INTRODUCTION
University Hospital and Clinics (UWHC) offers four (4) one-year post-doctoral fellowships in clinical Health Psychology. Three of these positions are in the ADULT track and one of these positions are in the PEDIATRIC track. The program involves a twelve-month, full-time (2000 hours) experience, providing the necessary post-doctoral hours required for licensure to practice psychology independently in the state of Wisconsin. The program is designed to provide didactic and clinical training in preparation for professional work in a variety of medical settings, including hospitals and medical clinics, and post-secondary educational institutions. The program is based upon a practitioner-scholar model offering hands-on experience complemented by knowledge of relevant psychological science. Our intent is to prepare fellows to move competently across a variety of health psychology settings and to use a wide range of skills. Graduates of our program are competitively prepared to work in a number of settings, including academic medical centers, private hospitals, independent psychology practices with medical specialization, academic psychology departments, and outpatient medical clinics.

Based in a nationally-recognized academic medical center, the fellowship program involves training with a wide variety of patients, problems, and treatment teams. Our philosophy is to provide a broad array of experiences across the medical center rather than specialized training in one or two areas. 80% of each fellow’s time is spent at the main hospitals providing services to medical patients. In this capacity, fellows work across a variety of inpatient medical services and provide assessment and treatment to patients with acute and chronic needs and their families. Fellows develop mastery working with a range of medical disorders and referral questions. Also included in this 80% time is the opportunity to perform presurgical evaluations for the organ transplant services (adult track) and the PATH clinic (pediatric track). Fellows will serve as the psychologist lead on a number of multidisciplinary treatment teams and will often attend weekly rounds.

Each of the fellows will then spend the other 20% time on a distinct medical specialty outpatient rotation. The nature of this rotation will depend upon the interests of the postdoctoral fellow as well as the recommendation of the training director and the availability of these sites from year to year. There is only one fellow per site. Available rotation sites currently include: The Carbone Cancer Clinic; The Deming Way Health Psychology Clinic; The Pediatric Specialty Clinic, and the Outpatient Heart and Lung Transplant Clinic. There may be other specialty clinics also available for training in the 2022-23 training year. In these clinics, fellows perform assessment and interventions with outpatients under the supervision of an ambulatory clinical psychology supervisor.
Throughout their experiences and the training year, fellows are required to perform consultation with multidisciplinary medical teams and often play a key role as the psychological consultant to these teams. Fellows also engage in program development, supervision of practicum students (when on site), and/or teaching of medical residents and other allied health providers during their training year.

The fellowship program is a member of APPIC and is administered by the Health Psychology faculty within the Department of Behavioral Health.

UW Health is the integrated health system of the University of Wisconsin-Madison and includes:

- UW Hospital and Clinics (UWHC)
- American Family Children’s Hospital (AFCH)
- The American Center (TAC)
- UW Rehabilitation Hospital (UWHC)
- Carbone Cancer Center (CCC)

Our expert staff is at the forefront of research, developing new treatments, and training the next generation of health care professionals. Fellows who are in the Adult track will see inpatients at UWHC. Fellows in the Pediatric track will see inpatients at AFCH. Both sites are physically connected.

University Hospital is a 505-bed regional referral center that ranks among the finest academic medical centers in the United States. Frequently cited in publications listing the nation’s best health care providers, the University of Wisconsin health care systems are recognized as national leaders in fields such as cancer treatment, pediatrics, ophthalmology, surgical specialties and organ transplantation. University Hospital has more than 1,356 active medical staff that annually provide health care to more than 30,000 inpatients from throughout Wisconsin and many other states and countries. There are six intensive care units (Trauma and Life Support, Pediatric, Cardiac, Cardiothoracic, Burn, Neurosurgery) with 99 total beds. University Hospital is home to a Level One adult trauma center, American College of Surgeonsverified Burn Center, one of the nation’s largest organ transplant programs, one of the nation’s first certified comprehensive stroke centers and the UW Carbone Cancer Center, one of 41 National Cancer Institute-designated comprehensive centers in the country. UW Health has 50 care locations that serve over 1,843,000 outpatient visits yearly.

