Thank you for your interest in the Advanced Psychology Fellowship Program in Mental Illness, Research and Treatment at the Salisbury VA Medical Center Mental Illness Research, Education and Clinical Center (MIRECC) in Salisbury, NC. Please note the program is a neuropsychology specialty program. We anticipate two openings for a two-year Fellow to begin in August 2019.

Overview

The Salisbury VAMC MIRECC Fellowship position emphasizes advanced research and specialized clinical training in post-deployment mental health. The program also adheres to the Houston Conference Guidelines for post-doctoral training in clinical neuropsychology. MIRECC locations are nationally recognized training centers of excellence dedicated to improving the long-term functional outcome of individuals with mental illness through innovative research, clinical care, and educational programs. The Fellowship program is designed to train allied health professionals with the goal of becoming outstanding clinical researchers in high priority areas of mental health. Individualized, mentored research and clinical training are combined with a state-of-the-art curriculum emphasizing research methods, statistics, epidemiology, mental health systems, quality improvement methods, education, and service delivery. Each MIRECC site has a specific area of focus for research and clinical training. The MA-MIRECC focuses on post deployment mental health, and the Salisbury VAMC MIRECC more specifically focuses on neuropsychology, neuroimaging, TBI, blast exposure, and psychiatric conditions. Fellowship sites have national interaction and collaboration through weekly video and audio conferencing of didactics. This site also provides weekly on-site didactics, including functional neuroanatomy and advanced neuropsychology seminars. Didactic opportunities at our academic affiliate, Wake Forest School of Medicine (WFSM), include Grand Rounds and viewing brain cuttings. In addition, a nationwide network of academic and research resources is available, including meaningful interaction with nationally-recognized experts.

The Salisbury VAMC is a member of the Mid-Atlantic (VISN 6) MIRECC and houses the Translational Clinical Neurosciences Collaborative (TCNC), our local research lab. TCMC and MIRECC have several active research protocols underway including multisite investigations of OEF/OIF/OND post-deployment mental health and neuropsychological functioning. In collaboration with WFSM, we are developing multimodal neuroimaging investigations (MEG, PET, MRI, DTI, fMRI) of common post-deployment conditions such as mild TBI and PTSD, with particular interest in translational applications. The department of Research & Academic Affairs has developed an active and growing clinical trials unit with 15 current
Studies. Possibilities for research collaboration exist with other on-site projects, intra-MIRECC interactions (Richmond VAMC, Durham VAMC), and WFSM faculty.

Supervised clinical activities are offered in our Neuropsychology Outpatient Clinic, ADHD Clinic, Community Living Center (Geropsychology), and the Functional Adaptation and Cognitive reTraining (FACT) and SmartThink cognitive rehabilitation programs. Fellows may choose to arrange additional training experiences in conjunction with other programs including the Inpatient Psychiatric Unit, PTSD Residential Rehabilitation Treatment Program (PTSD-RRTP), Neurology department, Pharmacology, or WFSM. Although this Fellowship is research focused, it is designed to meet clinical supervision and training requirements consistent with NC psychology licensure and with the Houston Conference Guidelines for Clinical Neuropsychology.

Fellows devote the majority of their time to clinical research and 25% to direct patient clinical care. In collaboration with their mentors, Fellows develop and implement a research projects, publish and present findings, participate in grant writing, and utilize the latest technology for educational activities and clinical service delivery. Career development is also emphasized, and with mentor support and guidance, fellows are expected to develop a 2-5 year career trajectory beyond the formal postdoctoral experience.

Guiding Principles

The structure and activities of the Fellowship program are designed to meet the guidelines established by the American Psychological Association, the Houston Conference Guidelines, and the VA Guidelines for Postdoctoral Programs. More information about the MIRECC Advanced Fellowship Program can be found at www.mirecc.va.gov/mirecc-Fellowship.asp and in the following article:


Training Setting

The W.G. (Bill) Salisbury Veterans Affairs Medical Center (Salisbury VAMC) in Salisbury, North Carolina offers services in Extended Care, Psychiatry, and Medicine. The hospital provides inpatient and outpatient medical and psychiatric care. We house a 35-bed Substance Abuse Residential Rehabilitation Treatment Program (SARRTP) and a 23-bed PTSD-RRTP. The 120-bed Community Living Center (CLC) includes a short term rehabilitation unit, long term care unit, and a Hospice unit. Additionally, as a designated Center of Excellence for Mental Health, the Salisbury VAMC was awarded over $10 million for renovations to current facilities and for expansion. A new state-of-the-art inpatient psychiatric facility opened in Spring 2014. The Salisbury VAMC has also been designated as a Center of Excellence in Geriatrics, and an $8 million hospice opened in 2013. The Salisbury VAMC has had an academic affiliation with Wake Forest School of Medicine (WFSM) since 1995. In 2006, the medical center also affiliated with the Edward Via College of Osteopathic Medicine (VCOM) at Virginia Tech University. Additionally, the Salisbury VAMC catchment area includes two new Healthcare Centers (HCCs) in Charlotte and Kernersville.

