# Table of Contents

Welcome! ................................................................................................................................. 3  
University of Utah Health ........................................................................................................ 4  
Division of Physical Medicine & Rehabilitation ........................................................................ 4  
Rehabilitation Psychology Program ......................................................................................... 5  
Application Requirements ....................................................................................................... 6  
Selection Criteria .................................................................................................................... 6  
Equal Opportunity Employer and Program .............................................................................. 7  
Postdoctoral Fellowship Structure ........................................................................................... 7  
Inpatient Rehabilitation (Division of PM&R) .......................................................................... 9  
Outpatient Rehabilitation (Division of PM&R) ..................................................................... 10  
Neuropsychology (Division of PM&R) .................................................................................... 11  
Primary Care Psychology (Department of Family & Preventive Medicine) ............................ 12  
Additional Training and Research Faculty ............................................................................... 12  
Didactics .................................................................................................................................. 14  
Clinical Competencies ............................................................................................................. 15  
Supervision .............................................................................................................................. 16  
Evaluation ............................................................................................................................... 17  
Professional Presentations ........................................................................................................ 17  
Research Expectations .............................................................................................................. 17  
Research Resources and Support ............................................................................................ 18  
Salary ....................................................................................................................................... 18  
Benefits and Leave ................................................................................................................... 18  
Training Resources .................................................................................................................. 18  
University of Utah Office of Postdoctoral Affairs and Professional Programs .......................... 18  
Living in Salt Lake City, Utah .................................................................................................... 19  
Grievances and Due Process .................................................................................................... 20  
Remediation, Probation, Suspension, and Dismissal ................................................................. 21
Welcome!

Welcome to the University of Utah Rehabilitation Psychology Postdoctoral Fellowship Program! We are most excited to have you join our team and for us to be involved in your continued development as a psychologist, researcher, and professional. We strongly believe that professional practice in rehabilitation psychology benefits from supervised postdoctoral training providing both foundational and functional competencies expected of a specialist in rehabilitation psychology. The University of Utah Rehabilitation Psychology Postdoctoral Fellowship Program involves clinical and research training at the University of Utah Hospital, University of Utah Medical Center and Clinics, and School of Medicine. The patient populations served include individuals with spinal cord injury, traumatic brain injury, stroke, severe burn injury, chronic neurologic conditions, amputation, and trauma. This handbook describes the structure of the University of Utah Rehabilitation Psychology Postdoctoral Fellowship Program, including areas of training, clinical experiences, requirements, and research expectations.

The values and goals of the University of Utah Rehabilitation Psychology Postdoctoral Fellowship Program fall under the mission of the University of Utah Hospital and Health Care System.

The University of Utah Hospital Mission

*The University of Utah Health Sciences Center serves the people of Utah and beyond by continually improving individual and community health and quality of life. This is achieved through excellence in patient care, education, and research; each is vital to our mission and each makes the others stronger.*

- We provide compassionate care without compromise
- We educate scientists and health care professionals for the future
- We engage in research to advance knowledge and well-being

The goal of the University of Utah Rehabilitation Psychology Postdoctoral Fellowship Program is:

*To train psychologists to be equipped to provide competent assessment, treatment, consultation, and research in rehabilitation psychology specialty practice.*

Associated areas of training include:

1. Assessment
2. Intervention
3. Consultation
4. Research and scholarly inquiry
5. Administration and management
6. Professionalism
University of Utah Health

For ten years in a row, University of Utah Health Care has been ranked in the top 10 of participating medical centers nationwide in Vizient Inc.’s Quality and Accountability Study (e.g., Rush, NYU, Mayo, etc.). In 2019, University of Utah Health Care ranked fourth in the nation among academic medical centers, earning its ninth consecutive Bernard A. Birnbaum, MD, Quality Leadership Award. (http://healthcare.utah.edu/quality/). U.S. News and World Report has ranked the University of Utah number 1 in the region 6 years running.

University of Utah Health Care serves the state of Utah and surrounding states encompassing a geographic area larger than 10 percent of the continental United States. Currently, there are 4 hospitals and 22 clinical and basic-science departments focusing on a broad range of interdisciplinary clinical services, education, and research in areas of state-of-the-art medicine and health care.