American Family Children’s Hospital has been consistently ranked among the nations’ best children’s hospitals by U.S. News and World Report. AFCH is a level 1 Trauma Center for pediatric patients and is home to a Level IV Neonatal Intensive Care Unit (NICU). AFCH has over 260 UW Health doctors who specialize in caring for children, including pediatricians and surgeons who train in every field possible— including brain surgery, cancer, and cardiology. AFCH offers the most advanced medical care in a state of the art, family friendly facility.

LIVING IN MADISON
Located on an isthmus between two large lakes, Madison, the state capital of Wisconsin, is home to approximately 252,000 people, including 43,000 university students. Madison is conveniently located off interstate highways I-90 and I-94 which provides easy access to Milwaukee (70 miles), Chicago (120 miles) and Minneapolis-St. Paul (250 miles). Madison is frequently rated among the best places to live in the United States, offering a strong economy with plentiful jobs, outstanding health care, and a wide range of recreational and cultural activities.

DESCRIPTION OF FELLOWSHIP TRAINING

The post-doctoral positions, while incorporating a framework of standardized training and service, are also individualized and flexible, based upon the specific professional interests and needs of each trainee. Within the primary 80% of their time, fellows provide bedside clinical services to medical patients in the main hospitals and/or in the clinics. The Health Psychology service is typically consulted by medical staff to assist with differential diagnoses, coping, pain or anxiety management, grief counseling, noncompliance, failure to thrive, depression, family support, behavioral management, and the like. Fellows work with patients from a variety of services, including Trauma Surgery, Oncology, Neurology, Orthopedics, Cardiology, Plastic Surgery, Family Medicine, General Surgery, Medical Transplant, Rehabilitation, and Burn. In addition to a general consultation liaison model, fellows also have an opportunity to become more integrated in the following areas in the hospital where they can go on rounds or be part of regular team conferences: Burn service, Palliative Care service, Organ Transplant service, Acute Care for the Elderly service, Neurosurgery and Neurology, Vascular Surgery, Pediatric Hematology-Oncology, NICU, and the Pediatric Rehabilitation service.

As part of this 80% time, fellows in the adult track will also receive training in outpatient organ transplant recipient evaluations and live organ donor evaluations. Fellows in the Pediatric track will perform some Pediatric and Adolescent Transgender Health (PATH) evaluations.

Within the secondary rotation involving 20% time, fellows will train in outpatient specialty clinics providing assessment and intervention services throughout the training year.

Opportunities to provide peer mentoring to practicum students and interns may also be available depending upon the size of the practicum/intern class in any given year.

TRAINING METHODS

CLINICAL EXPERIENCE:

Hospital- Based Service
The training-based experience involves the provision of psychological services to a range of medical services across this tertiary care center and its clinics. Within the service, the bulk of a fellow’s time will be devoted to bedside assessment and intervention. Referrals are made with the expectation that we will provide timely recommendations and treat as appropriate. Patients at UWHC are aged 17-100+ and at AFCH, patients range in age from birth-17 years. Further, a wide range of patient diagnoses and referral questions are presented, including medical adherence, coping with injury/illness, pain and anxiety management, grief, acute stress reaction, adjustment to disability. Fellows develop appreciation for working in a fast-paced environment, in which the role of psychology is integral to patient care. Fellows provide psychological consultation to a variety of medical teams and learn to work collaboratively and efficiently with different medical staff (physicians, nurses, rehabilitation therapists, nutritionists, pharmacists, case managers, child life, and pastoral care providers).

**Additional Specialized Focus Areas within the Hospital-Based Service:**

**Adult Fellow Training:**

**Burn Service:**
UW Burn Service houses an 11 bed- acute care service for adult and pediatric burn patients. Specific skills developed include trauma screening, pain management, and helping with adaptation to loss and body image change. One of the postdoctoral fellows takes a psychology “lead” position on the Burn Team, attending weekly multidisciplinary rounds and assisting with patient coping.

**Palliative Care Service:**
The Health Psychology service provides consultation to the multidisciplinary palliative care treatment team, who works directly with inpatients at end-of-life or with symptom management needs. This includes providing consultation for ethical dilemmas and clinical decision-making that occurs when working with patients at end-of-life. Intervention with dying patients and their families is also a part of this experience. The training experience also includes didactics in palliative care.

