



## Health Psychology Residency Program

Froedtert and the Medical College of Wisconsin  
Department of Psychiatry and Behavioral Medicine  
1155 N. Mayfair Rd.  
Milwaukee, WI 53226

### ***Accreditation Status***

American Psychological Association (APA)-Accredited on Contingency

Questions related to the program's accredited status should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation  
American Psychology Association  
750 1<sup>st</sup> Street, NE, Washington DC 20002  
Phone: (202) 336-5979/E-mail: [apaaccred@apa.org](mailto:apaaccred@apa.org)  
Web: [www.apa.org/ed/accreditation](http://www.apa.org/ed/accreditation)

This internship site is an APPIC Member Site and agrees to abide by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant.

### ***Stipend and Benefits***

The internship is scheduled to begin on July 1, 2020

The current annual stipend is \$35,600

Psychology residents receive 20 days of vacation, 8 paid holidays, and up to 7 sick days per year. Additionally, residents can be granted absence for professional conferences and workshops and dissertation defense release time within reason and at the discretion of the Training Director. Please refer to the benefits page <https://www.mcw.edu/departments/human-resources/benefits>.

### ***Application and Selection Procedures***

Last Updated: 10/4/2019

Qualified applicants will be students currently enrolled in an APA-accredited graduate program in clinical or counseling psychology. Applicants should have all coursework completed prior to internship year. Preference will be given to applicants who have already proposed or defended their dissertation. Froedtert and the Medical College of Wisconsin encourages applicants from under-represented minority groups, women, and those with disabilities to apply.

This residency seeks to train entry-level psychologists who will likely seek post-doctoral fellowship in academic health psychology; as such, the most competitive candidates will have an interest in practicing in--and will have relevant training and practicum experience in--health settings (e.g., hospitals, academic medical centers, integrated primary care settings). Competitive applicants will have experience with a balance of psychotherapy, behavioral medicine interventions, and health psychology-relevant psychological assessment, primarily in adults, at least some with a comorbid medical diagnosis. A preferred candidate would have a breadth of experience in general adult mental health (assessment, testing, and therapy) as well as at least one practicum in a health setting. Relevant health psychology and population health research is considered during the selection process, but clinical experience is more heavily weighted. Applicants likely to be reviewed will have a minimum of 400 hours of APPI intervention and ideally 50 APPI assessment hours.

Required qualifications:

- Enrollment in an APA-accredited doctoral program in clinical or counseling psychology  
Completion of all doctoral coursework prior to internship year
- Strong core clinical/counseling psychology psychotherapy and assessment experience
- Endorsement of doctoral chair for readiness for internship

Preferred qualifications:

- One or more practicum in a health setting (e.g., hospital, academic medical center, integrated primary care)
- Interest in pursuing career in health psychology
- Primary clinical experience/interest with adults
- Experience with empirically validated treatment approaches
- Experience with health psychology behavioral interventions
- Strong assessment background with experience in health psychology assessment
- Dissertation proposed or defended prior to internship year
- Minimum of 400 hours of APPI intervention and 50 hours of APPI assessment hours

Employment Eligibility Requirements:

The Medical College of Wisconsin has eligibility requirements for employment. According to the Wisconsin Caregiver Law, any employer identified as a caregiver institution must conduct background checks. On background checks, applicants must disclose all crimes and offenses including all civil forfeitures, misdemeanors, ordinance violations, or fines. Applicants will also need to disclose any pending charges for crimes or offenses including civil forfeitures, misdemeanors, ordinance violations, or fines. Failure to disclose this information on your application or misrepresentation of a disclosure will be considered falsification and will remove you from eligibility for employment. Please refer to the Wisconsin Caregiver Background Regulations (<https://www.dhs.wisconsin.gov/caregiver/statutes.htm>) and the list of Offenses Affecting Caregiver Eligibility (<https://www.dhs.wisconsin.gov/library/P-00274.htm>) to determine disqualifying events. All disclosures will be evaluated for relevancy to the job.

Based on the aforementioned qualifications, a select group of applicants will be invited to interview in person. Applicants who do not meet required qualifications will not be considered for an interview and will be provided with proper notice. The Residency Selection Committee will review the other applications and rate them based on the above criteria. Interviews will be offered to applicants based on meeting qualifications and being identified as a good fit for the Residency. Notification of interview status will be given no later than December 1. Interview applicants will be rated based on the criteria above. The Residency Selection Committee will review the rating forms in a final ranking meeting and create the final rankings for the APPIC Match.

Please submit the following **required** application materials through the online APPIC application process. The application deadline is: November 15. Included in the application materials are:

- APPIC Application for Psychology Internship (AAPI Online)
- Curriculum vitae illustrating past clinical and relevant research experience
- Graduate transcript
- Three letters of recommendation

Requests for further information can be directed to:

Health Psychology Residency Educational Coordinator  
Department of Psychiatry and Behavioral Medicine  
Tosa Health Center, 3<sup>rd</sup> Floor  
8701 Watertown Plank Rd.  
Milwaukee, WI 53226

e-mail: [HealthPsychology@mcw.edu](mailto:HealthPsychology@mcw.edu)

website: [www.mcw.edu/psychologyresidency](http://www.mcw.edu/psychologyresidency)

A select group of applicants will be invited to interview in person. Notification of interview status will be given no later than November 27. Interviews will be scheduled with the Health Psychology Residency Educational Coordinator.