The Salisbury VAMC has been consistently ranked as one of the top five growing VA’s in the nation. Between 2000 and 2013, the number of total Veterans seen by the medical center increased from 31,515 to 91,659. During 2010, the Salisbury VAMC was 11th in the nation for number of unique Veterans served and had nearly 700,000 outpatient visits. Patient demographics are reflective of the areas served, including

This document may contain links to sites external to Department of Veterans Affairs.
VA does not endorse and is not responsible for the content of the external linked websites.
Charlotte, Salisbury, and Winston-Salem, NC. Census data (2010) reveal that the population is 15-39 percent African American/Black, 2-4 percent Asian, 6-10 percent Hispanic, and 53-65 percent White. Current Salisbury VAMC Veteran demographics reveal that the population is 31 percent African American/Black, 0.7 percent American Indian, 0.3 percent Asian, 0.7 percent Pacific Islander/Hawaiian, 2 percent unknown/declined and 66 percent White. The majority of Veterans served are men, but the female patient population is growing rapidly.

The Salisbury VAMC Mental Health and Behavioral Sciences (MH&BS) service line has over 250 staff in multiple disciplines including nurses, psychologists, psychiatrists, social workers, licensed therapists, and others. Psychology has over 60 doctoral level psychologists, two psychometrists, and several administrative assistants. Five psychologists are credentialed in neuropsychology, and two are currently board certified (one through ABPP and one through ABN). MH&BS also offers a one-year APA-accredited Clinical Psychology Residency Program (two positions), an APA accredited internship with six positions, and several psychology practicum student rotations. The MIRECC is housed in the Research and Academic Affairs service line, which offers one additional MIRECC medical fellowship position. In previous years, this position has been held by neurology or pharmacology. Salisbury VAMC additionally hosts medical residents (psychiatry, pharmacology, neurology, etc) and trainees from programs including WFSM and VCOM.

Training Goals and Activities

Evaluation

In the beginning of the first year, Fellows complete a written Self-Assessment which guides the Fellow’s training plan. The Self-Assessment allows Fellows to tailor their learning experiences in order to best meet their individual training needs, while also providing sufficient structure to help ensure successful completion of training goals. Together with one of the co-directors, fellows will develop an Individual Development Plan that will be updated throughout the two year program and which guides each Fellow’s individual training needs and goals.

Program’s evaluation of Fellow

Supervisors and Fellows are expected to exchange feedback routinely as a normal part of their daily interactions. On a semester basis (six months), each Fellow receives a written evaluation of their performance in the Fellowship; quarterly evaluations (approximately three months) are provided in verbal form. The written feedback is structured to match the individualized learning goals and objectives and includes written feedback from clinical supervisors and the research mentor(s). Feedback is expected to be as specific as possible, and communicated in a respectful manner. The Training Director and Fellow discuss the formal evaluation and both sign it before it is placed in the Fellow's training file. The Training Director and the Fellow meet and collaboratively assess progress toward achieving goals and objectives in the next semester and revise or remediate as needed. If a Fellow is at risk of not meeting training requirements for program completion, or performs below expectations on any given skill, a Performance Improvement Plan will be designed with specific and measurable goals, and will be re-evaluated at set timepoints. Fellows receive a copy of the Fellowship Training Manual which provides additional detail about evaluation including due process procedures for problem identification and resolution (e.g., probation for unethical behavior). Additionally, each fellow meets with one training director for an hour each week to discuss progress through the program, administrative issues, and any topics relevant to progress in clinical and research goals; this is beyond regular clinical supervision and research mentor meetings.

This document may contain links to sites external to Department of Veterans Affairs. VA does not endorse and is not responsible for the content of the external linked websites.
**Fellow's evaluation of program**

A formal system of evaluation is used for Fellows to provide feedback on their clinical, supervisory, mentorship, and overall Fellowship program experience. The Fellows complete formal rating scales of their experience in clinical rotations, research mentorship, and in the overall Fellowship every semester (6 months) and at the end of the training program to indicate their satisfaction with the training experiences, outcomes, quality of supervision provided, didactic experiences, research involvement, and facilities and resources available. In addition, Fellows complete evaluations after each seminar (Functional Neuroanatomy and Advanced Neuropsychology). However, keeping in mind that feedback is most useful when it is immediate and specific, Fellows are encouraged to provide informal input and feedback as a routine part of the supervision process, in their weekly meetings with their research mentor(s), and in weekly meetings with the Training Directors. Clinical supervision and research mentor evaluations are to be discussed and signed by the Fellow and supervisor/mentor prior to being submitted to the Training Directors. A copy is provided to the Training Directors as a means of monitoring program quality. The Training Directors and Fellow will review the Fellow’s ratings and work collaboratively to address any areas of concern.

**Research Training**

Fellows devote the majority of their time to research-related activities. This includes educational activities (didactics and seminars) and administrative activities (staff meetings), although at least 25% of this time is expected to be devoted to neuropsychological research. Under the guidance of their mentor(s), Fellows are expected to participate in ongoing research activities at the Salisbury VAMC and WFSM. In order to successfully complete the program, fellows are required to:

1. Submit a minimum of four publications (two as first author) using existing or new datasets,
2. Submit a grant application,
3. Develop an understanding of competitive grant submission and review processes, and
4. Actively participate in existing, ongoing data collection and neuropsychological research activities, including running an average of one research participant weekly.
5. Present research findings to psychologists, psychiatrists, social workers, and nurses at the Salisbury VA Mental Health Grand Rounds in July of each year.

Fellows additionally have the opportunity to design, develop and conduct their own research projects.