**Organ Transplant Evaluation Service:**
The Health Psychology service provides pre-surgical evaluation for potential organ recipients on the cardiology, pulmonary, kidney, and liver transplant services. These include clinical interviews with potential recipients and their support persons and psychological testing. Fellows also provide presurgical evaluation to the living kidney donor and liver donor programs. Typically, fellows can expect to perform 2-3 evaluations per month.

**Acute Care for the Elderly (ACE) Service:**
Adult fellows can choose to provide consultation to this multidisciplinary treatment team focused on comprehensive treatment planning for geriatric patients. Consultation questions include decisional capacity assessment, safety evaluation, and dementia/delirium/depression work-up. Fellows attend morning rounds, work with patients and families, and provide consultation to treatment teams.
Neurology and Neurosurgery Service:
Fellows can choose to attend Neurology/Neurosurgery rounds and take a psychology lead on this multidisciplinary treatment team. Patients seen include those who have suffered stroke, undergone resection of brain tumors, or are being treated for seizure disorder. Patients diagnosed with conversion disorder can also be seen while a member of this treatment team.

Vascular Surgery:
Fellows can choose to attend Vascular Surgery rounds on a weekly basis, and tend to work with the patients who are undergoing planned amputation as a result of vascular disease. Fellows engage in walking rounds and also attend weekly case conferences on this service.

Other Experiences:
The general hospital setting is very receptive to any fellow who expresses interest in a certain area of training or population. In the past, adult fellows have chosen to gain additional specialized experience in Family Medicine and Hematology services.

Pediatric Fellow Training:

Hem/Onc Psychosocial Rounds:
Fellows will attend rounds for pediatric hem/onc patients who are often hospitalized for long periods of time. They also see patients and their families to assist with symptom management and ongoing support during hospitalization.

NICU:
Fellows can be actively involved in working with families of patients in the NICU. Fellows also can provide consultation to nursing staff as appropriate.

Rehabilitation Service:
Fellows see patients and families on the rehabilitation service to assist adjustment to disability. They work closely with rehabilitation therapists and the physiatrists on the Rehabilitation team. They assist with pain management, adjustment to cognitive deficits, body image, and coping with ongoing rehabilitation efforts.

Specialty Clinics Rotation (20% time)
In an effort to provide additional training experiences, each fellow will spend 8 hours per week in a specialty rotation through the year. This rotation will be determined by a number of factors, including: fellow level of interest, availability of site, and recommendation of the Training Director. This rotation runs year long.

SUPERVISION:
Each fellow is supervised by 2 or more faculty members with license to practice in the State of Wisconsin. The Director of Postdoctoral Training oversees all supervision. Fellows receive a minimum of two hours of formal supervision per week. Ongoing, informal supervision is available throughout every day. All training staff are on-site. Fellows are formally evaluated on a quarterly basis utilizing the Minnesota Supervisory Inventory from the QAI Systems. The fellowship program is overseen by the Director of Postdoctoral Training at UWHC, a full-time licensed staff psychologist whose responsibility it is to ensure that training needs are being met. The Director of Postdoctoral Training is responsible for the recruitment and selection of fellows, and provides direction to and oversees the training faculty in regard to their involvement in the fellowship program. Fellows are required to maintain records of their clinical activities, and these records are reviewed by the Director of Training to ensure a breadth of experience during the fellowship year. These records include the number of patient contact hours, the settings in which clinical services are provided, the type of psychological assessments and interventions provided and the fellows’ exposure to diversity in patient cultures. Fellows are asked to provide feedback and to evaluate their supervisors, training experiences, and the overall fellowship program throughout the year. An exit interview is performed by the Director of Postdoctoral training and by the Health Psychology Service administrator with each fellow at the end of the year.

Fellows also have the opportunity to provide peer mentorship to practicum students who rotate through the UWHC. There is also opportunity to provide training to medical residents and other allied health staff on an as requested basis.

HEALTH PSYCHOLOGY DIDACTICS:
In addition to the clinical training experiences, fellows are required to participate in various seminars, discussions, and case presentations with other trainees and Health Psychology faculty throughout the year. These scheduled didactics include:

- **Breakfast Club**
  Trainees meet two times per month to review service procedures and policies, address clinical issues, and foster programmatic advancements. Ethics forums and case presentations are also included in this didactic series.