## Froedtert & the Medical College of Wisconsin

Froedtert & the Medical College of Wisconsin regional health network is a partnership between Froedtert Health and the Medical College of Wisconsin. The health network has 27 psychologists across a range of primary and specialty care locations in southeastern Wisconsin. The vision of Froedtert & the Medical College of Wisconsin is to be the premier regional health system through academic-community partnership and aligned health care across the region. The mission of F&MCW is to advance the health of communities through exceptional care that is enhanced by innovation and discovery.

Psychologists are embedded across a range of academic departments and clinical programs at F&MCW. Psychologists are on faculty in departments including psychiatry, neurology, trauma and critical care, anesthesiology, obstetrics and gynecology, transplant surgery, plastic surgery, family and community medicine, physical medicine & rehabilitation, and community-based mental health. Additionally,

psychiatry faculty are embedded in medical specialty practices including palliative medicine, bone marrow transplant, general psycho-oncology, and bariatric surgery. Faculty psychologists provide psychological assessment, empirically validated treatments, psychotherapy, consultation, teaching, and research across clinical lines and the institution.

Froedtert and the Medical College of Wisconsin have had an educational mission for over a century, starting in 1893 when medical student training began at the Wisconsin College of Physicians and Surgeons, later named Milwaukee Medical College, then Marquette University Department of Medicine/Milwaukee Medical College, and finally developing into the Medical College of Wisconsin in 1970. Through the iterations and years, the Medical College of Wisconsin has developed a range of medical and scientific training programs. The Medical College of Wisconsin has partnered with a premier health system and our flagship hospital, Froedtert Health and Froedtert Hospital, respectively, in order to provide both general medical, biomedical, and other associated medical training programs at a basic science and clinical level. Froedtert and the Medical College of Wisconsin are constantly evolving as they transform in a fully rounded health sciences university and integrated health system. Please refer to the following link for a full history of MCW (<http://www.mcw.edu/aboutMCW/HistoryofMCW.htm>).

Psychology Training at Froedtert and the Medical College of Wisconsin includes training across departments and service lines. Within the health psychology residency, there will be a Primary Care Post-doctoral Fellow and two practicum students working alongside the psychology residents. In addition, Froedtert and the Medical College of Wisconsin has a health psychology clerkship (practicum) that is housed in Trauma and Critical Care, providing clinical and counseling doctoral students with a range of health psychology experiences. Post-doctoral fellows are also integrated across programs including trauma and critical care. In addition to health psychology, Froedtert and the Medical College of Wisconsin, Department of Neurology, is the home to an APA-accredited neuropsychology post-doctoral fellowship. Although not all psychology programs are included under the same training umbrella, F&MCW has an established history and program of psychology training.

## Training Model and Program Philosophy

The health psychology residency program operates on a scientist-practitioner model with the goal of preparing clinical and counseling health psychologists for entry-level health service psychology practice. The psychology resident is conceptualized as an emerging psychologist who will be working under the supervision of a faculty psychologist as an integral member of the medical team, analogous to a medical resident. Over the course of the internship year, experiences will increase in responsibility and the psychology resident will work more independently. Health psychology residents must demonstrate competence for entry-level psychology practice including: research, ethical and legal standards, individual and cultural diversity, professional values, attitudes, and behaviors, communication and interpersonal skills, assessment, intervention, supervision, consultation, and interprofessional/interdisciplinary skills. The program is experiential in nature, but includes a Scholarly Project, which is a domain-specific, clinically-based research project, program development project, or research-based presentation. This project seeks to ensure that interns have the ability to train broadly

as health psychologists, addressing clinical questions and concerns with empirical methods congruent with the scientist-practitioner model.

Clinical supervision will be the core training modality used, with the residents having the opportunity to directly observe and receive feedback from experienced health psychologists, engage in direct one-on-one teaching that is bi-directional and conversational in nature, and receive direct feedback about written and psychotherapeutic work from an experienced practicing academic health psychologist. Residents will have training on providing supervision through didactic seminar training on supervision and acting as a clinical supervisor to an advanced practicum student in the Behavioral Medicine and Primary Care (BMPC) clinic.

In line with the philosophy of training scientist-practitioner health psychologists, residents will also integrate academic research into clinical practice, through use of empirically validated treatment modalities, integration of psychological science into clinical practice, and engagement in clinically-based research and process improvement. Cultural diversity, broadly defined, is also a core philosophical pillar and goal of the health psychology residency. Understanding a patient from his/her cultural background and context, is essential. Multicultural awareness will be further developed and honed through assessment, case conceptualization and tailoring of health psychology interventions. Multicultural competence is important given the diversity of our Milwaukee patient population along multiple rays of diversity (e.g., racial/ethnic background, SES, sexual orientation, gender identity, religion, rurality, etc).

In addition to experiential training in assessment, intervention, and supervision, residents will engage in a health psychology didactic educational series. Residents will have cross-professional training, attending didactics with a range of other health discipline trainees including medical residents (psychiatrists and other specialties) and medical fellows in multidisciplinary monthly didactics.