Division of Physical Medicine & Rehabilitation

The University of Utah Division of Physical Medicine and Rehabilitation was founded in 1965 by James R. Swenson, M.D. It is currently the only academic physical medicine and rehabilitation program in the intermountain west and the only program in this region with CARF (Commission on Accreditation of Rehabilitation Facilities) accredited programs in stroke, spinal cord injury, and traumatic brain injury. The Division of Physical Medicine and Rehabilitation has a wide
array of clinical, research, educational, and community outreach programs with multiple faculty members representative of a broad range of academic and clinical interests. A few programs to highlight include:

**TRAILS (Technology Recreation Access Independence Lifestyle Sports)** – Led by Jeffrey Rosenbluth, M.D., the TRAILS program is a comprehensive program through the Division of Physical Medicine and Rehabilitation for all sorts of adaptive needs (e.g., stroke, SCI, TBI), promoting adaptive recreation (cycling, wheelchair sports, sailing, swimming, skiing, kayaking), community education, wellness, telehealth outreach, volunteer/peer support, transportation, and research.

[https://healthcare.utah.edu/neilsen-physical-rehab-hospital/support-services/trails/](https://healthcare.utah.edu/neilsen-physical-rehab-hospital/support-services/trails/)

**POWER (Personal Optimism with Exercise Recovery)** – Led by Pamela Hansen, M.D., the POWER program provides resources for people affected by cancer to improve quality of life, reduce the side effects of treatments, and increase strength for daily living.


**Sports Medicine** – The University of Utah Sports Medicine Program involves numerous specialists and providers in areas of concussion, musculoskeletal disorders, and pain medicine. This program serves as the official health care provider for the University of Utah Athletics Department and the professional NBA Team, the Utah Jazz.

[http://healthcare.utah.edu/orthopaedics/sportsmedicine/](http://healthcare.utah.edu/orthopaedics/sportsmedicine/)

**Rehabilitation Psychology Program**

The Rehabilitation Psychology Program is involved in a broad array of clinical, educational, and research programs in areas of rehabilitation psychology and other areas of health psychology practice. Clinical services involve inpatient and outpatient psychological assessment and treatment for individuals and family members with brain injury, stroke, spinal cord injury, burn injury, amputation, conversion disorder, and other severe injuries/medical conditions. Additionally, our clinic is closely involved with the University of Utah Bariatric Surgery Program providing comprehensive pre-surgical psychological assessment and intervention services. Educationally, the Rehabilitation Psychology Program has collaborative and close involvement with the University of Utah Department of Psychology’s APA Accredited Clinical Psychology Graduate Program, the University of Utah Department of Educational Psychology APA accredited Counseling Psychology Doctoral Program, and the George E. Wahlen Salt Lake City Department of Veterans Affairs APA Accredited Psychology Predoctoral Internship. The Rehabilitation Psychology Program serves as an external practicum placement for students involved in graduate training through the University of Utah Department of Psychology, the University of Utah Department of Educational Psychology, and an elective internship rotation for APA interns through the George E. Wahlen Salt Lake City Department of Veterans Affairs.
Lastly, the Rehabilitation Psychology Program has an extensive network of research investigations examining multiple areas of inquiry including interpersonal influences on rehabilitation outcomes, interpersonal and psychosocial predictors of bariatric surgery outcomes, positive psychology interventions for post-stroke depression and spinal cord injury adjustment, dyadic interventions for patients and caregivers, international research examining rehabilitation and caregiver populations, and the influence of sleep on traumatic brain injury recovery. These investigations involve collaboration with multiple departments including the Department of Psychology, the Department of Surgery, the Department of Psychiatry, the Department of Cardiology, the Department of Occupational and Recreational Therapies, and other external universities and institutions.

Application Requirements

1. Applicants must have completed a Ph.D. or Psy.D. degree in Clinical or Counseling Psychology from an APA accredited program and an APA accredited internship.
2. Individuals with a Ph.D./Psy.D. in another area of psychology who meet the APA criteria for re-specialization training in Clinical or Counseling Psychology are eligible.
3. All requirements for the doctoral degree must be completed before entry into the fellowship program.
4. Applicants must be United States Citizens.
5. Applicants should be interested in providing clinical assessment and treatment in rehabilitation populations.
6. Applicants should be interested in working in a multidisciplinary team environment.
7. Potential candidates for the position must be willing to participate in a phone/video conference interview or in person interview.
8. Applications should be completed through APPA CAS (APPIC Psychology Postdoctoral Application).
9. Applicants must meet the State of Utah requirements for licensure as a Certified Psychology Resident. For more information please access the Utah Division of Occupational and Professional Licensing: http://www.dopl.utah.gov/licensing/forms/applications/068_psychologist.pdf

