

**MEDICAL COLLEGE OF WISCONSIN  
CLINICAL NEUROPSYCHOLOGY  
FELLOWSHIP HANDBOOK**

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POSTDOCTORAL FELLOWSHIP PROGRAM IN  
ADULT AND PEDIATRIC CLINICAL NEUROPSYCHOLOGY

Division of Neurology

In 2019, MCW celebrated its 125th anniversary of the institution's founding. MCW is a major national research center and is the largest research institution in the Milwaukee metro area and 2nd largest in Wisconsin.

MCW providers practice at three major affiliates – The Froedtert & Medical College of Wisconsin regional health network, Children's Wisconsin, and the Zablocki VA Medical Center.

Froedtert Hospital, the primary adult hospital, is a Level 1 Trauma Center and nationally recognized academic medical center. Froedtert is a 500-bed facility that delivers advanced medical care and state of the art treatment and technology. Froedtert & MCW are at the forefront of new technology and care in many areas, including cancer, heart and vascular diseases, brain injury and disorders,

## Our Program

The Division of Neuropsychology was founded in 1979 and is located at the Medical College of Wisconsin in the Hub for Collaborative Medicine (HCM) building. The Division of Neuropsychology is housed in the Department of Neurology. Sara Swanson, PhD, ABPP and Amy Heffelfinger, PhD, ABPP are the Neuropsychology Division Co-Chiefs. The Program Director for the Clinical Neuropsychology Postdoctoral Fellowship is Julie Janecek, PhD, ABPP and the Assistant Program Director is Michelle Loman, PhD, ABPP. The Education Program Coordinator is Haylee Hopp. The Division also includes psychometrists who provide training and supervision in test administration, scoring, and testing logistics, graduate practicum students who participate in evaluation and testing, and other dedicated support staff who are responsible for scheduling, checking insurance, and billing procedures.

The Division of Neuropsychology offers two-year postdoctoral fellowships in pediatric and adult neuropsychology. Clinical training is divided into adult and pediatric tracks, and fellows are recruited to one track. All fellows attend the same didactic series, which contains a wide range of topics across the lifespan. This division facilitates mastery of the set of advanced knowledge and skills considered necessary for independent practice in clinical neuropsychology with adult or pediatric populations. The postdoctoral fellowship program begins and ends around the first of July (September if internship concludes end of August). Education and evaluations are competency-based. The purpose of the training program is to produce postdoctoral-level psychologists with sufficient clinical skills to provide high-quality services to patients and families. The program is designed to provide a comprehensive training experience that includes didactic, clinical, and research components. The program is designed to provide a comprehensive training experience that includes didactic, clinical, and research components. The program is designed to provide a comprehensive training experience that includes didactic, clinical, and research components.



memory disorder's evaluations and provide inpatient and outpatient evaluations for normal pressure hydrocephalus.

- 2) **Comprehensive Epilepsy Service** During the epilepsy rotation, fellows develop a working knowledge of common seizure disorders, the effects of seizures on cognition, and how neuropsychological assessment can be used to assist in selection of patients for surgical treatment of their epilepsy. Fellows also learn to conduct and interpret intracarotid sodium amytal testing and fMRI for lateralizing language and memory and predicting cognitive outcome after epilepsy surgery.
- 3) **General Clinical Service** On this rotation, fellows develop a working knowledge of common medical, neurological and psychiatric disorders that are associated with impairments in cognitive and emotional capacities. Fellows in this rotation become independent in the neuropsychological assessment, differential neurobehavioral diagnosis, consultation and disposition planning of patients presenting with a variety of conditions.
- 4) **TBI / Medicolegal Evaluation Service** The training goals of this rotation are to 1) obtain a working knowledge of the evaluation, triage and treatment of adult patients during the first few weeks and months following traumatic brain injury, and 2) learn the role of the neuropsychological evaluation in medicolegal cases involving civil, criminal, and disability issues for individuals claiming impairments in cognitive and emotional functions. Fellows in this rotation provide evaluation, triage and treatment to adult patients during the first few weeks and months following injury. The aim is to assist patients with returning to work and school, and their pre-injury lifestyle.