**Research training activities**

Research mentorship provides Fellows the opportunity to learn from an established local investigator as well as co-mentors from within the local research community, within the network of VISN-6 MIRECC investigators, or VA investigators across the nation.

**Applicants are encouraged to contact the Training Directors prior to applying to learn about faculty members who are currently available to provide primary mentorship in the applicant's area of interest.**

The Salisbury VAMC has excellent research infrastructure including an onsite institutional review board (IRB) and the Salisbury Foundation for Research and Education, a non-profit organization that supports grant management and other research activities. There are opportunities to collaborate with other VA and WFSM investigators who focus on specific domains of post-deployment health such as TBI and PTSD, innovative technology-based approaches to training clinical expertise, non-human primate translational science studies, and application of advanced neuroimaging techniques in the study of mild TBI. Fellows gain access to VA Informatics and Computing Infrastructure (VINCI) which provides access to analytic software (SAS, R, etc.). MIRECC-specific resources include statistical consultation and access to archival...
data from an ongoing post-deployment investigation. Fellows apply for an academic appointment at our academic affiliate, WFSM. This provides the opportunity to audit select classes, access library resources and electronic articles via a wide assortment of online databases (e.g., Medline, World of Science, PsycINFO), and the prospect of providing training and research collaboration in the academic community.

The Salisbury VAMC is an active and growing research site. Through the MIRECC, the Salisbury VAMC participates in two ongoing multisite research protocols. The first is a longitudinal investigation of OEF/OIF/OND post-deployment mental health. This is a rich database that includes many questionnaires, clinician administered diagnostic interviews, and a blood sample. The second is an in-depth investigation of cognitive functioning in those same individuals. Over 280 participants have completed an additional six hour comprehensive neuropsychological battery. In addition, the TCNC lab was awarded funding by the Chronic Effects of Neurotrauma Consortium (CENC) for a study in Veterans exposed to primary blast forces while deployed. This study incorporates symptom interviews and neurocognitive assessments as well as a broad range of advanced neuroimaging techniques including magnetoencephalography (MEG), functional magnetic resonance imaging (fMRI), diffusion tensor imaging (DTI), diffusion kurtosis imaging (DKI), and magnetization transfer imaging (MTI). Opportunity for local research projects also exists; for example, previous Fellows have conducted an investigation of cognitive functioning prior to and following participation in PTSD-RRTTP as well as utilizing electronic medical record data to investigate the validity of neuropsychological services administered remotely using the VA’s videoconferencing infrastructure. Opportunities also exist to collaborate on pre-clinical non-human primate investigations of the effects of long term alcohol abuse, including neuroimaging data.

As mentioned above, a variety of educational opportunities are available. Both the Salisbury VAMC and WFSM offer Grand Rounds and other opportunities to participate in local and broadcast lectures on state-of-the-art research methods. The MIRECC Advanced Fellowship program’s video teleconferencing system provides opportunities for weekly didactics including seminars on grant writing, biostatistics, bioethics, and career development.

**Research Team meetings:** The research team comprised of a research neuropsychologist, neurobiologist, neuroscientist, research assistants, clinician-researchers, and Fellows meet bi-weekly. During this meeting, researchers and Fellows discuss status of manuscripts and grants, review research protocols, plan for upcoming research presentations at conferences, and plan future research activities and papers.

**Professional meetings:** Fellows are encouraged to attend professional meetings and conventions of their choice as a means of participating in the larger professional world, and of pursuing individual professional interests. Fellows are also expected to present research data (e.g., poster, oral presentation, symposia) at national or international professional meetings or conferences. The Fellowship program provides a stipend of $1000 for authorized travel to professional meetings. Authorized absence may be granted for such activities in an amount comparable to other Psychology staff. Absences for such meetings must be negotiated with the supervisor and submitted for approval.

**Clinical Training**
Fellows spend up to 25% of their time in supervised VA direct patient clinical care. Fellows are able to pursue specialized clinical experience areas pertinent to post-deployment mental health (Neuropsychology Clinic, CLC, ADHD clinic, FACT/SmartThink Programs, and Primary Care). Primary goals include:

1. Employ current evidence-based assessment and/or treatment to enhance patient care,
2. Provide education and training to more junior psychology trainees through in-service lectures, grand round presentations, and direct clinical supervision,
3. Receive training in complex ethical and medicolegal issues unique to VA clinical work and research, and

Clinical training activities
Fellows complete six month rotations and are permitted to repeat rotations, provided the experience will result in additional growth/development. Fellows identify one particular area of interest under the umbrella of Neuropsychology and complete clinical rotations reflective of their clinical and research interests, and learning needs as determined by the Fellowship Directors and mentor team. The clinical supervision structure has been established through the development of the APA internship and Fellowship programs at Salisbury VAMC, and is monitored for quality by the MIRECC Fellowship Directors, the Psychology Training Director, and the Psychology Training Committee. It should be noted that clinical-research activities, in many cases, also apply toward state licensure residency requirements.

Fellows receive at least two hours per week of individual, face-to-face supervision, conducted by licensed psychologists with expertise in the areas being supervised. Fellows receive supervision from at least two psychologists during each training year. Supervision provided is relevant to the actual clinical services rendered by the Fellow. Fellows take responsibility for tracking aggregate clinical hours towards licensure. If licensure in a state other than North Carolina is desired, applicants are encouraged to ensure that the supervision offered at Salisbury is sufficient for licensure prior to application. Fellows are required to apply for licensure prior to initiation of clinical activities, generally within the first 30 days of fellowship.