## Program Aims and Competencies

### *Aims*

The Health Psychology Residency (Internship) program has the following program aims:

- Aim 1. The Health Psychology Residency (Internship) program aims to train entry level health service psychologists who will be well prepared to pursue a health psychology post-doctoral fellowship and eventually a career in a hospital, healthcare setting, or academic medical center.
- Aim 2. The Health Psychology Residency (Internship) program aims to train entry level psychologists in a scientist-practitioner model, with intent to produce health psychologists who integrate science into practice across roles as a psychologist.
- Aim 3. The Health Psychology Residency (Internship) program aims to train entry level psychologists to be integral members of a multidisciplinary health care team.

### *Competencies*

Last Updated: 10/4/2019

The program seeks to train interns in the Profession-Wide Competencies determined by the APA Commission on Accreditation (CoA) for practice in health service psychology.

<b>(i) Research</b>
Demonstrates the substantially independent ability to critically evaluate and disseminate research or other scholarly activities (e.g., case conference, presentation, publications) at the local (including the host institution), regional, or national level.
Utilize the empirical literature to conceptualize patient behavior and clinical questions including cultural considerations and exceptions.
Utilize the empirical literature to determine and provide the most appropriate and empirically validated treatment for a patient and/or patient population.
<b>(ii) Ethical and legal standards</b>
Be knowledgeable of and act in accordance with each of the following:
1. the current version of the APA Ethical Principles of Psychologists and Code of Conduct;
2. relevant laws, regulations, rules, and policies governing health service psychology at the organizational, local, state, regional, and federal levels; and
3. relevant professional standards and guidelines.
<b>(iii) Individual and cultural diversity</b>
An understanding of how their own personal/cultural history, attitudes, and biases may affect how they understand and interact with people different from themselves.
Knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in all professional activities including research, training, supervision/consultation, and service.
The ability to integrate awareness and knowledge of individual and cultural differences in the conduct of professional roles (e.g., research, services, and other professional activities). This includes the ability to apply a framework for working effectively with areas of individual and cultural diversity not previously encountered over the course of their careers. Also included is the ability to work effectively with individuals whose group membership, demographic characteristics, or worldviews create conflict with their own.
Demonstrate the ability to independently apply their knowledge and approach in working effectively with the range of diverse individuals and groups encountered during internship.
Appropriately and assertively addresses cultural issues pertaining to patients with other members on a multidisciplinary team.
<b>(iv) Professional values, attitudes, and behaviors</b>

Behave in ways that reflect the values and attitudes of psychology, including integrity, deportment, professional identity, accountability, lifelong learning, and concern for the welfare of others.

Engage in self-reflection regarding one's personal and professional functioning; engage in activities to maintain and improve performance, well-being, and professional effectiveness.

Actively seek and demonstrate openness and responsiveness to feedback and supervision.

Respond professionally in increasingly complex situations with a greater degree of independence as they progress across levels of training.

Demonstrates awareness of the roles of other disciplines on a multidisciplinary team and acts professionally, demonstrating respect for other disciplines and appropriate boundaries of practice.

### **(v) Communications and interpersonal skills**

Develop and maintain effective relationships with a wide range of individuals, including colleagues, communities, organizations, supervisors, supervisees, and those receiving professional services.

Produce and comprehend oral, nonverbal, and written communications that are informative and well-integrated; demonstrate a thorough grasp of professional language and concepts.

Demonstrate effective interpersonal skills and the ability to manage difficult communication well.

Communicates assertively, professionally, and respectfully with other professionals on a multidisciplinary team making appropriate professional contributions to a patient's care.

### **(vi) Assessment**

Select and apply assessment methods that draw from the best available empirical literature and that reflect the science of measurement and psychometrics; collect relevant data using multiple sources and methods appropriate to the identified goals and questions of the assessment as well as relevant diversity characteristics of the service recipient.

Interpret assessment results, following current research and professional standards and guidelines, to inform case conceptualization, classification, and recommendations, while guarding against decision-making biases, distinguishing the aspects of assessment that are subjective from those that are objective.

Communicate orally and in written documents the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences.

Assess environmental factors that facilitate or inhibit patient knowledge, values, attitudes, and/or behaviors affecting health functioning and health care utilization.

Assess biopsychosocial factors affecting adherence to recommendations for medical and psychological care.

Assess the biopsychosocial impact of medical procedures.

Demonstrates knowledge of DSM-V diagnostic criteria and able to appropriately diagnose psychological disorder in medical complicated patients.

Demonstrates ability to evaluate, manage, and document patient risk related to suicidality, homicidality, or other safety issues and able to collaborate with appropriate hospital and clinic systems to mitigate risk.

### **(vii) Intervention**

Establish and maintain effective relationships with the recipients of psychological services.

Develop evidence-based intervention plans specific to the service delivery goals.

Implement interventions informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables.

Demonstrate the ability to apply the relevant research literature to clinical decision making.

Evaluate intervention effectiveness, and adapt intervention goals and methods consistent with ongoing evaluation.

Be able to identify and utilize appropriate empirically supported treatment interventions targeted toward specific populations for adjustment, adherence, health promotion, and health prevention.

Demonstrates ability to handle crisis situations with patients.