Inpatient training experience is obtained at Froedtert Hospital. These evaluations are conducted to aid in differential diagnosis of neurobehavioral syndromes and for determining capacity for medical decision making.

#### Elective Rotation at the Zablocki VA Medical Center

Adult fellows have the opportunity complete a minor rotation at the VA which houses an independent APA Accredited Neuropsychology Fellowship. Dr. Eric Larson, ABPP-CN, is the training director for the Neuropsychology Fellowship. This rotation provides MCW's post-doctoral fellows with the opportunity to conduct supervised neuropsychological evaluations in a VA setting. They can participate in multidisciplinary clinics including the Geropsychiatry Clinic and Polytrauma Clinic, and/or see Veterans for outpatient neuropsychological testing in the Neuropsychology Clinic.

This elective rotation is offered during the General Rotation. Fellows are allowed to block one outpatient case per week in order to spend one day per week in the VA Clinics described above. Fellows who are potentially interested in pursuing this elective rotation should discuss this with their professional mentor and the MCW fellowship training director as soon as possible after starting their fellowship so that the necessary arrangements can be made.

#### Elective Rotation in the MCW Neuro-Oncology Clinic – Cancer Center

Adult fellows have the opportunity to complete a minor rotation in the Neuro-Oncology Clinic at the Medical College of Wisconsin/Froedtert Hospital Cancer Center. This clinic is supervised by Drs. Alissa Butts. This rotation provides postdoctoral fellows with the opportunity to conduct supervised neuropsychological evaluations within the Cancer Center, participate in brief inpatient evaluations for individuals with brain tumors who are scheduled to undergo resection (as available), and observe intraoperative mapping for awake brain tumor surgeries (as available). Postdoctoral fellows who select this rotation will also be expected to attend Brain Tumor Board Case Conference, which takes place at 7:00am-9:00am on Wednesdays. This is a multidisciplinary team conference that includes neuro-oncology, neurosurgery, radiology, neuropathology, and neuropsychology.

This elective rotation is offered during the General Rotation. Postdoctoral fellows are allowed to block one general outpatient case per week in order to complete activities described above. Fellows who are interested in

pursuing this elective rotation should discuss this with their professional mentor and the MCW fellowship training director as soon as possible after beginning their fellowship so that the necessary arrangements can be made.

In addition to these four primary rotations, there is opportunity to participate in several special J U D P V



- 1) Medical and Neurosurgical Evaluation Rotation While on this rotation, fellows will have an emphasis on conducting evaluations with patients who may be candidates for resective surgery to treat intractable epilepsy, brain tumors, and vascular malformations. Fellows participate in the weekly multidisciplinary conferences that include neurology, neurosurgery, genetics, pathology and radiology. Fellows will participate in mapping of language and memory functions via extra-/intra-operative stimulation mapping or intracarotid amobarbital (Wada) testing. There may also be opportunities to observe fMRI language mapping and magnetoencephalography (MEG). Through participation in the Neuro-Oncology Multidisciplinary Team, fellows complete a pre-surgical/treatment evaluation for brain tumor patients to establish a neuropsychological baseline. Fellows will also evaluate



- x Assessment/Intervention
- x Research
- x

graduate level this includes a minimum of 1) three neuropsychology courses, 2) two neuropsychology practica, 3) additional coursework, practica, or didactics in neuropsychology, and 4) dissertation or research project in neuropsychology. At the internship level, the applicant would have had at least 50% of training time in clinical neuropsychology and 2) didactic experiences consistent with Houston Conference guidelines for knowledge and skill. Generally, only applicants who completed an internship that was at least 50 percent neuropsychological training are considered. Applicants with these credentials are generally well-prepared for the rigor of our program; thus, these credentials serve as the principal criteria for selecting post-doctoral fellows for interviews and also in final ranking. As Houston Conference Guidelines and continuing beliefs in the field encourage, however, there are multiple pathways to become a clinical neuropsychologist. Because of this, we also consider applicants with a level of training consistent with an Emphasis or Experience in Clinical Neuropsychology at the doctoral and/or internship level. At a minimum, an applicant needs to have 1) one neuropsychology course or 2) one clinical neuropsychology practicum, and 5% - 10% of supervised experience in clinical neuropsychology and/or didactic training in order to be considered.