Staff meetings: Fellows attend the monthly Psychology Service staff meetings (2nd Friday of each month, 11:00 am to 12 noon), the staff meetings of the Research Service Line, and the unit(s) or services on which they work.

Instruction and supervision of other trainees: Fellows frequently provide neuropsychological consultation to other providers in psychology or psychiatry. Fellows present 2 teaching case presentations per year for the intern didactic series, geared towards educating interns on neuropsychological conditions. Fellows may also engage in additional intern didactics as available and as interests permit. Additionally, there may be opportunity for fellows to clinically supervise interns rotating on the neuropsychology rotation, in a structured manner and under the guidance of the supervising neuropsychologist.

Available Clinical Rotations

Neuropsychology Rotation: The Neuropsychology Rotation is the principal rotation for Fellows. If a Fellow plans to pursue board certification in neuropsychology, this rotation is repeated and individualized over the 2 years of fellowship by focusing on different populations, different theoretical approaches to assessment, and mentorship by different neuropsychologists. This rotation allows the Fellow exposure to a plethora of testing instruments. Cases include a wide range of CNS disorders, health conditions, and injuries, and patients range from newly discharged OEF/OIF/OND-era veterans to elderly veterans. Initially, the Fellow will work closely with the supervisor and advance toward independent hypothesis generation and test selection. The Neuropsychology Clinic functions as an outpatient consult service, although participation in team-based treatment planning is also possible. At a minimum, the Fellow administers and scores instruments, interprets test data, writes reports, and provides feedback sessions. Ample opportunity exists to interface with other disciplines (such as Psychiatry, Neurology, or...
Psychopharmacology). There is opportunity to develop individual foci, especially during the second year, based on interest. Past fellows have incorporated teleneuropsychology and disability evaluations based on career goals. Required readings on neuroanatomy, psychometrics, assessment theory, and pathology are routine. The Fellow is expected to work towards assuming a role of expert regarding diagnostics, and will provide consultation to other psychology staff.

Fellows may elect to be involved with the FACT (Functional Adaptation and Cognitive re-Training) program. The FACT program is an innovative program for veterans who have incurred a mild to moderate traumatic brain injury or other acquired brain injuries and who are experiencing chronic cognitive symptoms. A team approach is applied consisting of a neuropsychologist, a psychiatrist, a pharmacist, a social worker, and a vocational rehabilitation specialist.

**Geropsychology and Home Based Primary Care:** Geropsychology training opportunities are available as an elective outpatient rotation as well as in inpatient settings in the Community Living Center (CLC). The Home Based Primary Care program allows Fellows to provide elderly and disabled veterans with assessment or psychological services in their homes. This unique opportunity will allow the Fellow to function as part of an interdisciplinary team and to make in-home visits with the Home Based Primary Care staff psychologist.

In the CLC, Fellows have the opportunity to complete cognitive and capacity evaluations for veterans rehabilitating from illness, stroke, surgery, injury, or hospitalization. Alternatively, Fellows can provide brief therapy to veterans in Hospice (e.g., end-of-life issues), long term care (e.g., depression, behavioral disturbances), or rehabilitation (e.g., adjusting to amputation/diagnosis, motivational interviewing for healthy behaviors). They work in multidisciplinary teams (Chaplain, Nurses, PT, OT, ST, Physicians, Social Workers, Psychologists, and Psychiatry), regularly present during weekly team meetings, provide education to team members, develop behavior modification plans for disruptive behavior, and develop recommendations for treatment or discharge planning. This is a fast-paced environment that fosters skill development in brief bedside assessment, concise report writing, a fast turnaround, a team approach, and presentation of results to other disciplines. For those wishing to pursue board certification in neuropsychology, this is a recommended rotation and can be geared specifically towards neuropsychological evaluations.

**Acute Psychiatry:** An inpatient psychiatric unit totaling 46 beds provides short-term inpatient treatment for a variety of mental health conditions. This setting provides the Fellow with a broad range of clinical experiences within the domain of short-term inpatient assessment and consultation. The Fellow attends interdisciplinary treatment team meetings and provides consultation to the team as needed. Primary time commitment for the Fellow will involve providing psychological evaluations (e.g., diagnostic, cognitive screening, capacity, etc), though there is opportunity for group therapies and education classes on the Acute wards. Other activities will include weekly participation in Initial Psychiatric Evaluations with an attending psychiatrist, providing short-term/problem-focused psychotherapy for select patients, and as time allows, the opportunity to co-lead a variety of off-ward group therapies.

**Other Rotations:** Other clinical rotations may be available based on the Fellow’s training goals, such as in the Outpatient Mental Health Clinic, Posttraumatic Stress Disorder Clinical Team (PCT), PTSD Residential Rehabilitation Treatment Program, Substance Abuse Residential Rehabilitation Treatment Program, or Primary Care Mental Health Integration. Fellows are expected to function as an advanced psychology trainee in selected rotations, and may thus also be involved in supervising more junior trainees as available. Additionally, Fellows will need to tailor specific rotations towards advanced neuropsychology training.