### **(viii) Supervision**

Apply supervision knowledge in direct or simulated practice with psychology trainees, or other health professionals. Examples of direct or simulated practice examples of supervision include, but are not limited to, role-played supervision with others, and peer supervision with other trainees.

Effectively models and navigates boundary issues in supervision with practicum student.

Demonstrates and integrates an appreciation for individual and cultural diversity.

Provides constructive feedback and guidance.

Understands and effectively deals with resistance and other challenges.

Trains students to assert their professional autonomy and identity. Encourage behavior that respects professional autonomy of other professions.

### **(ix) Consultation and interprofessional/interdisciplinary skills**

Demonstrate knowledge and respect for the roles and perspectives of other professions.

Apply this knowledge in direct or simulated consultation with individuals and their families, other health care professionals, interprofessional groups, or systems related to health and behavior.

Demonstrates an ability to be assertive, yet interpersonally effective, respectful, and appropriate on a multidisciplinary team.

Demonstrate awareness of and appreciation for the unique knowledge base, skill sets, roles in the health care team, and limitations and boundaries of professionals that provide services to populations being served.

Demonstrates skills in being able to communicate about and create mutual understanding about problems among individuals from diverse disciplines.

## Program Structure

All residents will participate in each specialty health psychology rotation (e.g., Cancer Psychology, Rehabilitation Psychology, Transplant Psychology, and Trauma and Critical Care Psychology,) for three months of the year. Concurrently, residents will see patients three half-days per week in the Behavioral Medicine & Primary Care (BMPC) clinic in the Department of Psychiatry. This is a clinic that is located in the Department of Psychiatry and Behavioral Medicine, but specializes in targeted health psychology interventions with patients who are (a) referred from a specialty clinic for health psychology services or (b) referred from primary care for management of health, behavioral, and psychological health concerns. Scheduled time is also allocated for research and program development (one half-day per week) and didactics and group supervision (one half-day per week). At least 25% of the resident's time will be spent in direct 1:1 patient care. Please see the schedule template below.

<i>Model Rotation Schedule for Psychology Resident</i>				
<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>
Major Rotation	Major Rotation	**Scholarly Project	BMPC Psychology Clinic Group supervision	Didactics BMPC Psychology Clinic
Major Rotation	Major Rotation	Major Rotation	BMPC Psychology Clinic	BMPC Psychology Clinic

**\*\* Note.** One time per month, psychology residents will attend Psychiatry Grand Rounds and the Multidisciplinary Psychodynamic Health Case Conference. Seminar begins in October. Series includes eight conferences total.

During the Major Rotation, residents will be exposed to clinical practice in the areas of assessment, intervention, and consultation. They will also be exposed to multidisciplinary team meetings and other interdisciplinary and content specific educational experiences.

Each resident will have a broad range of supervision experiences including working with each of the major rotation supervisors (generally, the resident will work with more than one supervisor for each major rotation) and the supervisors in the BMPC Clinic. All residents will also have group supervision with the training director on a weekly basis. Residents will receive a total of at least 4 hours of individual supervision per week, with at least two of those hours being individual supervision. On a typical week, residents will have 2 hours of individual supervision with a faculty supervisor in their major

rotation, 1.5 hours of individual supervision with their faculty supervisor in the BMPC continuity clinic, and 1 hour of group supervision with the Training Director. The nature of the supervision will be direct observation, case review/discussion, and at times co-treatment with a supervisor (e.g., seeing patients together in hospital; group work). Supervision at each rotation will begin with direct observation and co-treatment with a supervisor and will evolve into case review and discussion as the resident demonstrates greater levels of development across the aforementioned competencies. A resident can expect to have greater levels of autonomy as their training experiences advance. Additionally, the residents will have an opportunity to provide supervision to practicum students in the BMPC clinic during the training year.

## Training Rotations and Experiences

### Major Rotations

#### *Cancer Psychology*

**Heidi F. Christianson, Ph.D. & Lyndsey Wallace, Psy.D.**

Cancer psychology is the practice of health psychology as it applies to those being treated with cancer and addresses issues of adjustment to illness, coping with chronic illness, adherence and behavioral management, and end-of-life care. Cancer psychologists work with patients and their family members to help cope with cancer as well as the impacts it has on functioning, emotional distress, mental health, and family relationships. Cancer psychologists work in both the inpatient and outpatient setting and as part of a multidisciplinary team.

#### *Direct Services*

Cancer psychology has areas of focus on coping and adjustment, management of psychological distress and disorder, and family functioning at times of illness.