Selection Criteria

The University of Utah Rehabilitation Psychology Postdoctoral Fellowship Program is interested in individuals with demonstrated interest in rehabilitation psychology. We prefer candidates with background and interest in behavioral medicine and working in multidisciplinary environments. The ideal candidate will ascribe to a scientist practitioner model with balanced interests and training in clinical practice and research.
Equal Opportunity Employer and Program
The University of Utah is an Equal Opportunity/Affirmative Action employer and educator. The University of Utah values candidates from diverse backgrounds and The University of Utah Rehabilitation Psychology Postdoctoral Fellowship Program welcomes and strongly encourages applications from all qualified candidates. For additional information please visit: http://regulations.utah.edu/human-resources/5-106.php

Postdoctoral Fellowship Structure
The University of Utah Rehabilitation Psychology Postdoctoral Fellowship Program is a 24-month full-time appointment at the University of Utah School of Medicine. We anticipate having two fellows each year, one in each year of training. The fellow is expected to provide clinical services Monday through Friday during normal business hours, although schedule adjustments may be required to accommodate evening groups or other program activities. The total weekly time commitment is estimated at approximately 40-50 hours per week to the training program. However, completion of clinical and research duties may require additional hours. The fellow may be at the hospital, clinic, or medical center after hours to complete paperwork or research activities, but direct patient care should not be provided when a supervisor is not physically present or available.

The University of Utah Rehabilitation Psychology Postdoctoral Fellowship Program is divided into two core rotations (inpatient rehabilitation and outpatient rehabilitation) and two minor six-month rotations in neuropsychology (through the Department of Physical Medicine and Rehabilitation) and primary care psychology (through the Department of Family & Preventive Medicine). While the program is focused heavily on rehabilitation psychology (60-75% of clinical treatment time), 20-25% of the fellow’s time will be dedicated to further training in closely related fields of neuropsychology and primary care psychology. Research and teaching time are somewhat negotiable, but research time will likely be at least 5-10%.

The fellow will begin his or her training on the University of Utah Inpatient Medical Rehabilitation Unit in one of the following treatment teams: Stroke Team, Traumatic Brain Injury Team, and Spinal Cord Injury Team. Fellows will rotate through each team for about 6 months. The fellow will likely build a small outpatient clinic over time during these rotations. The last 6-12 months may be more heavily weighted towards outpatient treatment, to be negotiated based upon training needs and interests. The fellow will also begin his/her first minor six-month rotation in either neuropsychology or primary care psychology. Every six months, the fellow will rotate through each inpatient rehabilitation team while continuing the minor rotation and building a research and teaching portfolio. Having more designated and focused training time on the inpatient unit should allow additional time for the fellow to work on a clinical project, ideally one project per inpatient team/rotation. A brief overview of the rotations is provided below:
<table>
<thead>
<tr>
<th>Month 1-6</th>
<th>Month 6-12</th>
<th>Month 12-18</th>
<th>Month 18-24</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inpatient Rehabilitation – Traumatic Brain Injury Team (22-30 hours per week)</td>
<td>Inpatient Rehabilitation – Stroke Team (22-30 hours per week)</td>
<td>Inpatient Rehabilitation – Spinal Cord Injury Team (22-30 hours per week)</td>
<td>Inpatient Rehabilitation – Across Teams (10-20 hours per week)</td>
</tr>
<tr>
<td>Outpatient Rehabilitation Psychology Clinic (0-8 hours per week)</td>
<td>Outpatient Rehabilitation Psychology Clinic (0-8 hours per week)</td>
<td>Outpatient Rehabilitation Psychology Clinic (0-8 hours per week)</td>
<td>Outpatient Rehabilitation Psychology Clinic (10-20 hours per week)</td>
</tr>
<tr>
<td>First Minor Rotation: Neuropsychology (8-10 hours per week)</td>
<td>Second Minor Rotation: Primary Care/Behavioral Health Psychology (8-10 hours per week)</td>
<td>Third Minor Rotation: Neuropsychology (8-10 hours per week)</td>
<td>Fourth Minor Rotation: Primary Care/Behavioral Health Psychology (8-10 hours per week)</td>
</tr>
<tr>
<td>Clinical Project: During Clinical Time</td>
<td>Clinical Project: During Clinical Time</td>
<td>Clinical Project: During Clinical Time</td>
<td>Clinical Project: During Clinical Time</td>
</tr>
<tr>
<td>Research Project</td>
<td>Research Project</td>
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<tr>
<td>Teaching Project</td>
<td>Teaching Project</td>
<td>Teaching Project</td>
<td>Teaching Project</td>
</tr>
</tbody>
</table>

*The amount and timing of outpatient time may be negotiable depending upon training needs and interests.