This document may contain links to sites external to Department of Veterans Affairs. VA does not endorse and is not responsible for the content of the external linked websites.
Fellows may also develop new rotations consistent with their training goals at the discretion of the Training Director.

**Education and Career Development**

Educational goals not only include learning opportunities, but also teaching activities and dissemination of research findings. Educational opportunities include VA and WFSM Grand Rounds, VA online seminars, VA clinical training workshops, mandatory MIRECC Advanced Fellowship video teleconference seminar series (i.e., "V-Tels"), observation of brain cuttings at WFSM, and formal coursework offered by WFSM. WFSM was recently awarded a prestigious Clinical Translational Science Award to develop a Clinical Translational Science Institute (CTSI). The CTSI is part of a consortium of 60 similar programs funded through NIH to accelerate translational discoveries through a variety of mechanisms, including significant educational and training opportunities. The CTSI offers significant support specifically to early career investigators, including a Translational Research Academy, study coordinator pool, Research Navigators, biostatistical support, and two internal KL2 funding lines. Primary educational goals for fellowship include:

1. Developing a firm knowledge base regarding recent developments in translational research as it relates to post-deployment mental health,
2. Complete at least one presentation at a local Grand Round, Psychology Department brown bag lunch, in-service training, intern didactics, or other appropriate venue, and
3. Present research at a regional, national, or international scientific meeting.

**MIRECC Fellowship Seminar Series**

The MIRECC Advanced Fellowship program videoconference seminar series ("V-Tels") offers Fellows a broad range of topics including state-of-the-art research methodologies, biostatistics, intervention and services research, quality improvement methods, grant funding, grant writing workshops, and career development. These weekly seminars are mandatory for Fellows (at least two per month).

**Advanced Neuropsychology Seminar**

The Advanced Neuropsychology Seminar meets twice monthly (1st and 3rd Wednesdays, 3:00-4:30 PM) to cover an array of clinical neuropsychology topics. Fellows contribute to development of the scheduled topics and invited speakers, depending on group and personal need. Fellows are provided with readings relevant to each topic and are expected to arrive prepared to actively participate in discussion. Fellows are required to participate in mock ABCN oral exam activities each year, including sample defense and fact finding. Other postdoctoral residents (clinical psychology), medical residents (neurology, psychiatry, pharmacology, and rehab), and predoctoral interns are invited to attend these seminars, but seminars are structured for the postdoctoral level and for Houston Guidelines for Board Certification. Seminars involve a mix of guest speakers, didactics, hands-on test training, case presentations, and board certification mock exams.

**Functional Neuroanatomy Series**

The Functional Neuroanatomy Seminar meets twice monthly (2nd and 4th Wednesdays, 3:00-4:30 PM) to cover an array of functional neuroanatomy topics. The seminar series is led by a research neurobiologist. Fellows contribute to development of the scheduled topics and invited speakers, depending on group and personal need. Fellows are provided with readings relevant to each topic and are expected to arrive prepared to actively participate in discussion. Other postdoctoral fellows/residents as well as predoctoral interns are invited to attend these seminars but seminars are structured for the postdoctoral level.

---

This document may contain links to sites external to Department of Veterans Affairs. VA does not endorse and is not responsible for the content of the external linked websites.
Diversity V-Tel
A monthly Diversity Video-Teleconference (V-Tel) is offered solely to post-doctoral residents by a consortium of 12 VAHCSs around the country. Each month, a presentation and discussion focuses on a different aspect of diversity. MIRECC Fellows are required to attend a total of 2 of these V-Tels across their 2 years of fellowship.

Ethics Training
Fellows are required to complete 2 ethics trainings outside the context of the above training activities. Typically, there is a yearly AHEC training sponsored by the VAMC that is free of charge. Other options may include online CE experiences and workshops or sessions at conferences and meetings.

Requirements for Completion

In order for Fellows to successfully complete the program, they must:

1. Successfully meet or exceed expectations in competencies set based on the goals of the Fellowship described above,
2. Complete all mandatory training activities (V-Tels, mandatory seminars, ethics and diversity trainings, publication submission, and grant submission),
3. Not be found to have engaged in any significant ethical transgressions, and
4. Complete two full training years (4160 hours).

Upon fulfillment of these requirements, a Certificate of Completion is awarded, verifying the Fellow’s completion of a postdoctoral training program.

Stipend and Benefits

The Fellowship program offers a full-time stipend of approximately $46,102 for Fellowship year 1, and approximately $48,594 for year 2. Benefits include: 10 Federal holidays, 13 days of vacation, up to 13 days of sick leave, authorized, paid leave for conferences, and health insurance. The Federal Tort Claims Act covers professional liability for services provided as a DVA employee.

Administrative Policies and Procedures

This program supports and adheres to Equal Employment Opportunity policies and the Americans with Disabilities Act. Applications from racial, ethnic, and sexual minorities and women are strongly encouraged. No applicant will be discriminated against on the basis of race, color, creed, religion, sex, place of national origin, or age. We do not require self-disclosure.