- Assessment – Pre-bone marrow transplant evaluation, biopsychosocial intake interviews (inpatient and outpatient) with medically ill patients, assessment for behavioral management
- Behavior Therapy – Behavioral activation, adherence and compliance management
- Health and Behavioral Intervention – Coping skills training, sleep hygiene, psychoeducation
- Pain management – non-pharmacological treatment for acute and chronic pain
- Inpatient/Outpatient Psychotherapy – Psychological disorder (depression, anxiety, PTSD), adjustment to illness (newly diagnosed patients, chronically ill patients, fostering Post Traumatic Growth, patients and families at end-of-life)
- Stress management – Mindfulness, relaxation strategies, cognitive restructuring

#### *Integrated Behavioral Health*

Cancer psychologists work as part of multidisciplinary teams, collaborating with physicians, advanced practice providers (APPs), nurses, social workers, medical residents, and medical fellows. The psychology resident will have opportunities to collaborate with other disciplines in the following ways:

- Providing training on psychological issues with cancer patients to nursing staff
- Attending weekly bone marrow transplant (BMT) multidisciplinary rounds
- Attending inpatient hematology multidisciplinary staffing meetings

- Providing consultation and behavioral management to nursing and medical staff for problematic patient behavior
- Collaborating with inpatient treatment teams (primary APPs, resident physicians, and fellow physicians) on psychological contributions to patient's care
- Promoting effective patient-provider relationships

### *Trauma and Critical Care Psychology*

**Terri deRoos-Cassini, Ph.D. & Josh Hunt, Ph.D.**

The trauma center at Froedtert Hospital/Medical College of Wisconsin is a Level 1 adult trauma center accredited by the American College of Surgeon Committee on Trauma. This trauma center serves 3,000 trauma activations per year, with just over 2,000 of those patients being admitted to the hospital. This unique program includes a psychologist focused on the psychological and behavioral health needs of the trauma population and patients receiving emergent surgery. Psychological care is provided as a part of a multidisciplinary team of advanced practice providers, nurses, surgeons, emergency medicine physicians, case managers, social workers, and physical and occupational therapists.

Health psychology residents function as part of an interdisciplinary rehabilitation team to provide integrated behavioral health services, working with patients, families, and other professionals. Residents will assist with supervising practicum trainees and work with the trauma & health psychology postdoctoral fellow.

#### *Direct Services*

Health psychology residents function as part of an interdisciplinary rehabilitation team to provide integrated behavioral health services, working with patients, families, and other professionals. Residents will assist with supervising practicum trainees and work with the trauma & health psychology postdoctoral fellow.

- Assessment – clinical interviews and cognitive assessments
- Behavior Therapy – behavioral activation, adherence and compliance management
- Health and Behavioral Intervention – psychoeducation and coping skills training, early prolonged exposure therapy for high PTSD risk
- Interpersonal Intervention – family dynamics, discussion with family regarding medical decision making
- Pain Management – non-pharmacological treatment for acute and chronic pain
- Inpatient Psychotherapy – adjustment to illness, anxiety, depression, PTSD, substance use
- Stress Management – relaxation training and mindfulness based stress reduction

#### *Integrated Behavioral Health*

Trauma and critical care psychologists work as a part of a multidisciplinary team, collaborating with advanced practice providers, physicians, nurses, social workers, medical residents and fellows, and physical and occupational therapists. Psychology residents collaborate with other rehabilitation disciplines in the following ways:

- Provide training regarding psychological response to trauma and critical illness to other staff members and trainees
- Attend daily clinical care rounds with other members of the multidisciplinary team
- Consult with staff regarding patients' psychological functioning
- Facilitate effective communication between patients and providers
- Help differentiate between normative and maladaptive adjustment reactions
- Provide behavior management interventions to help staff effectively manage challenging behaviors while providing care
- Facilitate resiliency by encouraging non-avoidance of trauma related triggers and educate staff regarding behaviors that will facilitate better psychological outcomes

## *Rehabilitation Psychology*

**Rebecca Manson, Ph.D.**

Rehabilitation Psychology promotes recovery, health, and quality of life with individuals experiencing significant injury, illness, and disability. Rehabilitation psychologists work to maximize independence and choice, functional abilities, and social role participation across the lifespan. We also work with other professionals to enhance their ability to provide even more effective care that incorporates the patient's behavioral and mental health needs.

Health psychology residents function as part of an interdisciplinary rehabilitation team to provide integrated behavioral health services, working with patients, families, and other professionals. Froedtert Health operates four inpatient rehabilitation programs: General Rehabilitation, Spinal Cord Injury, Stroke, and Brain Injury. Each is fully accredited by the Commission on the Accreditation of Rehabilitation Facilities (CARF).

### *Direct Services*

Given the emphasis of rehabilitation on post-discharge success, health psychology interventions maximize rehabilitation potential and reduce barriers to successful adjustment.

- Assessment – standardized screenings and clinical interviews
- Behavior Therapy – behavioral activation, compliance skills, communications skills
- Crisis Intervention – family conflict, medical emergency, patient aggression, self-harm
- Health Behavior Intervention – diet & exercise, sleep, health care system skills
- Pain Management – non-pharmacological treatment for acute and chronic pain
- Inpatient Psychotherapy – anxiety, depression, psychological trauma, substance use
- Stress Management – locus of control, relaxation methods, time management

Residents play a significant role coordinating and promoting peer mentoring programs in the spinal cord injury and general rehabilitation programs. They also take post-discharge outpatient psychotherapy cases on a limited basis.

