Hartford Hospital/Institute of Living
Postdoctoral Fellowship in Clinical Neuropsychology

**Overview:** We are pleased to offer a two-year full-time position for a postdoctoral fellow in Clinical Neuropsychology for the 2022-2024 cycle. The residency is a member of the Association of Postdoctoral Programs in Clinical Neuropsychology (APPCN) and is structured to meet Houston Conference and APA Division 40 Guidelines for training in neuropsychology with a goal of preparing fellows for board certification. The program collaborates with the Departments of Psychiatry and Psychology at Hartford Hospital and the Institute of Living, as well as the Departments of Neurology and Neurosurgery at Hartford Hospital. Elective experiences are available at Connecticut Children’s as well as other local hospitals.

Hartford Hospital maintains the only Level 1 Trauma Center in the region and operates the state’s only air ambulance system, LIFE STAR. Our quality programs have continually been recognized for excellence by the Federal Government, US News and World Report, Blue Cross/Blue Shield and the National Cancer Institute.

Founded in 1822, The Institute of Living is the third oldest psychiatric hospital in the nation, and the first hospital of any kind in Connecticut. It lies in the center of Hartford CT, across the street from Hartford Hospital and Connecticut Children’s. The IOL has a rich history in treatment and research in psychiatry, neuropsychiatry and neuropsychology – in fact, much of Brenda Milner’s work with HM occurred on our floor! Today, The Institute houses state-of-the-art centers for neuropsychiatric research and care.

**Training:** The robust psychology training department at HH/IOL currently includes eight predoctoral interns, ten postdoctoral fellows, and numerous practicum students. In accordance with Houston Conference guidelines, the fellow receives intensive training in the science and practice of clinical neuropsychology including opportunities for assessment, intervention, and research. We carry two postdoctoral fellows, starting on alternate years. Training differs across the two years in content, population, autonomy and to a degree, complexity, though the training program will flex to meet each fellow’s individual training needs.

**Year 1:** The first year of training emphasizes inpatient medical work, primarily at Hartford Hospital. The fellow will consult to departments throughout the hospital, completing **bedside evaluations** and providing same-day feedback to providers, patients, and families. Referrals from neurology and PM&R, including stroke, traumatic brain injury, and brain tumor, as well as referrals of medically complex patients from other hospital departments (e.g., internal medicine, cardiology), are common. Inpatient referrals typically seek to clarify cognitive deficits, aid in treatment and disposition planning, ascertain capacity, and/or aid in differential diagnosis in complex cases, such as those involving altered mental status of unknown etiology.
Our inpatient consultation service also provides coverage on an acute Inpatient Rehabilitation Unit. Neuropsychological consultative services provide baseline data and are used to generate appropriate treatment targets and recommendations. Patients seen during their rehab stay may be followed longitudinally.

The fellow will have opportunities to be involved in pre- and post-surgical neuropsychological assessments and participate in intraoperative cortical mapping during awake craniotomies and WADA evaluations.

The fellow will generally complete 2 adult outpatient evaluations weekly during the first year, from a broad array of referral sources, including weekly consultation to our Movement Disorders Clinic. They will also carry 1 or 2 therapy cases, generally focusing on individuals who are adjusting to a CNS insult.

**Year 2:** In the second year, the fellow is embedded in the Memory Disorders Center for 1 day weekly. There, they work collaboratively with an impressive multidisciplinary team, consisting of neuropsychology, geropsychiatry, neurology, social work, nursing, and specialists in neuroimaging, from both the IOL and Yale. Cases are complex and range from individuals with traditional amnestic disorders to those with AD variants, FTD, DLB, and neuropsychiatric deterioration due to medical and psychiatric causes. Case conferences are rich, enjoyable, collaborative, and provide wonderful opportunities for learning and professional development.

The fellow will also take on primary responsibility for neuropsychology referrals from our inpatient psychiatric hospital at the IOL. We respond to upwards of 100 referrals a year, with questions related to differential diagnosis (often of dementia), ongoing impact from an established CNS insult (often TBI or CVA), or to acquire a cognitive profile in individuals who have serious mental illnesses such as schizophrenia or bipolar disorder. Trainees find this rotation to be surprisingly enjoyable, in large part due to the complexity of the clinical picture.

During the second year, the fellow continues to see medical inpatients. They also continue conduct outpatient evaluations from a broad referral base, including the possibility of seeing patients undergoing evaluation for organ transplant candidacy, may continue to carry therapy cases, and may pursue elective experiences as well.

During this second year, the fellow takes on primary responsibility for seeing physicians through our Late Career Provider Assessment Program. All psychologists and physicians from the 7 HHC hospitals who are over 70 are seen annually for a neuropsych screen/comprehensive evaluation. Our trainees are involved with both steps in the process in what is a meaningful learning experience.
Research: The fellow is expected to actively participate in supervised research (2 hours reserved/protected weekly). Fellows are expected to present their research at a national or international conference as well as at our department research day.