Accreditations

The MIRECC Advanced Psychology Fellowship Program at the W.G. Salisbury Veterans Affairs Medical Center in Salisbury, NC, is not APA accredited, but will be submitting a self-study in 2019.
Local Information

The Salisbury VA Medical Center is located in Salisbury, North Carolina. Salisbury is nestled in the rolling hills of the Central Piedmont region and is a city of approximately 28,000 with significant historical and natural attractions. The larger metropolitan areas of Charlotte, Winston-Salem, and Greensboro are all within a 45-minute drive. Beach and mountain resort areas are easy weekend trips with lakes and many fine golf courses in close proximity. The area is rated fifth in the country in terms of economic growth and is expected to continue leading the nation well into the next decade. The pleasant climate and relatively affordable cost of living make the area a popular relocation or retirement area.

While providing all the attractions of a small town, Salisbury also offers many big city amenities including a symphony, several art galleries, local live theater, museums, fine dining, two locally owned breweries, local wineries, summer festivals, and entertainment. The nearby metropolitan areas offer many additional cultural opportunities including theater, opera, and regional festivals. For sports enthusiasts, Charlotte is home to the Carolina Panthers NFL team, Charlotte Hornets NBA team, and the Charlotte Knights a MLB AAA team affiliated with the White Sox. Charlotte also has the Charlotte Independence (United Soccer League), the Charlotte Roller Girls, and the Charlotte Checkers, a minor league hockey team affiliated with the Carolina Hurricanes. Kannapolis, NC, is home to the Chicago White Sox Single A minor league team, the Intimidatators. Collegiate teams, including UNC-Chapel Hill and Duke, are also found in the Carolinas. Concord, NC, is home to Lowes Motor Speedway, a major NASCAR venue, and the NASCAR Hall of Fame is located nearby in Charlotte, NC. Concord also has Concord Mills, a popular shopping mall, as well as Great Wolf Lodge, an indoor water park. Charlotte is home to the U.S. National Whitewater Center. Salisbury is easily accessible from Interstate 85. Air travel is convenient through the Charlotte-Douglas International Airport, the Piedmont Triad Airport in Greensboro, NC, or the Raleigh-Durham International Airport in Raleigh, NC. Amtrak train service and bus lines are also available.

Application & Selection Procedures

Eligibility
We seek candidates who are US citizens and will have completed an APA-accredited doctoral program in clinical or counseling psychology and an APA-accredited internship or not-yet-accredited VA internship by the start of the Fellowship. If the applicant has not completed the dissertation at the time of the application, a letter from the dissertation chair addressing dissertation status and anticipated completion date is required. As an equal opportunity training program, the Fellowship welcomes and strongly encourages applications from all qualified candidates regardless of race, ethnicity, religion, sexual orientation, disability, or other diversity status. Please also refer to the following website for additional eligibility requirements: http://www.psychologytraining.va.gov/eligibility.asp. Eligibility requirements for psychology trainees in VA: https://www.psychologytraining.va.gov/docs/Trainee-Eligibility.pdf

Deadlines
Applications must be emailed or postmarked by December 15, 2018. Our selection criteria are based on a goodness-of-fit model. The ideal candidate has demonstrated strengths in clinical work, research productivity, academic preparation, and personal characteristics related to the profession. Houston Conference Guidelines state that varying levels of education and training in neuropsychology occur at different training levels based on an individual path, but at a minimum, competitive applicants will demonstrate a basic foundation in neuropsychology. Furthermore, we are
recruiting Fellows whose professional goals are consistent with the training and experiences we offer to ensure that the post-doctoral experience is productive. Our goal is to select Fellows who have the potential to develop as leaders in clinical services, research, and education with a particular interest in neuropsychology. Each application is initially reviewed for eligibility after all materials are received. A selection committee reviews all written materials and provides telephone, video teleconference, or in-person interviews to top candidates. Final rankings, and offers, are determined by consensus of the committee based on written and interview information. In the absence of uniform application and notification dates for postdoctoral programs, we understand that applicants are often faced with having to make difficult decisions between programs with differing timelines. With this in mind, we make every effort to keep our review process timely and to keep candidates well informed of their status.

In order for an applicant to be eligible for acceptance, his or her graduate program must be APA accredited at the time of application. Highly regarded candidates will have supervised experience with clinical interviewing, objective psychological and neuropsychological assessment, brief and long-term psychotherapy with a variety of populations, and applicable research interests and experience. Of note, although this is a neuropsychology specialty program, applicants are expected to show a foundation in all aspects of psychology more generally prior to engaging in advanced, specialty training. Minority applicants and those with interests and expertise in minority issues are encouraged to apply.

Interested individuals who meet eligibility criteria should submit the following application materials:

1. A cover letter of no more than two typed pages summarizing:
   a. Your interest in the Salisbury MIRECC program,
   b. Professional interests and description of career goals, and
   c. Brief description of potential proposed research or research interests,
2. A curriculum vita,
3. Three reference letters,
4. Graduate transcripts from all programs that you have attended (unofficial are acceptable)
5. Relevant publication reprints,
6. A de-identified work sample (neuropsychological assessment report).

Applicants may send the cover letter, vita, unofficial transcripts, reprints, and work sample electronically to Holly.Miskey@va.gov and/or Robert.Shura2@va.gov. Letters of recommendation and verification of standing from the Training Director may also be sent electronically by the writer. Applicants who wish to submit paper materials should send them to:

Holly Miskey, PhD
Co-Director, MIRECC Advanced Fellowship Program
Salisbury VAMC (mail code 11M)
1601 Brenner Street
Salisbury, NC 28144

Interviews
Application materials will be reviewed upon receipt and top candidates will be invited for personal interviews to take place in January and February. We remain flexible with interviews, and can accommodate on-site interviews, video-conference interviews, and interviews at the corresponding meeting of the International Neuropsychological Society (INS). Inquiries may also be made via e-mail to the MIRECC Psychology Fellowship Directors at: Holly.Miskey@va.gov and/or Robert.Shura2@va.gov. We do not participate in the Neuropsychology Match through APPCN.