### *Integrated Behavioral Health*

Psychological services in rehabilitation are provided within an integrated behavioral health (IBH) model. Rehabilitation psychologists and residents function as an integrated part of an interdisciplinary team which includes Physical Medicine and Rehabilitation (PM&R) physicians, nursing, physical therapists, occupational therapists, speech and language pathologists, recreational therapists, vocational counselors, social workers, case managers, dietitians, and nurses. Psychology residents collaborate with other rehabilitation disciplines in the following ways:

- Co-treat with other disciplines to more effectively address mental or behavioral health concerns
- Consult with staff regarding patients' psychological functioning
- Participate in weekly team conferences
- Attend daily rounds with PM&R physicians and residents
- Facilitate effective communication between patients and providers
- Provide education and clinical training to MCW students, residents, fellows, therapists, and nursing
- Offer guidance for staff to most effectively work with patients' support systems
- Build staff knowledge and skills regarding mental illness
- Encourage teamwork among the staff
- Collaborate with staff to promote community-building among patients in rehabilitation unit
- Help differentiate between normative and maladaptive adjustment reactions
- Promote effective patient-provider relationships
- Provide behavior management interventions to help staff effectively manage challenging behaviors while providing care

## *Transplant Psychology*

**Stephanie C. Zanowski, Ph.D. & Jenessa S. Price, Ph.D.**

The Transplant Mental Health Program consists of two Clinical Psychologists, three Social Workers, and one Alcohol and Other Drug Abuse (AODA) Counselor. Transplant Psychologists assess candidacy from a biopsychosocial perspective for patients in evaluation for solid organ transplant and provide both initial as well as ongoing psychosocial recommendations to patients and team members. In addition, Transplant Psychologists provide supportive therapy and empirically-based interventions to patients pre- and post-transplant on both an inpatient and outpatient basis; services include coping with chronic illness, adjusting to medical illness, mood management, adherence, and drug and alcohol relapse prevention.

### *Direct Services*

Transplant Psychology has areas of focus on assessment of psychosocial risk factors, psychological disorders, and cognition in addition to implementation of interventions addressing coping and adjustment, management of psychological distress and disorder, management of adherence, and addiction:

- Psychosocial/Psychological Assessment – Pre-transplant (kidney, liver, LVAD/heart, lung) psychosocial evaluation for transplant (typically outpatient); urgent inpatient psychosocial evaluation for transplant; general psychological evaluations (outpatient)
- Neuropsychological assessment – Assessment of cognitive strengths and limitations utilizing abbreviated assessment batteries (outpatient)
- Inpatient/Outpatient Psychotherapy – Psychological disorder (depression, anxiety, PTSD, bipolar disorder); adjustment to acute and chronic illness; CBT and non-pharmacological treatment for pain
- Dialectical Behavior Therapy Skills Training – Mindfulness; emotion regulation; distress tolerance; acceptance; interpersonal effectiveness
- Health and Behavioral Intervention – Adherence management; implementation of cognitive compensatory strategies; coping skills/relaxation training; sleep hygiene; psychoeducation
- Motivational Interviewing – Adherence management; drug and alcohol misuse/use disorders
- Relapse Prevention – Individual and group treatment for drug and alcohol use disorders

### *Integrated Behavioral Health*

Transplant Psychologists serve as integral members of multidisciplinary treatment teams, composed of other members of Transplant Mental Health (Social Workers, AODA Counselor) as well as surgeons, specialty physicians, advanced practice providers (APPs), nurses, and medical residents and fellows. The psychology resident will have opportunities to collaborate with other disciplines in the following ways:

- Provide initial and ongoing recommendations for candidacy to patient coordinators and other treatment providers
- Consultation with members of the Mental Health team, including Social Workers and the AODA Coordinator
- Attend weekly Multidisciplinary Selection Committee meetings for kidney, liver, LVAD/heart and/or lung
- Provide inpatient consultation and ongoing supportive therapy to patients and coordinate care with medical staff (APPs, resident physicians, and fellow physicians) during the patient's stay
- Promote effective patient-provider relationships
- Provide education on the biopsychosocial perspective and training to other medical professionals, including nurses and medical residents

## Continuity Clinic

### *Behavioral Medicine and Primary Care Psychology (BMPC) Clinic*

**Sadie Larsen, Ph.D. & Lawrence Miller, Psy.D.**

The Behavioral Medicine and Primary Psychology Care (BMPC) Clinic is an assessment and treatment clinic focusing on primary care and specialty health psychology. This clinic serves the behavioral health needs of patients being treated in primary care as well as patients from specialty medical clinics without direct access to health psychology services. The BMPC Clinic is housed in the Department of Psychiatry and Behavioral Medicine and is an outpatient, ambulatory clinic.

Patients referred to the BMPC clinic have a variety of presenting problems including adjusting to physical health conditions and/or treatments, mental health concerns (e.g., depression, anxiety), or engaging in healthier habits (e.g., smoking cessation, improved sleep, increasing physical activity). Psychology residents will perform empirically validated health psychology assessments and brief interventions including but not limited to Problem Solving Therapy, Cognitive Behavioral Therapy, Mindfulness Based Stress Reduction, and Acceptance and Commitment Therapy. Psychology residents will also have the opportunity to carry one or more cases on a long-term basis where the presenting concern is managing chronic illness.

#### *Direct Services*

The goals of this clinic include optimizing physical health through management of psychological barriers, coping with chronic illness, symptom management, and adjustment to illness.