Electives: Elective experiences are available with our thriving health psychology department, at Connecticut Children’s, Grace Webb School (a therapeutic school located on the IOL campus), and throughout the system. A strength of our program is our system – we are able to carve out unique opportunities based on trainees’ interests. This may include forensic exposure, testing and supervision in Spanish for bilingual applicants, tailored CBT or dynamic therapy, and work in schools including IEP meetings, among many other experiences.

Supervision: Supervision is a key component of training at HH/IOL. Fellows can expect detailed, developmentally appropriate supervision geared at increasing autonomy and competence while also emphasizing professional development and skill acquisition. Outpatient case work will generally involve a planning session before the patient arrives, check-ins (as needed) during the testing day, and an hour per case of direct supervision after testing is completed. Inpatient supervision involves case discussion at the start of the day, on-the-fly supervision between cases, face-to-face supervision regarding conceptualization and writing, and group supervision/case presentations weekly. The crux of supervision changes as the trainee develops, and supervisors regularly meet to ensure supervision is appropriate for stage of training and individual needs. Honing succinct and efficient report writing skills is an area of emphasis. Adapting report writing style to referral needs (i.e., inpatient medical, inpatient psychiatric, outpatient, consultation, etc.) is a key outcome. Successful trainees are comfortable working in multiple settings, with different (but overlapping) expectations.

Feedback is another major area of emphasis for the program. Contingent on patient and referral source needs, feedback will be provided for the majority of cases. In addition to direct feedback to referral sources, thoughtful feedback sessions with patients and families are designed to improve understanding of the clinical picture, with a focus on recommendations and attention to removing barriers to ongoing treatment.

Clinical Supervisors*/Staff:
Michelle Bobulinski, PsyD (Movement Disorders)
Jennifer Caruso, PsyD* (Primary, Movement Disorders)
Stacy Cruess, PhD (Director of Psychology)
Diana Kolcz, PsyD* (Psychological/neuropsychological outpatient/inpatient)
David Lovejoy, PsyD, ABN* (Neurosurgery)
Ginger Mills, PsyD (Movement Disorders)
Howard Oakes, PsyD, ABPP* (Neurosurgery including WADA and Awake Craniotomy)
Carolina Posada, PhD* (Primary, medical inpatient and outpatient)
Jasmen Rice, PsyD (Movement Disorders)
Geoffrey Schnirman, PhD (Movement Disorders)
Kristin Slyne, PsyD* (Primary, Memory Disorders Clinic and general outpatient)
Claire Varga, PsyD (Movement Disorders)
Kevin Young, PhD, ABPP* (Primary, inpatient neuropsychiatric & pediatric)

The department has >80 psychologists and trainees, updated staff information available on our website.

**Didactics:** Hartford Healthcare offers a rich spectrum of educational and academic activities including Psychiatry, Neurology, and Neurosurgery Grand Rounds, weekly Memory Disorders conferences, and monthly Brain Tumor Case Conferences.

The fellow attends weekly Neuropsychology Seminar with staff, invited guests and other trainees; focus is on key foundational principles as well as developing fact-finding skills. The Neuroanatomy Series is a 2 hour, bi-weekly seminar that runs for ~9 months. Neuropsychology Group Supervision is a weekly seminar in which the trainees practice concise case presentations and review challenging cases. Other departmental seminars include: Early Career Development Seminar (weekly – first year), Postdoc Case Conference (weekly – both years), Research (monthly – first year), Psychology Department Meeting (twice monthly). Several other seminars are available as electives.

**Teaching/Tiered Supervision Opportunities:** The fellow will also have the opportunity to teach in the clinical psychology internship program, be involved in training neurology and psychiatry residents and fellows, and supervise doctoral-level practicum students.

**Application:** Qualified applicants will have successfully completed a PhD or PsyD in clinical psychology including an APA/CPA approved internship. If the internship does not have a concentration or emphasis in neuropsychology, it will be incumbent upon the applicant to demonstrate comparable pre-internship experiences and coursework. Salary is competitive with full health benefits and paid time off (vacation/sick; conference release time) included. Some support is offered for dissemination of research and other conference participation.

**COVID-19:** As applicants are aware, the current pandemic has impacted some of our training experiences. While we have ongoing COVID-related research and clinical work, we also have had to alter/reduce some training exposures. We are happy to discuss this with applicants, and note that experiences may vary, to a degree, as we deal with the pandemic.

**This fellowship participates in the APPCN match process.**
The application materials must be received by **January 1, 2022.** Anticipated fellowship start date is August 31, 2022. Interviews will be virtual this year.
We request the following materials from applicants, via APPA CAS
(https://www.appic.org/Postdocs/Postdoctoral-Selection/APPA-CAS-Postdoc-Application-Information):

1. Cover letter
2. CV
3. 3 letters of recommendation
4. 2 sample reports demonstrating your skill sets in different settings
5. APPCN Match Number (if available)
6. Before starting the fellowship we will need confirmation from your program (or via transcript) that you have completed all requirements for graduation (or will by Sept 30, 2022).

Questions about the fellowship are welcomed and can be addressed via email to Dr. Kevin Young, PhD, ABPP at kevin.young@hhchealth.org, or consultation with our Administrative Associate, Ms. Paula Snedeker (860) 545-7167.