The ideal fellow applicant is one with a solid foundation in general clinical knowledge and skills, coursework in lifespan neuroscience, human neuropsychology, and neuropsychological assessment, practicum and internship training in neuropsychological assessment. Enthusiasm and capacity for taking advantage of the unique education and training opportunities at MCW is also considered through individual interview, review of letters of recommendations and the nature of prior training experiences. Approximately 5 to 10 applicants are interviewed for every position available.

## Application Procedures

# ADULT FELLOWSHIP ROTATIONS

## GENERAL ROTATION

### Training Goals for General Rotation

To develop competence in the assessment of adults who have a cognitive impairment, the student will be able to:

1. Conduct a comprehensive history and physical examination.
2. Write a clinical volume.

### Goals

1. Develops a differential diagnosis of cognitive impairment.
2. Demonstrates the ability to perform a cognitive examination.
3. Interprets the results of a cognitive examination.
4. Lists the pathophysiology of cognitive impairment.
5. Demonstrates the ability to perform a neuroanatomical correlates associated with cognitive impairment.
6. Generates evidence-based management plans for cognitive impairment.
7. Provides clear and concise reports of cognitive impairment.
8. Writes reports of cognitive impairment.
9. Meets clinical volume.

## NEURODEGENERATIVE DISORDERS ROTATION

### Training Goals for the Neurodegenerative Disorders Rotation

To develop competence in the assessment of older adults with neurodegenerative disorders, the student will be able to:

1. Conduct a comprehensive history and physical examination.
2. Write a clinical volume.

- Demonstrates about various common disorders

# COMPREHENSIVE EPILEPSY PROGRAM ROTATION

## Training Goals for the Comprehensive Epilepsy



# **PEDIATRIC FELLOWSHIP ROTATIONS**

## MEDICAL AND NEUROSURGICAL EVALUATION ROTATION:

### Training Goals for the Medical and Surgical Evaluation Rotation

To develop competence in neuropsychological evaluation of patients who are candidates for resective surgery to treat intractable epilepsy, brain tumors, and vascular malformations. Fellows participate in the following activities:

6. Writing concise yet comprehensive reports
7. Building rapport with young children
8. Demonstrating appropriate behavioral management skills
9. Administering preschool neuropsychological assessments
10. Conducting observational measures
11. Formulating cases in developmentally appropriate manner
12. Managing clinical volume.

## COMPLEX SYNDROMES ROTATION:

### Training Goals for the Complex Syndromes Rotation

To develop competence in neuropsychological evaluation of children with rare and difficult to diagnose disorders. This includes characterizing cognitive profiles of children with medical/neurological disorders, such as genetic disorders or epilepsy syndromes with differential diagnosis of Autism Spectrum Disorder (ASD).

### Specific Rotation Goals

1. Conducting interviews that are both comprehensive and disorder-specific.
2. Interviewing effectively around ASD symptomatology.
3. Demonstrating understanding of how ASD symptomatology can vary based on developmental level, gender, and other factors.

### 3. Participating in the

# **POLICIES AND PROCEDURES**

# Neuropsychology Fellowship Program Policies and Procedures

## Table of Contents

- I. Requirements for Potential Fellows
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### III. Anti-Harassment and Non-Discrimination

Source: MCW Corporate Policies (CC.050) Last Revision Date 12/30/2022

#### DEFINITIONS

**Accommodation:** A modification or adjustment to a job, space, method of performance or schedule that enables a qualified individual with a disability or sincerely held religious beliefs or religious practice which conflicts with job requirements to be considered for the job and/or continue to perform functions of the job in a manner that does not present an undue hardship for MCW.