- Assessment – clinical biopsychosocial interviews, health psychology assessment and brief testing
- Behavior Therapy – behavioral activation, compliance skills, communications skills, optimizing coping
- Health Behavior Intervention – diet, exercise, sleep, medication adherence, health care system skills
- Pain Management – non-pharmacological treatment for acute and chronic pain in medically complex patients
- Brief Psychotherapy for psychopathology – anxiety, depression, health-related traumatic responses, substance use, management of personality disorders in medically complicated patient
- Stress Management – locus of control, relaxation methods, time management, mindfulness

Psychology residents will maintain an ongoing BMPC outpatient caseload throughout the entire training year. The BMPC clinic operates on Thursdays and Fridays.

#### *Integrated Behavioral Health*

Psychology residents will collaborate with multiple health professionals through medical record, phone consultation, and collaborative practice. Although this clinic is not physically co-located, the system in which the clinic is located is connected through a shared medical record system. Psychology resident will become familiar with coordinating care across multiple treating providers in multiple locations:

- Co-treat with other disciplines to more effectively address mental or behavioral health concerns and communicate via medical record and other forms of technology
- Consult with staff regarding patients' psychological functioning via electronic medical record
- Be available for behavioral health consultation from providers in the health enterprise as requested
- Consult on behavioral management interventions via medical record and/or phone to help medical providers effectively manage challenging behaviors while providing care

## Requirements for Completion

Residents' skills in the core competencies are evaluated by the supervisor in each of the major rotations as well as in the BMPC clinic. Evaluations are done quarterly and residents' progress toward competency attainment is discussed at monthly by the core training faculty. The Training Director prepares a Summative Evaluation at the mid-year and end-of-year time points that is composed of the aggregate supervisor ratings and comments. To successfully complete the residency, the resident must demonstrate competence for entry-level practice as demonstrated by a rating reflecting competent for entry level practice in all core competency areas: Assessment, Intervention, Consultation, Research, Supervision, Ethical and Legal Standards, Individual Differences and Cultural Diversity, Professional Values, Attitudes, Behaviors, Communication and Interpersonal Skills. Please see specific completion criteria below:

#### Requirements for Successful Completion of the Residency Program

- a. Complete one year of full time clinical work, averaging 40-45 hours per week. Resident vacation, sick time, and dissertation release time that is within the allowed limited outlined in the Stipend and Benefit Policy does not count against time required for successful completion.
- b. Complete at least 500 hours of direct clinical work summed across the five clinical rotations
- c. Complete at least 200 hours of clinical supervision
- d. Complete a Scholarly Project approved by a faculty mentor and the Training Director
- e. Completion of at least 96/100 didactic seminars from the Didactics Seminar Series, with the exception of allowed time out of the office.
- f. Attend at least 95% of Group Supervision, Group Case Series, and Required Grand Rounds meetings, with the exception of allowed time out of the office.
- g. Complete all required documentation, including clinical (i.e., reports, intake notes, progress notes, etc.) and administrative (i.e., data monitoring, evaluation procedures) documentation in a timely manner, which includes seeking appropriate supervisor sign off on documentation in a timely manner.
- h. Attain supervisor evaluation forms demonstrating competence across all APA defined competency areas as demonstrated by:
  - i. Residents are expected to achieve on track or above ratings of competence on each element (2-3 by first quarter; 3-4 by mid-year; 4-5 by third quarter; 6 by end of year) at each evaluation point and **entry-level competency** by the conclusion of the residency year.
  - ii. Should a resident demonstrate below expected competence appropriate to his/her developmentally expected level, a Development Plan as outlined in the Remediation Process Policy will be prompted implemented.
  - iii. Successful completion of any Development Plan should one be implemented.
- i. Complete all programmatic evaluation forms in a timely manner

#### Facility and Training Resources

Residents will all have access to a shared clinical office at the BMPC clinic during the residency year. Each resident will also have a dedicated work space at Froedtert Hospital near the clinical rotation they are working on. In addition, residents will be assigned a work Chromebook, pager, and lab coat. All residents will have access to the MCW library system, which includes access to online databases such as

Medline. Residents also have access to all the many libraries across the system. Residents will have access to multidisciplinary training experiences including but not limited to Grand Rounds across multiple specialty areas and other forms of specific health-related didactic and educational training.

## Administrative Policies and Procedures

Residents are covered under the Equal Employment Opportunity and Affirmative Action programs. Policies and procedures for addressing performance problems and grievances are contained in the Health Psychology Residency Policies and Procedures Manual. Each resident receives a copy of the Health Psychology Residency Policies and Procedures Manual at orientation. A copy of the Health Psychology Residency Policies and Procedures Manual is available by request from the Program Educational Coordinator.

## Core Health Psychology Training Faculty

### ***Director of Clinical Training:***



#### **Heidi F. Christianson, Ph.D.**

Associate Professor of Psychiatry and Behavioral Medicine & Medicine,  
Hematology and Oncology  
Training Director, Health Psychology Residency and Clinical Health  
Psychology Fellowship  
Psychologist, Bone Marrow Transplant Program

#### **Training:**

B.S. Psychology, University of Wisconsin- Madison (Honors)  
M.S. Counseling, University of Wisconsin- Madison  
Ph.D. Counseling Psychology, University of Wisconsin- Milwaukee  
Residency: Zablocki VA Medical Center, Milwaukee, Wisconsin  
Fellowship: Health Psychology, Medical College of Wisconsin