**Important Scheduling Information**

**Didactic Series:**

Wednesdays 8-10 a.m. PMR Conference Room

VA didactics: Vary from Wednesday to Thursday mornings, typically 10:00 to noon and require transportation to the VA.

**Supervision:**

You will schedule a minimum of 1 hour for every 10 hours of work with each supervisor weekly.

Group Supervision: Thursdays 9-10 a.m.

**Treatment team meetings:**

Blue team meetings: M/W 10:30-11:15 a.m.

Red team meetings: T/F 9:45-10:30 a.m.

Green team meetings: T/F 10:30-11:15 a.m.
*Team meetings may vary depending upon holiday schedules. Most often blue team is moved from Monday to a Tuesday at about noon or so, but that can vary.

**Additional journal clubs/grand rounds/didactics:**

Grand Rounds take place the first Wednesday of the month, 7:00-8:00 a.m. typically. You will be encouraged to attend those as well.

There are a variety of journal clubs held for residents you will be encouraged to attend. Schedule TBD. Resident didactics take place on Thursday mornings and you will likely be encouraged to join some of those as well. Schedule TBD. The University’s postdoctoral fellowship program office holds brown bag lunches, etc., you may look into and join if interested/available.

### Inpatient Rehabilitation (Division of PM&R)

**Primary Supervisors:**

![Christina M. Derbidge, Ph.D.](image)  
Director of Training  

![Larissa McGarrity, Ph.D.](image)

The Craig H. Neilsen Foundation has donated $47.5 million for a new, state-of-the-art rehabilitation hospital as part of the redevelopment and modernization of the University of Utah’s health sciences campus. The 75-bed hospital, to be named the Craig H. Neilsen Rehabilitation Hospital, will be one of the most advanced rehabilitation facilities in the nation and will serve as a catalyst for the further development of the university’s rehabilitation programs. It is scheduled to open in spring of 2020.


The current facilities comprising the University of Utah Inpatient Medical Rehabilitation Unit include a 37-bed inpatient unit providing acute rehabilitation services for individuals with brain injury, stroke, spinal cord injury, burn injury, brain and spinal cord cancer, amputation,
conversion disorder, other severe injuries and medical conditions. The inpatient service is divided into three primary treatment teams specializing in brain injury, stroke, and spinal cord injury. We anticipate the three primary treatment programs will be housed on one of each of 3 floors with 25-beds per floor. Patients are provided with specialized and individualized rehabilitation services involving rehabilitation medicine, physical therapy, occupational therapy, speech/language therapy, rehabilitation psychology, and respiratory therapy.

Rehabilitation psychology fellows will receive training and supervision in assessment and treatment of psychological adjustment to disability (e.g., anxiety, depression, and posttraumatic stress disorder), brief neuropsychological assessment, behavioral pain management, stress management, inpatient substance abuse evaluation and treatment, and caregiver intervention/support. Evaluations and interventions will involve individual, couples, and families. Rehabilitation psychology fellows will begin rotating through each rehabilitation team requiring close involvement with the treatment team providers, including the attending physician, resident physician, medical students, nursing staff, occupational therapists, physical therapists, speech and language therapists, respiratory therapists, and social work staff. Additional providers that fellows may work with outside of the rehabilitation team include psychiatrists and social workers from the University of Utah Psychiatry Consult & Liaison Service. Fellows are required to work collaboratively to enhance treatment of medical and psychological issues during patient’s acute rehabilitation and recovery. Fellows will work on clinical projects to add to the betterment of each treatment service.