- **Community Presentation and Self-Reflection**
  Each fellow is required to provide a minimum of 1 presentation to community groups or other health care groups within the institution. Examples of prior presentations are: stress management training for families at Gilda’s Club, self-care for an Alzheimer’s caregiver support group, and introduction to acute stress reaction for Trauma Surgery residents. Each fellow is also responsible for a reflection about training and professional growth at the end of the year to be presented to supervising staff.

- **Case Collective**
  Fellows attend and participate in a service-wide (pediatric and adult) didactic to discuss clinical issues and ethics that impact the inpatient Health Psychology service. Case Collective occurs quarterly through the year.

- **Other Didactics**
Fellows are encouraged to attend any Grand Rounds of interest presented by various departments at UWHC or relevant webinars Fellows are also invited to attend other relevant lectures or presentations provided across the university campus.

**DUE PROCESS AND GRIEVANCE PROCEDURES**

**DUE PROCESS POLICY**

The postdoctoral fellowship program supports a collaborative partnership between fellows and supervisors aimed at advancing the professional competencies of our fellows. Every effort is made by supervisors to inform the fellows of any perceived areas of growth potential in a timely and supportive manner. In addition to ongoing communication through regular supervision, fellows are formally evaluated quarterly by each of their supervisors using the Psychology Trainee Competency Assessment Form (PTCAF), which is completed by each supervisor after a live observation of the fellow engaged in clinical work. This evaluation provides formal feedback to the fellow and helps to measure professional competencies across the year. It also allows for discussion of recommendations to improve competencies. Supervisors keep fellows apprised of their levels of competencies regularly throughout the training year.

There may, however, be habitual patterns of problematic behavior which will require a more formal process of remediation. These problematic behaviors include one or more of the following characteristics:

1. The fellow does not acknowledge, understand, or address a problem when it is identified.
2. The problem is not based upon a skills deficit that can be corrected through additional education/practice.
3. The quality of services delivered by the fellow is negatively affected.
4. The problem is not restricted to only one area of functioning.
5. A disproportionate amount of time by training personnel is required to address the problem.
6. The fellow’s behavior does not change as a function of feedback, remediation effort, and/or time.
7. The problem involves a violation of ethical and/or professional standards or any other behavior deleterious to patient care.

It is the responsibility of any clinical supervisor to respectfully bring to a fellow’s attention any concerns or areas of needed improvement in professional skills or behavior. This early level of advisement is typically enough to create positive change and professional growth and development. However, should this collaborative effort fail in improving the fellow’s performance within a timely manner appropriate to the situation, remedial action will be undertaken.

The due process procedures will be initiated to ensure that the handling of any issue is not arbitrary or biased.
Due Process Procedures:
If any problematic behavior is not resolved through the normal supervision process within a reasonable amount of time, the Postdoctoral Fellow Training Director will be notified. In the case of a conflict of interest with the Postdoctoral Fellow Training Director, an alternative Training Director will serve as the Training Director through this process. The Internship Training Director is the first choice, followed by the Practicum Director (second choice).

The fellow will be provided with a written summary of the specifications of the notification and a plan of correction which also includes a reasonable timeline for achievement of goals (within 8 weeks). This written plan will be presented to the fellow and an opportunity to present feedback and suggestions will be provided. The fellow will sign the resulting training plan, and this written document will be placed in the fellow’s file. The Training Director can choose to remove this document from the file at the end of the training year if corrective action resulted in rectification of the problem. The signed plan will serve as a training contract between the intern and program staff and adherence to this plan will be monitored on a weekly basis by the relevant supervisor(s). The Director of Training will meet with the fellow every two weeks to monitor progress toward stated goals of the plan. The fellow has been placed on “notice” that there is a problem that requires correction.

