



Shepherd Center

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2021-2023

**Fellowship in Clinical Neuropsychology
(APPCN Program Code: 9942)**



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LETTER TO APPLICANTS

Dear Prospective Applicant:

We encourage you to submit an application to our Postdoctoral Neuropsychology Fellowship training program. Our program is a member of the Association of Postdoctoral Programs in Clinical Neuropsychology (APPCN) and follows the Houston Conference Guidelines for postdoctoral training in Clinical Neuropsychology. Our program provides the preparation, support, and mentorship needed to attain certification by the American Board of Professional Psychology in Clinical Neuropsychology.

It would be impossible to think about the upcoming recruitment season without consideration of COVID-19 and its national impact on healthcare. COVID-19 has led our field to embracing telepsychology on a national level and changed how we interact with patients. It has also changed how the internship year went for most, if not all of you. It will also change how we recruit for fellowship, as we will no longer be having the time-honored tradition of interviews at the International Neuropsychological Society's Conference in 2020. Shepherd Center is fortunate that we are currently seeing patients at our typical capacity, with limited service interruption, both in-person and via telepsychology. Didactics have been held via virtual formats, research has continued, and our current fellows are in the process of obtaining licensure. Although different, clinical work and training goes on.

We have two Neuropsychology fellowship positions at Shepherd Center and will be accepting applications for both positions for 2021-2023. Our fellows gain experience working with diverse clinical populations including closed and penetrating traumatic brain injury, cerebrovascular disorder (stroke, aneurysm, arteriovenous malformation), neoplasm, epilepsy, anoxia, toxic exposure, and infectious diseases. Fellows have an opportunity to assess patients both in the acute and chronic phases of their neurologic recovery using a wide range of neuropsychological tests and procedures. The training program is based in one of the premier rehabilitation facilities in the United States. Fellows gain experience in both neuropsychological/neurobehavioral assessment and rehabilitation psychology intervention and have ample opportunity to work with physiatrists; neurologists; speech, occupational, and physical therapists; and other allied health and rehabilitation professionals. Didactic experiences are provided and include seminars on classic neurobehavioral syndromes, neuroanatomy, neuroimaging, neuropsychological/neurological diagnosis, and other topics recommended by the Houston Conference Guidelines. Fellows are encouraged to complete rotations within Shepherd Center's numerous programs or at off-site rotations, such as those specializing in pediatric populations or in private practice settings. We follow a scientist-practitioner model of training and provide wide-ranging opportunities for fellows to be involved in research with faculty, as well as engage in independent research projects.

I would also like to inform future potential fellows that we will have two co-directors of training for the 2021-2023 academic year. Dr. Susan Shwartz, the current assistant training director, and Dr. Michelle Jackson will shepherd the fellowship into a new cohort year. They have already begun making changes to further improve and strengthen the clinical and professional training, including initiating a new diversity seminar for trainees.

After you have read about our training program, please feel free to contact us if you have further questions. We will be conducting videoconferencing interviews during the February North American meeting of the International Neuropsychological Society. We look forward to receiving your application.

Sincerely,

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MISSION

The Shepherd Center Clinical Neuropsychology Fellowship is a member of the Association of Postdoctoral Programs in Clinical Neuropsychology (APPCN) and provides postdoctoral training that conforms to the Houston Conference Guidelines on Specialty Education and Training in Clinical Neuropsychology (Hannay, Bieliauskas, Crosson, Hammeke, Hamsher, & Koffler, 1998). Our two-year fellowship program also trains and educates fellows in competencies that are necessary for state licensure, specialty practice in clinical neuropsychology, and eventual board certification by the American Board of Professional Psychology in Clinical Neuropsychology. Fellows function as members of the interdisciplinary treatment teams and provide assessment, treatment, and consultation services.

ABOUT SHEPHERD CENTER

Shepherd Center, located in Atlanta, Georgia, is a private, not-for-profit hospital specializing in medical treatment, research and rehabilitation for people with spinal cord injury, brain injury, multiple sclerosis, spine and chronic pain, and other neuromuscular conditions. Shepherd Center's mission is to help people with a temporary or permanent disability caused by injury or disease, rebuild their lives with hope, independence and dignity, advocating for their full inclusion in all aspects of community life while promoting safety and injury prevention.

