training and inform them of the problem and any steps already taken to address the concern. The Director of the respective program (CPP, CCPSP, CNSP, or RFP) is contacted by the trainee and fully apprised of the problem. The Director of the respective program gathers information from the concerned parties and from other faculty or trainees in positions to provide relevant information. Consistent with APA ethical guidelines, the Director of the respective program will proceed in a manner so as to protect confidentiality to the fullest extent possible. If the Director of the respective program can act as a mediator and suggest a method of resolving the problem, no further action is necessary. In cases where the faculty member in question is the Director of the respective program then the Director of the PFTP picks a 3rd member of the Training Committee to form the subcommittee reviewing the matter.

If mediation is not possible or successful, a subcommittee consisting of the Director of respective program, at least one other supervisor, and one additional member of the Training Committee is convened. The subcommittee then makes a determination whether any disciplinary action is necessary based on criteria outlined in the Faculty Handbook regarding incompetent performance of professional duties or neglect of academic duty. The relevant Program Director will provide periodic updates to the trainee regarding the status of the grievance process. Every effort will be made to respond to concerns expeditiously, with the objective of communicating a plan of action to the trainee within two months.

Based on the subcommittee review, one of the following recommendations is proposed:
   a) No disciplinary action
   b) Reprimand with a remediation plan, e.g., monthly meetings between track coordinator (or equivalent) and faculty member; addition of a new supervisor/mentor to the training plan. Note: If trainee does not feel comfortable continuing with the supervisor, an alternate supervisor will be assigned to the trainee.
   c) Suspension of privilege to recruit and supervise a trainee for a minimum of one year or until there is sufficient evidence that the situation has been resolved.

3) If a Remedial Plan is Recommended: Progress is Reviewed at a Predetermined Interval to Ensure Compliance with the Remedial Program:
If the problem is determined by the Director of the respective program (CPP, CCPSP, CNSP, or RFP) to be rectified, no further action is necessary, beyond a letter to that effect which is placed in the faculty member’s file in the Training Office. The Training Committee is apprised of the outcome. If the problem has not been rectified: (a) further remediation is proposed and reviewed at an appropriate interval; or (b) recommendation for suspension of trainee supervision privileges.
4) In the Case of Personal/Health Problems which Seriously Impair Professional Performance, the Director of Training may Request that the Faculty Member’s Clinical Training Activities be Suspended Immediately:

Discussion would involve the trainee, the Director of the respective program (CPP, CCPSP, CNSP, or RFP) and others where appropriate. The final decision regarding suspension of clinical training activities would rest with the Director of the respective program. Any decision to suspend clinical training activities will be documented in the faculty member’s file in the Training Office. Where appropriate, the Director of the respective program should assist the faculty member in locating the proper resources to deal with the difficulty. The Training Committee should be notified about the situation and the corrective actions taken at its next regularly scheduled meeting. All other actions regarding remediation, or suspension of clinical activities would be subject to the procedures at the faculty member’s institution.

5) If a Faculty Member has had his/her Privileges Suspended Twice, the Director of Training Recommends that the Faculty Member be Terminated from the Training Program Faculty:

The Training Committee votes on whether the faculty member should be terminated from the training program faculty, majority rules. The faculty member is informed in writing of the outcome. This decision is forwarded to the Director of the Division of Psychology, the Chair of the Department of Psychiatry and Human Behavior, the Chief of Psychology at the hospital where the trainee is based, and the Chair of the Appointments and Reappointments Committee.

6) Appeals:

Disagreements should be immediately resolved among the parties whenever possible. Once formal remediation has been approved by the Training Committee, the faculty member who disagrees with the decision may appeal in writing to the Director of the respective program (CPP, CCPSP, CNSP, or RFP). The Director of the respective program may attempt to mediate the dispute or may choose to present the case to the Training Committee for further consideration. The faculty member has the right to appear before the subcommittee which made the recommendation and/or Training Committee to appeal a decision. The faculty member may also solicit additional faculty or trainees to present on his or her behalf during this appeal if desired. Consistent with Brown University policy, the hierarchy for filing appeals or grievances is as follows: (1) Director of the respective program (CPP, CCPSP, CNSP or RFP), (2) Director of PFTP, (3) Director of the Division of Clinical Psychology, (4) Chair, Department of Psychiatry and Human Behavior who will involve Departmental Appeals Procedures (see below), and (5) Hospital Grievance Committee of the institution in which the postdoctoral fellow is currently based. NOTE: Departmental Appeals Procedures require that the Chair appoint a three-person advisory committee to review the appeal. In the case of the PFTP, the advisory committee would consist specifically of three psychologists on the senior faculty who have no direct relationship with the faculty member who has filed the appeal. A written report delineating the committee’s findings and recommendations must be submitted to the chairperson within 30 days.

7) In the Event of Professionally Inappropriate Behavior, the Chairperson may Initiate Procedures Leading to the Suspension of a Faculty Member as Follows:

The Director of the respective program (CPP, CCPSP, CNSP, and RFP) is apprised of the problem. If the Director of the specific program feels that a suspension is in order, the Director of the PFTP will bring the issue to the Director of the Division of Psychology and the Chair of the Department of Psychiatry and Human Behavior. The final decision regarding suspension of
clinical activities would rest with the hospital's chief of staff, upon the joint recommendation of
the Chief of Psychology, and the Chair of the Department.

**Title IX**

Postdoctoral fellows, or faculty members acting on their behalf, may also report potential Title IX
violations to the Brown University Title IX Office. There is an option for such reports to be made
anonymously.

The Brown University Title IX office is responsible for issues relating to sexual and gender-
based harassment and sexual violence.

This can include issues such as

- Discriminatory Interactions: Hostile Environment
- Different Treatment based on membership in a protected class (intentional): Disparate Treatment
- Unequal burden/benefit of policy, procedure, or practice (unintentional): Disparate Impact

Title IX is responsible for *University learning environments* on and off campus. As such,
concerns relating to our training program and faculty providing supervision within our program
are relevant.

If you are concerned about a potential Title IX violation, please contact your Program Director or
the Director of the Postdoctoral Fellowship Program to obtain additional information.