**Confidential Resources:** The MCW Compliance Reporting Hotline accepts reports from anonymous and identifiable individuals. The Employee and Family Assistance Program (EFAP) provides free and confidential support to all employees and students.

**Discrimination:** Discrimination may occur when employment or academic decisions are threatened or made, implicitly or explicitly, based upon an individual's membership within a protected class or any



## **POLICY**

MCW is committed to creating and sustaining a safe learning and working environment that recognizes and values the dignity of all members of the MCW community. MCW prohibits all forms of Harassment, Discrimination based upon a protected class, or any other basis prohibited by law or regulation, and all other negative conduct that inhibits effective communication and productivity. MCW prohibits all forms of Retaliation for participating in a protected activity under this policy. MCW encourages early reporting of unprofessional behavior, Unwelcome Conduct, and any form of Harassment and/or Discrimination or Retaliation.

All employment and academic decisions are to be based upon a legitimate business or educational purpose and rationale. MCW will take immediate and appropriate action when it determines that Harassment, Discrimination and/or Retaliation has occurred.

## **PROCEDURE**

Any member of the MCW community who feels that they have been harassed, or believe that they have witnessed unprofessionalism, Discrimination, or Harassment, should immediately report the situation to

If an investigation reveals that unprofessional behavior, Discrimination, Harassment or Retaliation has occurred under this policy, MCW will take immediate and appropriate corrective action reasonably designed to halt the conduct, and prevent recurrence, which may include corrective action up to and including termination, removal or dismissal. In some cases, the appropriate action may be to provide an individual who has violated this policy education, coaching, a leave of absence, compensation reductions, or other avenues to monitor and correct behavior.

Any individual found to be making knowingly or intentionally false accusations of Discrimination, Harassment or Retaliation or providing knowingly or intentionally false information with respect to an investigation will be subject to corrective action up to and including dismissal.

#### Accommodation:

MCW Human Resources has a process to evaluate and respond to requests for Accommodation from employees, applicants for employment and candidates on a case-by-case basis and may provide a reasonable Accommodation for a qualified individual with a disability to enable performance of job-related functions, or full participation in the application and selection process. Employees may submit requests for reasonable adjustment of work requirements that conflict with the individual employee's sincerely held religious beliefs. MCW aims to provide such religious Accommodations in a manner consistent with all legal requirements and may reasonably be made available without undue hardship. Employee requests for Accommodation should be submitted to the Office of Human Resources and Faculty Affairs and should identify the proposed Accommodation sought by the individual and explain the reason or basis for the Accommodation request. MCW reserves discretion to determine

#### IV. Administrative and Financial Assistance

Fellowship salaries are commensurate with NIH fellowship rates. The training program is included in the departmental budget, which is managed by the Neurology Departmental Administrator. Training program budget items include post-doctoral fellow salary and fringe benefits, support for the fellowship, and basic resources. The costs of the fellowship program are covered by Division of Neuropsychology clinical revenue, grants and contracts, MCW Physicians Groups (Medical College Physicians for adult practice and Children's Specialty Group for pediatrics) and affiliate hospital support from Froedtert Hospital and Children's Wisconsin.

The department provides the Division with support from the Administrator and an Education Assistant to the Department's training programs. The Division of Neuropsychology supports Case Managers/Administrative Assistants and full-time Psychometrists. The Case Managers/Administrative Assistants, along with hospital clinical central scheduling and Departmental billing and collection services, complete patient scheduling, insurance verification, billing and collections, and clerical assistance for didactics. These teams help support postdoctoral fellows.

A computer, typically an HP laptop with docking station and double 23-inch monitors, with access to a full array of programs and applications, including -0.-4.5 s -0.00.5 s 51028 Tw 265876 0 Td afance8-6.1 (tr)10.8 (c

## V. Supervision

### POLICY

The program ensures weekly supervision. The fellows have routine face-to-face meetings at least weekly, for no less than 2 hours per week. The onus of the scheduling is on the fellows. They are instructed to make sure to have at least 2 hours of individual supervision per week. The Program Director or the Assistant Program Director are required to confirm the supervision time documented on each 6-month self-assessment.