If the corrective action does not result in rectification of the problem within the specified time frame (up to 8 weeks), the training program will take more formal action, which can include:
   a) Giving the fellow a limited endorsement, including specifying those settings in which he/she could function adequately;
   b) Communicating to the fellow that he/she is not successfully completing the fellowship;
   c) Termination from the training program

Right to Appeal:
Should the fellow seek to appeal the process prior to signing the plan, he/she will file a written appeal to the Training Director within 3 business days of receiving the remediation plan. A review panel comprised of the Director of Training and two other members of the training faculty, one of whom is chosen by the fellow, is convened to conduct a hearing no later than 7 working days after receiving the letter of disagreement. The fellow is allowed to attend this hearing to hear the expressed concern and have an opportunity to explain/dispute the behavior of concern. The review panel submits a written report on its review, including any recommendations within 5 business days of the completion of the review hearing. If the review panel finds in favor of the fellow, no further action is taken. The Director of Training will then consult with the faculty supervisor concerning the decision. If the review panel finds in favor of the faculty supervisor, the original supervisory action is implemented. The review panel may also find neither in favor of the supervisor nor the fellow. It may instead modify the original supervisory action or issue and implement its own action. In this instance, the Training Director will consult with both the faculty supervisor and the fellow concerning the decision.

Decision of the Review Panel may be appealed to a higher level within 10 business days of notification of the decision by the review panel. An Appeal committee consisting of the Faculty Training Committee members, the Department Administrator, and a representative from
the Employee Relations Office will convene to hear the details of the appeal and will make a decision. The decision by the Appeal Committee is final.

Exceptions to Policy:
The above procedures are pre-empted in cases where termination of employment is dictated by Organizational policy as in the case of patient abuse. Disciplinary policies of the organization (UWHC Policy 9.55) will dictate the plan of action in these cases. It should be noted that termination of employment constitutes termination of the fellowship program.

GRIEVANCE POLICY

PURPOSE

To provide a process to resolve problems or concerns when trainees have a complaint against the training program.

PROCEDURES

A. Health Psychology fellows are notified of the Grievance Procedure during the program orientation.

B. It is the sole responsibility of the fellow to pursue the steps of the grievance procedure.

C. No fellow will be reprimanded, harassed or punished for initiating a grievance.

D. Before initiating a formal grievance, fellows are encouraged to present any concerns to the parties involved in an effort to productively and efficiently rectify the concern. Fellows should bring this to the attention (either verbally or in writing) to the parties involved as early as possible. Fellows are encouraged to keep personal documentation of these efforts.

E. The procedure used in resolving grievances is as follows:
   1) The fellow speaks directly to the parties involved.
   2) If there is no resolution within a reasonable amount of time for the situation, agreed upon by both the fellow and the other party(ies), the fellow should notify in writing his/her concern to the Training Director. Written documentation of this process should be maintained by both the fellow and the Training Director. If there is a conflict of interest with the Training Director in this case, another training director (internship or practicum program) takes the place of the Fellowship Training Director through this grievance process. Every effort is made to resolve the issue within a reasonable and agreed upon amount of time.
   3) If the Training Director and fellow cannot resolve the matter, the Training Director will involve members of the Faculty Training Committee to help mediate the matter between the two parties. Written documentation of this process should be maintained by the fellow and the Training Director and is considered to reflect a formal
grievance. The Training Committee will offer a formal written decision regarding the grievance within 20 days of the initiation of the complaint (step E2).

**APPEAL PROCEDURES:**
The fellow may initiate appeal procedures in response to the grievance-related decision of the Faculty Training Committee. The appeal will be taken up by the Health Psychology Department Administrator, Employee Relations representative, and Director of Behavioral Health. These individuals will conduct an independent appraisal of the grievance process and the procedures followed, review the written documentation, and conduct interviews with the parties involved as deemed necessary. The fellow may designate a training faculty member of their choosing as an advocate in this appeal process. Following the completion of the process, a formal written decision will be rendered regarding the substantive content of the grievance-related appeal.

F. Fellows also should refer to the UWHC Administrative Policy 9.54 Formal Complaint and Appeal Process: Non-Represented UW HEALTH Authority Regular Employees. The fellow should contact Human Resources for any additional information.

**V. REFERENCES**
Hospital Administrative Policy 9.54-Formal Appeal Process
STIPEND AND BENEFITS
The postdoctoral stipend is $50,000 for a twelve-month period, and includes 8 legal holidays and an additional 24 paid days for time off (includes vacation, sick, professional time). The fellowship year typically begins around September 1 of each year, although start date is flexible. Benefits are available including health insurance plans for fellows and their families. There are fees for parking in any university parking lots, but public and university transportation systems are available for convenient transport to and from UWHC and AFCH.