**Outpatient Rehabilitation (Division of PM&R)**

Primary Supervisors:

![Stephen Trapp, Ph.D.](image1)

![Larissa McGarrity, Ph.D.](image2)

![Melody Mickens, Ph.D.](image3)

The University of Utah Rehabilitation Psychology Clinic provides outpatient assessment and treatment for individuals with a wide-range of medical and psychological conditions. Common referrals for services include psychological adjustment to disability, anxiety, depression,
posttraumatic stress disorder, somatoform/conversion disorder, alcohol and substance abuse, marital and couples issues, behavioral pain management, stress management, caregiver support, pre-surgical psychological evaluation, and disability self-management (e.g., spinal cord injury, stroke, brain injury, etc.). The Rehabilitation Psychology Clinic accepts referrals from multiple sources, including the Division of Physical Medicine and Rehabilitation, Workman’s Compensation, the Department of Neurology, the Department of Cardiology, the Department of Surgery, the Department of Psychiatry, and various community referrals.

Fellows will maintain a variable outpatient caseload, to be negotiated based upon treatment interests and needs. They will provide individual, couples, family, and group assessment and treatment services. Fellows will also be provided with the ability to follow individuals from their inpatient to outpatient care as appropriate. Consistent with their inpatient rehabilitation rotation, rehabilitation psychology fellows are required to work collaboratively and closely with other providers to enhance rehabilitation treatment and outcomes.

Neuropsychology (Division of PM&R)

Primary Supervisors:

Jeremy Davis, Psy.D. ABPP
Board Certified Clinical Neuropsychology

Summer Rolin, Psy.D.

Katie Kitchen Andren, Ph.D.

There will be two parts to the neuropsychology rotation, split into two 6-month intervals. This will involve completing inpatient and outpatient neuropsychological assessments with adults at the University of Utah Rehabilitation Center. One of the 6-months will focus on inpatient neuropsychological assessment and the other will focus on outpatient neuropsychological assessment. Typical patient populations include: traumatic brain injury, stroke, sport concussion, epilepsy, multiple sclerosis, neurodegenerative disease (e.g., Parkinson’s, Huntington’s, Alzheimer’s disease), tumor, autoimmune disorders, CNS infectious diseases and psychiatric disorders.
Neuropsychological evaluations entail assessment of the cognitive, behavioral and emotional difficulties resulting from brain dysfunction. A clinically-oriented, flexible approach is used in the neuropsychological assessment process. Fellows will develop the knowledge to choose the appropriate measures, administer neuropsychological tasks, score and interpret results, write integrated reports, form appropriate recommendations and communicate results to patients and their families. Case conceptualization will emphasize integration of all information, including how factors such as physical pain or emotional distress impact cognitive functioning. Fellows will be expected to complete one evaluation per week throughout their rotation, typically entailing up to 10 hours, although this could vary depending on the level of previous neuropsychological experience, knowledge and training.

**Primary Care Psychology (Department of Family & Preventive Medicine)**

**Supervisor:**

**Katherine Fortenberry, Ph.D.**

The University of Utah Health Care System provides continuity of healthcare services through 10 neighborhood health centers. The primary care psychology rotation involves outpatient psychological evaluation of adult patients at the University of Utah Madsen Health Center and the University of Utah Sugar House Health Center. Rehabilitation psychology fellows will provide primary care consultation, evaluation, and brief psychotherapeutic interventions for a variety of psychological and behavioral conditions, including anxiety, depression, grief and loss, behavioral management of chronic health conditions, adherence to medical recommendations, and adjustment to chronic health issues. Fellows will have the opportunity to participate in and lead behavioral health group visits, including weight management and cognitive behavioral therapy for insomnia. Evaluation and intervention approaches will primarily utilize a cognitive-behavioral approach to treatment with an interpersonal emphasis. Fellows will be required to work collaboratively and closely with the referring primary care physician and staff.

**Additional Behavioral Health Training**

The University of Utah Health Care System has a wide-range of psychologists performing a variety of clinical services, educational pursuits, and research interests. A component of the Behavioral Health rotations will include pre-surgical psychological bariatric evaluations. The primary faculty performing and supervising these experiences are listed below.
Larissa McGarrity, Ph.D. (Division of PM&R)

In addition to her roles in providing rehabilitation psychology services to inpatients and outpatients, Dr. McGarrity has research interests in the biopsychosocial aspects of successful weight loss post bariatric surgery. She has developed a specialty in eating disorders, weight management, and bariatric psychology. She works closely with the bariatric surgery multidisciplinary team to support research and clinical needs for patients. She supervises trainees in performing pre-surgical psychological bariatric evaluations and also provides services for individuals struggling to adjust to the significant behavioral, emotional, and interpersonal changes that can occur post-surgically.