### PROCEDURE

Adult fellows have 10 regular supervisors (all licensed psychologists, all clinical neuropsychologists, 7 of whom are board certified in clinical neuropsychology) and pediatric fellows have 6 regular supervisors (all licensed psychologists, all clinical neuropsychologists, 3 of whom are board certified in clinical neuropsychology). The fellows receive supervision from all supervisors during their two training years. Fellows have weekly face to face supervision during clinical activities and as scheduled by the fellow and supervisor for no less than two hours of one-on-one supervision per week. The face-to-face supervision will include one-on-one meetings with the supervisor to discuss test selection prior to initiating testing, case formulation prior to writing reports including in-depth discussion of the differential diagnostic process and review of neuroimaging, one-on-one discussion of suggested changes to reports, and in-person demonstration of testing and interview techniques by and/or with their supervisor. Direct supervision also occurs throughout the day in specialty or multidisciplinary clinics, when faculty and fellows work side-by-side evaluating multiple patients, reviewing test results, and/or viewing brain imaging and records.

The primary supervisor is Julie Janecek, PhD ABPP (Program Director) for the adult fellows, and Michelle Loman, PhD ABPP (Assistant Program Director) for the pediatric fellows.

## VI. Evaluation and Written Documentation

### POLICY

Evaluations are completed at regular intervals throughout the fellowship to document progress toward the development of competence for independent practice in clinical neuropsychology and to identify benchmarks in each competency area that are below the minimum level of achievement required by the fellowship program at each evaluation timepoint.

### PROCEDURE

Program evaluation tools are based on our program's competencies, which are as follows:

#### Foundational Competencies (applicable to all specialty areas in psychology)

- x Integration of Science and Practice
- x Ethical and Legal Standards/Policy
- x Individual and Cultural Diversity

#### Neuropsychology Specialty Specific Competencies

- x Professional Identity and Relationships/Self-Reflective Practice
- x Interdisciplinary Systems/Consultation
- x Assessment/Intervention
- x Research
- x Teaching/Supervision/Mentoring
- x Management/Administration
- x Advocacy

Education regarding evaluation procedures is provided during fellowship orientation, once per year in didactics, and reviewed at each performance review meeting. The Minimum Level of Achievement (MLA) in each competency area for each evaluation timepoint is also documented in the Fellowship Handbook, which all fellows have access to and are required to read. Fellows who have not successfully met the MLA in each competency area at the conclusion of their fellowship may not successfully complete the program.

Evaluations are completed at regular intervals as outlined below throughout the fellowship. Fellows are provided with copies of all evaluations. These evaluations become a part of the fellows' permanent electronic file which is kept on a secure server that only training faculty can access in the Neuropsychology Division.

Faculty supervisors complete evaluations for all fellows as follows:

- x Competency-based evaluations at months 6, 12, 18, and 23.
- x Rotation-specific evaluations at months 3 and 6 for each 6-month rotation

Fellows complete evaluations as follows:

- x Competency-based self-evaluations at months 1, 6, 12, 18, and 23
- x Supervisor evaluations at months 6, 12, 18, and 23
  - o Availability and dependability for supervision
  - o Enthusiasm/interest in teaching
  - o Encourages and answers questions
  - o Approachability/openness to feedback
  - o Acceptance/inclusivity of gender, race, culture and individual differences
  - o Overall
- x Program evaluations at months 12 and 23
- x Exit Interview at end of fellowship

Evaluations are reviewed every three months with the fellow and the Program Director (adult fellows) or Assistant Program Director (pediatric fellows), as well as other supervising faculty.

## VII. Management of Performance Below the Minimum Level of Achievement

### PURPOSE

The purpose of this policy is to outline the procedures to be followed for the management of fellow performance below the Minimum Level of Achievement by the Clinical Neuropsychology Program at the Medical College of Wisconsin (MCW), which is accredited by the American Psychological Association.