## ***Associate Director of Clinical Training:***

### **Sadie Larsen, Ph.D.**

Associate Professor of Psychiatry and Behavioral Medicine  
Associate Training Director, Health Psychology Residency and Clinical  
Health Psychology Fellowship  
Co-Director, Behavioral Medicine and Primary Care (BMPC) Clinic

### **Training:**

B.A., Psychology & English, Lawrence University (Honors)  
M.A., Clinical/community Psychology, University of Illinois, Urbana-  
Champaign  
Ph.D., Clinical/community Psychology, University of Illinois, Urbana-  
Champaign  
Residency: Department of Psychiatry, University of Wisconsin  
Fellowship: Posttraumatic Stress Disorders, VA Boston Healthcare  
System



## ***Training Faculty:***

### **Terri A. deRoos-Cassini, PhD**

Associate Professor of Surgery, Psychiatry & Behavioral Medicine,  
& Institute for Health and Society  
Director of Research, Division of Trauma & Critical Care  
Director of Postdoctoral Trauma & Health Psychology Fellowship,  
Division of Trauma & Critical Care

### **Training:**

B.S. Zoology & Physiology, University of Wyoming, Laramie,  
Wyoming  
M.S. Clinical Psychology, Marquette University  
Ph.D. Clinical Psychology, Marquette University  
Residency: Clement J. Zablocki VA Medical Center, Zablocki VA  
Medical Center, Milwaukee, Wisconsin  
Fellowship: Trauma & Health Psychology, Medical College of  
Wisconsin Affiliated Hospitals, Milwaukee





**Josh Hunt, PhD**

Assistant Professor of Surgery

Division of Trauma/Critical Care & Acute Care Surgery

**Training:**

B.A., Psychology, Southern Illinois University - Carbondale, IL

M.A., Community Counseling, Concordia University of Chicago - River Forest, IL

Ph.D., Counseling Psychology, University of Wisconsin - Milwaukee, WI

Residency: Clement J. Zablocki VA Medical Center - Milwaukee, WI

Fellowship: Trauma & Health Psychology, Medical College of Wisconsin - Milwaukee, WI

**Rebecca Manson, Ph.D.**

Assistant Clinical Professor of Physical Medicine and Rehabilitation  
Neuro Rehabilitation Services, Froedtert Hospital

**Training:**

B.A. University of Notre Dame, Notre Dame, IN

M.A. Counseling, Marquette University

Ph.D. Counseling Psychology, University of Notre Dame, IN

Residency: Iowa State University Student Counseling Center, Ames, IA

Fellowship: Roosevelt University Counseling Center, Chicago, IL





**Lawrence Miller, PsyD**

Assistant Professor of Psychiatry and Behavioral Medicine  
Co-Director, Behavioral Medicine Primary Care Clinic  
Psychologist, Behavioral Health Center - Tosa Health Center

**Training:**

B.S., Psychology, Illinois State University, Normal, IL  
M.A., Psychology, Central Michigan University, Mount Pleasant, MI

Psy.D., Clinical Psychology, Illinois School of Professional Psychology/Chicago at Argosy University, Chicago, IL

Residency: Clinical Health Psychology, Loyola University Medical Center, Maywood, IL

Fellowship: Psychosocial Oncology, Loyola University Medical Center, Maywood, IL

**Jenessa Price, Ph.D.**

Assistant Professor of Surgery  
Transplant Surgery Psychologist

**Training:**

B.S. Psychology, Butler University

Ph.D. Clinical Psychology/Clinical Neuropsychology, University of Cincinnati, OH

Residency: Boston Consortium in Clinical Psychology, Clinical Neuropsychology Track

Fellowship: McLean Hospital- Harvard Medical School: T32 Training in Drug Abuse and Neuroimaging





**Lyndsey Wallace, Psy.D.**

Assistant Professor of Psychiatry and Behavioral Medicine  
Psychologist, Psycho-Oncology Program  
Psychologist, Bariatric Program

**Training:**

B.S., Psychology, University of Iowa, Iowa City, IA  
M.A., Clinical Psychology, Illinois School of Professional Psychology,  
Chicago, IL  
Psy.D, Clinical Psychology, Illinois School of Professional Psychology,  
Chicago, IL  
Residency: Mann-Grandstaff VA Medical Center, Spokane, WA  
Fellowship: Palliative Care, Clement J. Zablocki VA Medical Center,  
Milwaukee, WI

**Stephanie Zanowski, Ph.D.**

Assistant Professor of Surgery  
Director of Transplantation Mental Health

**Training:**

B.A. Psychology and Spanish, Gustavus Adolphus College, St. Peter,  
Minnesota  
M.A. Clinical Psychology, Cardinal Stritch University, Milwaukee,  
Wisconsin  
Ph.D. Clinical Psychology, Marquette University, Milwaukee,  
Wisconsin  
Residency: Medical College of Wisconsin, Department of Plastic  
Surgery  
Fellowship: Medical College of Wisconsin, Department of Plastic  
Surgery



## Information about Life in Milwaukee

Please visit our website: (<http://www.mcw.edu/Psychiatry-Behavioral-Medicine/Health-Psychology-Residency-Doctoral-Internship-Program/Our-City.htm>) with information about Milwaukee including a general guide to the city, housing information, educational information, and recreation.