Robert Jackson Courtney, Ph.D. (Division of PM&R)

Dr. Courtney is a staff psychologist with over 40-years of clinical experience in treatment of addictions, including more recent work with bariatric surgery patients. He performs pre-surgical psychological bariatric evaluations and also provides services for individuals struggling to adjust to the significant behavioral, emotional, and interpersonal changes that can occur post-surgically.

Additional Research and Academic Training

Below are the faculty who comprise of the research training committee for the postdoctoral fellowship training program:
Alexandra Terrill, Ph.D. (Department of Occupational & Recreational Therapies)

Dr. Terrill is an assistant professor and researcher in the Department of Occupational and Recreational Therapies. She has an extensive background in rehabilitation psychology having completed her postdoctoral fellowship training through the Department of Rehabilitation Medicine at the University of Washington. Her research interests include psychological resilience and positive psychological interventions as they relate to adjustment to disability. Dr. Terrill has developed new research programs utilizing dyadic positive psychology interventions to promote improved adjustment among individuals with stroke, spinal cord injury, and their spouses/caregivers.

Stephen Trapp, Ph.D. (Division of PM&R)

Dr. Trapp is an assistant professor on the Tenure-line with the Division of Physical Medicine and Rehabilitation. His research includes cross-cultural rehabilitation psychology topics – namely in Central and South America – and the development of rehabilitation technology. Current cross-cultural projects include a norming study of common neuropsychological tests for primary Spanish speakers in the United States, and the examination of a multilingual, online cognitive remediation program. Rehabilitation technology projects include development of biofeedback gaming technology for mechanical ventilation weaning, applying immersive reality to enhance physical therapies, and exploring just-in-time adaptive interventions for preventing pressure injuries and influencing the related preventative behaviors.

Didactics

Rehabilitation psychology fellows are required to participate in all didactic and training activities. Attendance and participation in these activities is mandatory and takes precedence over service delivery, activities, and other meetings. Core didactic and training topics will involve essential information to assist in the development of competencies and foundational skills necessary for the practice of rehabilitation psychology. A listing of some past topics is provided below. Fellows are encouraged to work with the training staff to tailor didactics to their various strengths, weaknesses, and interests. Additional didactic and training activities will also be available through the Division of Physical Medicine & Rehabilitation Grand Rounds, other departments, and other community organizations. For example, some didactic and training activities will be available through collaborative ties with the George E. Wahlen Salt Lake City VA Clinical Psychology Postdoctoral Fellowship. Involvement in didactics will be scheduled for 90 to 120-minutes weekly.
Foundational Principles of Rehabilitation Psychology
Models of Disability & Adjustment to Disability
Spinal Cord Injury
Traumatic Brain Injury
Mild Traumatic Brain Injury/Concussion
Stroke
Terminal Illness/Death & Dying
Inpatient Hospital Assessment
Neuropsychological Assessment
Somatoform/Conversion Disorders
Alcohol/Substance Abuse and Disability
Motivational Interviewing in Healthcare Settings
Behavioral Management of Chronic Disease
Behavioral Treatment of Sleep Disorders
Amputation

Adapted Recreation
Supervision
Geriatrics
Chronic Pain
Assistive Technology
Ethics/Bioethics
EPPP/Licensure
Disability and Sexuality
Caregiver Issues and Interventions
Multicultural Competency
Psychopharmacology
Pediatric and Family Issues
Delirium Assessment and Interventions
Women and Disability
Positive Psychology Interventions
Cognitive Rehabilitation & Remediation

Clinical Competencies

The rehabilitation psychology fellowship seeks to build competency in areas identified by the American Board of Rehabilitation Psychology and areas important to competent interdisciplinary practice of rehabilitation psychology services.

ASSESSMENT

- Adjustment to disability for patients and families
- Assessment of extent and nature of disability and preserved abilities
- Assessment of educational and/or vocational capacities
- Personality and emotional assessment
- Neuropsychological assessment
Capacity assessment
Assessment of sexual functioning, pain, substance use/abuse, and social and behavioral function

INTERVENTION
Individual therapy interventions related to adjustment to disability
Family/couple therapy interventions related to adjustment to disability
Behavioral management
Sexual counseling with disabled populations

CONSULTATION
Cognitive and behavioral functioning
Vocational and educational considerations
Personality and emotional assessment
Substance abuse identification and management
Sexual functioning and disability

PROFESSIONALISM
Collaboration with other medical providers
“Ambassador” for psychology