#### Definitions:

**Performance Below the Minimum Level of Achievement (MLA)** includes, but is not limited to, the failure to meet expected program performance standards, violation of MCW policy, unprofessional behavior, unsafe practices and/or egregious conduct.

**Egregious conduct** is behavior including, but not limited to, actions or statements that are malicious, obscene, threatening, illegal, immoral, disruptive, deceptive or dishonest or that show disregard for life or that undermine the public's trust in the profession of psychology or that demonstrate lack of character. Examples of egregious behavior include, but are not limited to, lying, violation of MCW privacy or security policies, aggressive or intimidating behavior toward patients or staff, actions or statements that violate the anti-harassment or non-discrimination policies of MCW, and actions or statements that violate the APA Ethical Principles of Psychologists and Code of Conduct.

### POLICY

The Program Director and Assistant Program Director shall use reasonable judgment to determine the step(s) to be used to address fellows demonstrating performance below the minimum level of achievement. To the extent possible, performance below the minimum level of achievement will be managed progressively.

### PROCEDURE

#### Competency Development Plan:

- 1) When faculty evaluations of fellows document that the Minimum Level of Achievement (M Achpriv Achpr

along with the Program Director and/or Assistant Program Director will sign the CDP Document as indication of the review and then it is placed in the fellow's permanent training file.

- 4) Fellows who believe that their Competency Development Plan was generated without reasonable basis for the decision may appeal and follow the procedures set forth in the Process: Appeal of Adverse Academic Decisions Policy below.
- 5) The Program Director or appointed proxy (e.g., Assistant Program Director) and the fellow will schedule a follow-up meeting to review progress. The timing for this progress review meeting will be established in the Competency Development Plan (typically 3 months).
- 6) If goals are not met, then consequences and/or plan for further development are reviewed, which may include generating another Competency Development Plan and the same procedure outlined above will be repeated.
- 7) It is anticipated that in most cases, the Competency Development Plan will facilitate significant progress so that the fellow will meet the Minimum Level of Achievement required for successful program completion. In rare cases, continued failure to meet the MLA may result in the fellow being placed on probation, non-renewal, failure to successfully complete the program, and/or termination.

#### Probation

- 1) When faculty evaluations of fellows document that the Minimum Level of Achievement (MLA) has not been met at months 6, 12, 18, or 23, or with evaluations completed through a Competency Development Plan, a probationary period may be initiated.
- 2) The Program Director must seek the counsel of the Vice Chair of Education in Neurology regarding the recommendation to place a fellow on probation or extend a probationary period.

- 6) The Program Director and Assistant Program Director must meet with and inform the fellow that s/he is being placed on probation. The discussion must outline the areas that are below the minimum level of achievement, remediation plan (goals, actions, timeline), mentor, frequency



1. The Vice Chair for Education and the Chair of the Department of Neurology must be consulted regarding decisions of non-renewal, failure to successfully complete the program, or termination. MCW Human Resources must also be notified of the decision.
2. The Program Director or appointed proxy (e.g., Assistant Program Director) must meet with the fellow to inform her/him of the decision of nonrenewal, failure to successfully complete the program, or termination. For terminations, the Program Director or appointed proxy must give the fellow an opportunity to discuss the reasons for dismissal prior to termination.
3. The Program Director must document in writing the non-renewal, failure to successfully complete the program, or termination decision. This documentation is shared with the fellow and saved in their permanent training file.
4. Written notification of non-renewal, failure to successfully complete the program, or termination must be given to the fellow. The Program Director is only required to provide the fellow with as much prior notice as circumstances reasonably allow.
5. Fellows who fail to successfully complete the program, are terminated, or whose contract is not renewed may request an appeal of the decision by following the procedures set forth in the **Duke Process: Appeal of Adverse Academic Decisions Policy** below.
6. If a contract is not renewed, on the last day of employment, programs must collect from the fellow any equipment including, but not limited to, pagers, ID badges, keys, parking cards, laptops and immediately revoke email privileges. Additionally, programs must terminate the fellow's access to hospital and MCW computers and electronic records.
7. Upon termination, on the last day of employment, programs must collect from fellows any equipment including, but not limited to, pagers, ID badges, keys, parking cards, laptops, and immediately revoke email privileges. Additionally, programs must terminate the fellow's access to hospital and MCW computers and electronic records.