Fellows have shared offices with individual computers, telephones, pagers, and voicemail. They also have access to fax and photocopy machines, and clerical support. Educational resources available to fellows include the University of Wisconsin library and computer systems.

ELIGIBILITY
Qualified applicants will have completed all Ph.D. or Psy.D. requirements from an APA accredited Clinical or Counseling Psychology program, including the successful completion of an APA approved pre-doctoral clinical internship program prior to starting the program. Conferral of the graduate degree is necessary prior to the start date. Previous experience and/or strong interest in the field of Health Psychology are required. Members of diverse populations (gender, race, age, ethnicity, sexual orientation, religion, socioeconomic status, geographical origin, and bilingual status) are encouraged to apply. Applications will be reviewed as they are received. Early application is encouraged.

To apply, please send a letter of interest which includes the track that you are applying for (adult; pediatric) and the names of your references, an updated CV, and three letters of recommendation via email or USPS to the Training Director. Official transcripts should be sent directly from your graduate program. Unofficial transcripts can be sent via email to the training director until official transcripts arrive. Letters of recommendation should be sent directly from the letter writers to the Training Director via email or USPS.

Any questions about the training experience and all application materials should be directed to:
M. Denise Connelly, Ph.D.
Postdoctoral Training Director
Department of Health Psychology
UW Hospital and Clinics
H6/272
600 Highland Avenue
Madison, Wisconsin  53792-2424
mconnelly@uwhealth.org
608-263-9372

APPLICATION DEADLINE: January 11, 2022

HEALTH PSYCHOLOGY FACULTY AND INTERESTS

**Heidi Beckman, Ph.D.** (Marquette University, 2000)
Senior Psychologist
Interests: Health-related habit change; resilience; finding meaning in physical symptoms and chronic pain; management of health anxiety.

**M. Denise Connelly, Ph.D.** (Nova Southeastern University, 1990)
Director, Post-doctoral Fellowship Training in Health Psychology; Senior Psychologist;
Interests: Organ donation and transplantation; consultation with health care teams; personality disorders in medical settings; physician training; adjustment to trauma and loss; clinical supervision and training.

**Erin Costanza, Ph.D.** (University of Iowa, 2006)
Clinical Health Psychologist, Associate Professor
Interests: Psycho-oncology, behavioral management of fatigue, insomnia and pain

**Lori Dubenske, Ph.D.** (University of North Texas, 2004)
Clinical Health Psychologist
Interests: Psycho-oncology; caregiver support; clinical supervision

**Christina Escuder, PsyD** (Albizu University- Miami campus, 2018)
Clinical Health Psychologist
Interests: Health psychology; transplant; weight management; traumatic injury and adjustment; psychological factors impacting acute/chronic medical concerns.

**Stephanie Farrell, Ph.D.** (University of Wisconsin-Milwaukee, 1999)
Director, Internship Training in Health Psychology; Senior Psychologist
Interests: Pediatric psychology; chronic illness; oncology; play therapy; trauma; training of psychologists.

**Brian Leitzke, Ph.D.** (University of Wisconsin-Madison, 2019)
Clinical Health Psychologist
Interests: Psycho-oncology; palliative care; geropsychology; pediatric psychology.

**Lisa McGuffey, Ph.D.** (University of Miami, 2001)
Clinical Health Psychologist
Interests: Psycho-oncology; adjustment to illness; positive growth; clinical supervision

**Justin A Moore, Ph.D.** (Western Michigan University, 2017) Clinical Health Psychologist
Interests: Children with acute or chronic illness, adherence to medical regiments, consultation to medical teams, pediatric chronic pain, pediatric sleep disorders, anxiety and depression in children.

**Emily Schweigert, Ph.D.** (University of Wisconsin-Madison, 2011)
Clinical Health Psychologist
Interests: Post-partum depression, parenting, pediatric trauma and brain injury, pediatric oncology

**Michelle Ghaffari Toigo, Ph.D.** (Marquette University, 2019)
Clinical Health Psychologist
Interests: Impact of culture on physical and mental health; coping with chronic illness; QOL in chronic health conditions; mindfulness and meditation.