Supervision
Rehabilitation psychology fellows will be supervised by licensed psychologists in the State of Utah who are credentialed providers through the University of Utah Medical Center. Fellows will have at minimum four hours of individual supervision each week. This breaks down into 1 therapy hour per 10 patient hours. Over the course of the year, this breaks down as follows: 1-3 hours of supervision dedicated to inpatient rehabilitation psychology, 1-2 hours of supervision dedicated to outpatient rehabilitation psychology, and 1 hour of supervision in their six-month rotations in neuropsychology and primary care psychology. In addition, fellows will participate in group supervision weekly. Furthermore, it is expected that rehabilitation psychology fellows will participate and seek out additional supervision and consultation as needed.
Evaluation

Rehabilitation psychology fellows will be evaluated throughout the course of their training year. Open communication, evaluation, and feedback are believed to be an integral part to development and growth in post-doctoral training. Fellows will be formally evaluated by each supervisor at least at the mid-point of their fellowship (i.e., six-months) and at the end of the fellowship year. Rehabilitation psychology fellows will be evaluated on the clinical competencies outlined previously. Fellows will also complete a self-assessment evaluation and an evaluation of the training site and supervisors at these time intervals.

Professional Presentations

Rehabilitation psychology fellows are required to make a professional presentation to the psychology staff during their fellowship training. Various professionals, psychology clerkship students, and students from other areas may also be invited to attend. The presentation should involve an area of clinical interest and/or research associated with rehabilitation psychology. Fellows are expected to demonstrate competency in areas integral to specialty practice, including aspects of assessment, intervention, and consultation. It is recommended that the fellow discuss their chosen topic with various training staff prior to initiating a specific presentation topic.

Fellows may be invited or encouraged to participate in preparing other presentations along the way. For example, they may be invited to offer lectures in health science courses, community education at local conferences, or to patients and families in psychoeducational support groups. We strongly encourage educational and research presentations throughout the fellowship years as part of professional growth and training. Fellows are encouraged to use their time on fellowship to create teaching, clinical, or research portfolios that will help them in seeking academic positions. We encourage fellows to create and present a 5-year research program, a teaching portfolio, and clinical case presentations. We believe this will prepare fellows for job searching and set them up for a great start in teaching and mentoring in their early careers.

Research Expectations

Fellows are expected to be involved in an active program of research throughout the course of their training. Research activities can include development of a new research project, use of existing data, and/or collaboration with psychologists on their current projects. At minimum, rehabilitation psychology fellows are expected to submit at least one research abstract for a national conference poster and/or presentation and submit a manuscript for publication prior to completing their fellowship program. The research project must be approved by the research training staff and it is recommended that a topic or project be identified early in the first fellowship year.
Research Resources and Support

The Division of Physical Medicine & Rehabilitation offers a great deal of support for research, including access to the University of Utah Study Design and Biostatistics Center, research support staff for initiation of new projects, and the University of Utah Division of Physical Medicine & Rehabilitation Research Committee for additional support, feedback, and pilot grant funding.

Salary

A rehabilitation psychology fellows annual salary will be $50,004, plus an approximate 32% benefit package, of which 14.2% is retirement contribution (retirement is limited to United States citizens, permanent residents and H-1B, and other eligible visa holders). As noted, these benefits are in addition to the $50,004 salary.

Benefits and Leave

https://www.hr.utah.edu/benefits/

As an employee of the University of Utah School of Medicine, rehabilitation psychology fellows have access to a variety of benefits, including medical and dental benefits, retirement benefits, holiday leave, and vacation/sick pay. Please visit the University of Utah Human Resources website for information regarding eligible benefits for rehabilitation psychology fellows:

https://www.hr.utah.edu/forms/lib/5-308.Matrix.pdf

Training Resources

Rehabilitation psychology fellows will be provided with their own office at the University of Utah – School of Medicine and all necessary equipment to complete their fellowship requirements, including computers, electronic medical record access, phone/fax, copies, pager, computer and technical support, etc. Nancy Andersen, the fellowship training coordinator and the Rehabilitation Psychology Clinic administrative secretary, is knowledgeable in personnel issues and fellows are encouraged to utilize her expertise, as needed.