This document may contain links to sites external to Department of Veterans Affairs. VA does not endorse and is not responsible for the content of the external linked websites.
## Previous Fellows, Productivity, and Professional Positions

<table>
<thead>
<tr>
<th>Fellow</th>
<th>Dates</th>
<th>Current Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Laura Anthony, PsyD</td>
<td>2009-2010</td>
<td>Neuropsychological testing/psychologist, private practice</td>
</tr>
<tr>
<td>Jared Rowland, PhD</td>
<td>2010-2012</td>
<td>Research neuropsychologist, Salisbury VAMC</td>
</tr>
<tr>
<td>Saule Kulubekova, PhD, ABPP-CN</td>
<td>2011-2013</td>
<td>Neuropsychologist, Durham VAMC</td>
</tr>
<tr>
<td>Cory Lamar, MD</td>
<td>2012-2013</td>
<td>Neurologist, private practice</td>
</tr>
<tr>
<td>Holly Miskey, PhD</td>
<td>2013-2015</td>
<td>Neuropsychologist, Salisbury VAMC</td>
</tr>
<tr>
<td>Robert Shura, PsyD, ABPP-CN</td>
<td>2013-2015</td>
<td>Neuropsychologist, Salisbury VAMC</td>
</tr>
<tr>
<td>Courtney Slough, PharmD</td>
<td>2015-2016</td>
<td>Clinical Pharmacist, Salisbury VAMC</td>
</tr>
<tr>
<td>Timothy Brearly, PsyD</td>
<td>2015-2017</td>
<td>Neuropsychologist, Walter Reed Medical Center</td>
</tr>
<tr>
<td>Sarah Martindale, PhD</td>
<td>2015-2018</td>
<td>Research Health Scientist, Salisbury VAMC</td>
</tr>
<tr>
<td>Mariah Delahanty, PharmD</td>
<td>2016</td>
<td>Clinical Pharmacist, Salisbury VAMC</td>
</tr>
<tr>
<td>Erica Epstein, PsyD</td>
<td>2017-present</td>
<td>Fellow</td>
</tr>
<tr>
<td>Mark Stern, PhD</td>
<td>2018-present</td>
<td>Incoming Fellow</td>
</tr>
<tr>
<td>James “Trey” Bateman, MD</td>
<td>2018-present</td>
<td>Fellow</td>
</tr>
</tbody>
</table>

### Publications during fellowship (fellows in bold):


MIRECC Fellowship Training Faculty

Please note that this is a partial list of VA and WFSM clinicians and investigators who serve as clinical supervisors, primary research mentors, and research collaborators. Salisbury VAMC has a large number of clinical psychologists spanning multiple specialties; only supervisors who are most active in the MIRECC program specifically are listed below. Applicants are encouraged to discuss their training goals with the Fellowship Director prior to applying to ensure a good match with faculty interests.

Salisbury VAMC site:

Holly M. Miskey, Ph.D.
Co-Director of Training
Staff Neuropsychologist
Instructor: Department of Neurology, Wake Forest School of Medicine; Department of Psychiatry, Edward Via Virginia College of Osteopathic Medicine
   Doctoral Degree: Clinical Psychology, University of North Carolina at Greensboro, 2013
   Postdoctoral Internship: Durham VA Medical Center, Durham, NC
   Postdoctoral Fellowship: Research/Neuropsychology, Mid-Atlantic MIRECC, Salisbury VA Health Care System, Salisbury, NC
   Clinical and Research Interests: TBI, executive functioning, impulsivity/disinhibition, and PTSD

Robert D. Shura, Psy.D., ABPP-CN
Co-Director of Training
Staff Neuropsychologist
Board Certified in Clinical Neuropsychology
Instructor: Department of Neurology, Wake Forest School of Medicine; Department of Psychiatry, Edward Via Virginia College of Osteopathic Medicine
   Doctoral Degree: Clinical Psychology, Marshall University, 2013
   Postdoctoral Internship: VA Eastern Colorado Healthcare System, Denver, CO
   Postdoctoral Fellowship: Research/Neuropsychology, Mid-Atlantic MIRECC, Salisbury VA Health Care System, Salisbury, NC
   Clinical and Research Interests: TBI, validity testing, psychometrics, and ADHD

Robin Hurley, M.D., FANPA
ACOS Research and Academic Affairs
Associate Director, Education - VISN 6 MIRECC
Director, MIRECC Special Fellowship for Physicians
Board Certified Neuropsychiatrist
Professor, Department of Psychiatry, Wake Forest School of Medicine
Research and Academic Affairs; VISN 6 MIRECC; Brain Injury Clinic
   Medical Doctoral Degree: Medical University of South Carolina
   Residency in Psychiatry: Baylor College of Medicine
   Clinical and Research Interests: Traumatic Brain Injury, OEF/OIF post-deployment mental health, and neuroimaging