#### Unsafe Practice or Egregious Conduct



## Complaint and Grievance Process

Fellow complaints and grievances regarding the work environment (e.g., interpersonal problems or problems with aspects of the training environment) shocomgant94 ( o25.7 ( 9 (n))1grd usi-8.h)0.3ocomrsll

The Clinical Competency Committee (CCC) shall serve as the appeals committee, comprised of the Vice Chair for Education in Neurology, Program Director of the Clinical Neuropsychology Fellowship, Assistant Program Director of the Clinical Neuropsychology Fellowship, Adult Clinical Neuropsychology Practicum Director, and Pediatric Clinical Neuropsychology Practicum Director. The CCC shall review all appeals of academic decisions (competency development plan, probation, non-renewal, failure to successfully complete the program, termination).

9. The appeal panel shall submit its written report and recommendations to accept, reject, or modify the decision of the program to the Program Director within one week of the hearing. The report shall

**B. Discharge**

The Supervisor must obtain approval from the Department Administrator and the Director of Human Resources and Organizational Development (or his/her designee) prior to discharging an employee. Notification of a discharge recommendation must be given in a manner that allows

## XI. Maintenance of Records

### PROCEDURE

All evaluations, competency development plans, pass letters, and certificates of completion are saved indefinitely in the fellow's electronic training file that is stored on a secure server only accessible by training faculty in the Neuropsychology Division.

# COMPETENCY-BASED TRAINING AND EVALUATION



# COMPETENCY-BASED TRAINING AND EVALUATION

Clinical Neuropsychology Fellowship Training at the Medical College of Wisconsin is centered around competency development in the following 10 broad areas:

## Foundational Competencies (applicable to all specialty areas in psychology)

- x Integration of Science and Practice
- x Ethical and Legal Standards/Policy
- x Individual and Cultural Diversity

## Neuropsychology Specialty Specific Competencies

- x Professional Identity and Relationships/Self-Reflective Practice
- x Interdisciplinary Systems/Consultation
- x Assessment/Intervention
- x Research
- x Teaching/Supervision/Mentoring
- x Management/Administration
- x Advocacy

Competency-based evaluations are completed at 6-month intervals throughout the fellowship to document progress toward the development of competence for independent practice in clinical neuropsychology and to identify benchmarks in each competency area that are below the minimum level of achievement required by the fellowship program at each evaluation timepoint.

## Training expectation across the course of the fellowship and Minimum Level of Achievement (MLA)

Developmentally, there should be a shift that results in less modeling of behavior over time by the supervisor. The goal of the scale is

- x Most of the time, the supervisor is modeling behaviors (i.e., making unilateral decisions and giving directives)
- (2) Independently demonstrates this competency sometimes (~ 50 of the time)
  - x About half the time, the supervisor is modeling behaviors (i.e., making unilateral decisions and giving directives)
- (3) Independently demonstrates this competency frequently
  - x

x

# READING MATERIALS

# READING MATERIALS

## HOUSTON CONFERENCE GUIDELINES

[Houston Conference](#)

## APA ETHICS CODE

[APA Ethics \(2017\)](#)

## TAXONOMY

[Taxonomy](#)

## SUGGESTED READING LIST

[General Training](#)

Hannay, H.J., Bieliauskas, L.A., Crosson, B., Hammeke, T., Hamsher,

Lifespan and Development

Donders, J. & Hunter, S. (2018) Neuropsychological conditions across the lifespan.