University of Utah Office of Postdoctoral Affairs and Professional Programs

Fellows are also encouraged to become involved with the University of Utah Office of Postdoctoral Affairs and Professional Programs. The Office of Postdoctoral Affairs and Professional Programs provides resources, support, social networking, and professional
networking for postdoctoral fellows throughout the University of Utah. For more information, please visit their website at:

http://postdocs.utah.edu/

Living in Salt Lake City, Utah

An important part of professional development involves finding balance in areas of life outside of work and psychology. The University of Utah Rehabilitation Psychology Fellowship Program encourages fellows to seek out activities and experiences valuable to their personal well-being. Fortunately, Salt Lake City offers a wide range of activities both within the city limits and in the nearby outdoors.

Salt Lake City is the capital of Utah with an estimated population of 191,180 people (1,140,483 if you examine the total metropolitan area) and is frequently recognized as a great place to live and work. In the sixth edition of the Places Rated Almanac, Salt Lake City was ranked the best place to live in North America and was recently rated as the eighth best place to live for careers as rated by Forbes Magazine. Salt Lake City is situated next to the Wasatch Mountains with access to world class skiing, snowboarding, hiking, climbing, and mountain biking just minutes away from downtown. Three Nordic ski areas, the nation’s only recreational ski jumping complex, and seven world-class ski resorts are within a 40-minute drive of downtown Salt Lake City, Utah. There are numerous festivals, art exhibits, museums, art performances, music concerts, and sporting events available throughout the year.

A few favorite activities of the staff and “must see” events and areas are listed below:

- Outdoor recreation: Skiing, snowboarding, hiking, backpacking, mountain biking, fishing, camping, horseback riding, rock climbing, etc.
- Five national parks including: Arches National Park, Bryce Canyon National Park, Capitol Reef National Park, Canyonlands National Park, and Zion National Park and 43 state parks.
- Festivals and events including the Utah Arts Festival, Salt Lake Greek Festival, Salt Lake Comic Con, Sundance Film Festival, and many more.
  http://www.sundance.org/festival/
- Professional and amateur sports, including the National Basketball Association’s Utah Jazz, the International Hockey League Utah Grizzlies, the Major League Soccer Real Salt Lake soccer club, and the University of Utah sports teams who compete in the Pacific 12 Conference.
- Downtown Farmers Market – Salt Lake City: http://www.slcfarmersmarket.org/
Grievances and Due Process

Disagreements between fellows and training staff may occur and a formal grievance policy is in place to appropriately facilitate resolution of these issues. It is hoped that grievances can be appropriately resolved in the least formal manner whenever possible. Rehabilitation psychology fellows and training staff will work to address these issues promptly and in a timely manner. The University of Utah also provides confidential consultation with the Office of the Ombudsman for faculty and trainees with a problem or concern. Additional information can be located here:

http://medicine.utah.edu/academic-affairs-faculty-dev/ombudsman/

Due process can be initiated by either rehabilitation psychology fellows or training staff.

Postdoctoral fellow due process steps:

1. Initially discuss the issue with the staff member involved
2. Discuss the issue with the Director of Training
3. If the issue is still not sufficiently addressed, the University of Utah Staff Employee Grievance Policy will be followed. Please refer to the following link for additional information:
   http://regulations.utah.edu/human-resources/5-203.php

Training staff due process steps:

1. Initially discuss the issue directly with the involved fellow
2. Consult with the Director of Training
3. If the issue is still not sufficiently addressed, the University of Utah Staff Employee Grievance Policy will be followed. Please refer to the following link for additional information:
   http://regulations.utah.edu/human-resources/5-203.php
Remediation, Probation, Suspension, and Dismissal

Rehabilitation psychology fellows who display problematic behaviors interfering with professional function, including inability to develop professional skills, inability to integrate professional standards, and/or inability to manage personal stress/psychological issues that impair professional function may be subject to remediation, probation, suspension, or dismissal from the program. Training staff will utilize professional judgment to determine when these behaviors are deemed problematic. Depending on the severity of the problem, the process of remediation may not follow a step-wise approach; meaning that serious problems may require earlier and more significant intervention.

The ideal process for addressing these issues would begin with a verbal warning regarding the problematic behavior and changes to address the behavior appropriately within the context of clinical supervision and training. Should problematic behaviors continue following verbal warning, a formal written warning will be provided outlining the concerning behavior and expected changes to resolve the problem or issue. Depending on the severity of the problematic behavior, the fellow may be placed on probation or suspension to resolve the concerning behavior. Failed interventions or egregious ethical and problematic behavior may result in dismissal from the program, including involvement with the Division of Physical Medicine & Rehabilitation Medical Director and the University of Utah Human Resources.

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