Katherine Taber, Ph.D., FANPA
Assistant Director, Education - VISN 6 MIRECC
MIRECC Research Neurobiologist
Research Professor, Edward Via College of Osteopathic Medicine, Virginia Tech

This document may contain links to sites external to Department of Veterans Affairs.
VA does not endorse and is not responsible for the content of the external linked websites.
Jared A. Rowland, Ph.D.
MIRECC Research Neuropsychologist
Instructor, Departments of Neurobiology & Anatomy, Psychiatry and Behavioral Medicine, Wake Forest School of Medicine.
Doctoral Degree: Clinical Psychology, Virginia Tech, 2010
Predoctoral Internship: Veterans Affairs Medical Center, Salem, VA
Postdoctoral Fellowship: Neuropsychology, Mid-Atlantic MIRECC, Salisbury VA Health Care System, Salisbury, NC
Research Interests: Post-deployment mental health, mild TBI, PTSD, cognitive sequelae of common post-deployment conditions, magnetoencephalography, graph theory based network analysis, non-invasive imaging biomarkers of mild TBI and PTSD.

Sarah L. Martindale, Ph.D.
MIRECC Research Health Scientist
Instructor, Department of Physiology and Pharmacology, Wake Forest School of Medicine.
Doctoral Degree: Psychology (Behavioral Neuroscience), Baylor University, 2015
Postdoctoral Fellowship: Neuropsychology, Mid-Atlantic MIRECC, Salisbury VA Health Care System, Salisbury, NC
Research Interests: Sleep, alcohol and substance use disorder, post-deployment mental health, TBI, modifiable behavioral treatment factors, co-occurring conditions, conditional process analysis, structural equation modeling.

David L. Butler, Ph.D., ABN
Staff Neuropsychologist
Board Certified, American Board of Professional Neuropsychology
FACT (Functional Adaptation and Cognitive re-Training) Program; SmartThink Program
Doctoral Degree: Clinical Psychology, Virginia Tech University, 1982
Predoctoral Internship: Veterans Affairs Medical Center Gulfport-Biloxi
Clinical and Research Interests: Adult and Pediatric Neuropsychology, Health/Medical Psychology, Psychopharmacology, Couples Therapy.

Richard C. Kennerly, Ph.D.
Neuropsychology Program Coordinator
Doctoral Degree: Clinical Health Psychology and Behavioral Medicine, University of North Texas, 2006
Predoctoral Internship: Neuropsychology Track, University of Ottawa Hospital, Ottawa, Ontario
Postdoctoral Fellowship: Psychiatric Centers at San Diego, San Diego, CA
Research and Clinical Interests: Alzheimer’s, ADHD, neurofeedback, forensics

Natalie E. Brescian, Ph.D.
Staff Geropsychologist, Geriatrics and Extended Care
Doctoral Degree: Counseling Psychology, Colorado State University, 2010
Predoctoral Internship: Geropsychology emphasis, Veterans Affairs Medical Center, Miami, FL

This document may contain links to sites external to Department of Veterans Affairs.
VA does not endorse and is not responsible for the content of the external linked websites.
Postdoctoral Fellowship: Geropsychology/Neuropsychology, Veterans Affairs Medical Center, Miami, FL
Clinical and Research Interests: Cognitive and capacity evaluation, dementia, medico-legal issues, interdisciplinary teams, end-of-life care.

Courtney S. Goodman, PharmD, BCPP
Clinical Pharmacy Specialist, Psychiatry
Board Certified Psychiatric Pharmacist
Instructor: Wake Forest School of Medicine
Doctoral Degree: Doctor of Pharmacy- UNC Eshelman School of Pharmacy, University of North Carolina at Chapel Hill
Postdoctoral Fellowship: Medical Resident/Pharmacology, Mid-Atlantic MIRECC, Salisbury VA Health Care System, Salisbury, NC
Clinical and Research Interests: psychopharmacology, drug interactions, telehealth
Research Interests: psychopharmacology, benzodiazepine use in the elderly, drug trials

Wake Forest School of Medicine site:
Dwayne Godwin, Ph.D. is a Professor of Neurobiology and Anatomy with joint appointment in the Institute for Regenerative Medicine and Dean of Graduate Programs in the Biomedical Sciences. He has extensive background in electrophysiological and cellular/molecular research. Dr. Godwin’s lab has undertaken translational studies in magnetoencephalography in the context of mapping the spike and wave discharges of childhood epilepsy, and has more recently turned this method to a greater understanding of brain networks involved in alcohol intoxication, including studies of nonhuman primates.

Jennifer R. Stapleton-Kotloski, Ph.D. is the MEG Scientist with expertise in multi-unit electrophysiology, brain-machine interfaces, mathematical statistics, and magnetoencephalography. She participates in epilepsy evaluations for the Wake Forest Baptist Medical Center Epilepsy Monitoring Unit and participates in several research investigations utilizing MEG to study brain activity of both humans and non-human primates.

Charles Tegeler IV, MD is Professor of Neurology and holds the McKinney-Avant Chair in Neurosonology and is Vice-Chair of the Promotions and Tenure Committee. He directed the Stroke Section and Stroke Center for 18 years, and has directed the Telestroke Program since it was established in 2009. His recent research focus is evaluation of a novel, noninvasive closed-loop EEG-feedback technology (HIRREM) for neurological and cardiovascular disorders.