Stucky, Kirk J., Doug Bodin, and Shane S. Bush (eds). *Supervision in Neuropsychology: Practical, Ethical, and Theoretical Considerations*. New York, 2022; online edn, Oxford Academic, 21 Apr. 2022), <https://doi.org/10.1093/oso/9780190088163.001.0001>

# FELLOWSHIP ORIENTATION CHECKLIST



# ORIENTATION AND ONBOARDING

## ORIENTATION CHECKLIST

\_\_\_\_\_ Desk supplies – pens, pencils, post-its, phone message pad, department phone lists, didactic schedule, CW, FMLA and MCW phone directories ( + +)

\_\_\_\_\_ Phone/Voice Mail set up ( + +)

\_\_\_\_\_ Read Neuropsychology Fellowship Handbook ( + +)

\_\_\_\_\_ Complete New Faculty/Employee Orientation (HR initiated – will receive email with info on 3rd day of employment)

\_\_\_\_\_ Set up myOracle Self-service (HR initiated/ + + follow-up)

\_\_\_\_\_ myTime Training (HR initiated/ + + follow-up)

\_\_\_\_\_ Benefits – review and sign-up (HR initiated/ + + follow-

\_\_\_\_\_ up) Epic Training ( + +)

#### DIRECTOR ORIENTATION TASKS:

\_\_\_\_\_ \_\_\_\_\_ Orientation Checklist – pass on to director (JJ)

\_\_\_\_\_ \_\_\_\_\_ Attendance policy: (ML/JJ)

Requesting time off (1) Enter Vacation and Sick in myTime, 2) When you get request they forward to ML or JJ for approval, 3) a) adult fellows email Julie Beck, Diane Van Patter, Je Richards, and Mary Kate Cameron b) pediatric fellows email Michelle Loman, Jess Luepke and Danielle DeFrancisco

\_\_\_\_\_ \_\_\_\_\_ Benefits: (ML/JJ)

Time off for vacation and professional time: 18 days + 2 floating holidays per year (discuss planning appropriately for time off for conferences and interviews); up to 80 hours may be carried forward into the new fiscal year

Sick: Initial sick balance of 160 hours upon date of hire; accrual 16 hours/month thereafter up to a max of 240 hours

403B: Voluntary contribution

Disability: short term disability after 7-day elimination period; long term kicks in after 180 days

FMLA: eligible in 2nd year

Paid Parental Time (up to 4 weeks to be used during an approved FMLA period that does not extend FMLA time but provides another type of pay during this time)

\_\_\_\_\_ \_\_\_\_\_ Review forms (Teams and Groups Drive) (ML/JJ)

\_\_\_\_\_ \_\_\_\_\_ Dress Code (ML/JJ)

\_\_\_\_\_ Personal phone calls/emails/internet (ML/JJ)

INTRODUCTION TO FELLOWSHIP (individual meeting with D):

\_\_\_\_\_ Didactics/Schedule

\_\_\_\_\_ Supervision of Fellows

\_\_\_\_\_ Fellow and Supervisor Evaluations and Reviews

\_\_\_\_\_ Due Process

\_\_\_\_\_ Clinical Rotations (Review Fellowship Handbook)

\_\_\_\_\_ Inpatient Consultation (adult)

\_\_\_\_\_ Professional Mentor

\_\_\_\_\_ Research Expectations/Research Mentor

\_\_\_\_\_ Role of Neuropsychology in department, hospitals, college

\_\_\_\_\_ Role in Supervision and Mentorship of Practicum Students

CLINICAL ORIENTATION ACTIVITIES:

\_\_\_\_\_ Clinic Orientation (adult, MKR/KT; peds ML/JL/DD)

\_\_\_\_\_ Observe fellows and faculty within first two weeks

\_\_\_\_\_ Get copies of example reports from fellows/faculty

\_\_\_\_\_ Obtain test list, check off tests that you are already trained on

\_\_\_\_\_ Learn tests that you do not know

\_\_\_\_\_ Learn how to manage charts (forms, stickers, purge) (AAs)

\_\_\_\_\_ Billing procedures (Stephanie/Sarah and how to documents)

\_\_\_\_\_ Schedule first case in first or second week (AAs)

- \_\_\_\_\_      \_\_\_\_\_ Application of EPIC training to clinical case (shadow fellows)
- \_\_\_\_\_      \_\_\_\_\_ Shadow fellows on inpatient consultations (adult)