Founded in 1975, Shepherd Center is consistently ranked by U.S. News & World Report among the top 10 rehabilitation hospitals in the nation. In its more than four decades, Shepherd Center has grown from a six-bed rehabilitation unit to a world-renowned, 152-bed hospital that treats more than 900 inpatients, 541 day program patients and more than 7,300 outpatients each year. The typical patient age range is 16-80 (although patients from 12 to 90-years-old are not uncommon). Shepherd Center's Acquired Brain Injury (ABI) and Spinal Cord Injury (SCI) Programs are accredited by both The Joint Commission and the Commission on Accreditation of Rehabilitation (CARF). Shepherd Center is also the largest of 14 SCI Model Systems of Care. Patients travel from across the nation – and even the globe – to Shepherd Center for its innovative brand of neurorehabilitation. <https://www.shepherd.org/about>.

Persons with brain injury also have access to numerous Shepherd Center support programs including education, information technology, telemedicine, assistive technology, recreational therapy (including evening and weekend community activities), vocational therapy, music therapy, seating clinic, and comprehensive driving evaluation. Although the Shepherd Center has been able to maintain a personal, family atmosphere, the services they provide are far-reaching. More than 8,000 patients are served annually.

ACQUIRED BRAIN INJURY (ABI) INPATIENT PROGRAM

The Acquired Brain Injury Inpatient Program is comprised of two separate units (30 beds and 28 beds) dedicated to patients with diagnoses including traumatic brain injury, non-traumatic brain injuries (e.g., anoxia, stroke), tumors, encephalitis, and neurodegenerative diseases, as well as patients with dual diagnosis (ABI and SCI).

These state-of-the art units maintain patient safety with closed circuit cameras, bed alarms, specialized safety beds, and a real time electronic monitoring system, all designed to meet the needs of people with ABI. Additionally, access to augmentative communication and assistive

technology is available. Within the ABI Unit there are two rehabilitation programs that address varying levels of patient's responsiveness and rehabilitation readiness.

The **Disorders of Consciousness (DOC) Program** is dedicated to persons who have various levels of disordered consciousness. Persons in the DOC program typically are not capable of actively participating in a demanding therapeutic program secondary to medical limitations or impaired consciousness. These individuals have a Rancho Level of II-III, or equivalent, and require considerable medical attention and nursing care. The DOC program medically manages patients' nutritional, pharmacological, respiratory, and neuromuscular needs, providing the best possible environment for emergence from coma. Family education and training is a vital objective. The average length of stay for persons in the DOC program is 3-5 weeks with extensions offered as appropriate. One such example occurs when patients emerge from DOC and are able to participate in the Acute ABI Rehabilitation Program prior to discharge. The fellow has a unique opportunity to work with individuals with disorders of consciousness, measuring arousal and attention to the environment with evidence-based assessments, monitoring mental status and cognition, and assessing the patient's rate of emergence and response to his or her environment.

The **Acute ABI Inpatient Rehabilitation Program** admits persons who have a Rancho level IV-VIII, or equivalent, and are actively able to participate in at least three hours of rehabilitative therapy per day. The Acute ABI Inpatient Rehabilitation Program provides comprehensive interdisciplinary care including neuropsychology, medical, nursing, physical therapy, occupational therapy, speech therapy, therapeutic recreation, assistive technology, seating and bracing, and when appropriate, vocational therapy. There are ten dedicated therapy teams that deliver interdisciplinary care. The average length of stay is 4-6 weeks. Following discharge from the Acute ABI Inpatient Rehabilitation program, persons with brain injury may be referred to one of several post-acute services available through the Shepherd Center Brain Injury System of Care.

Both the DOC and the Acute ABI Inpatient Rehabilitation Programs emphasize interdisciplinary care for both the person with a brain injury and their caregivers. Families receive education specific to their loved one's level of functioning and home care needs. All families participate in structured family education including formal education provided by neuropsychology fellows. A family counselor is also available to provide both individual and group support for family members of inpatients.

OUTPATIENT PROGRAMS

Outpatient services include a post-acute day and residential program, single-service outpatient therapies, outpatient neuropsychology clinic, long-term follow-up care, a program for post 9/11 veterans and active duty military members with mild TBI/PTSD (called the SHARE Military Initiative), and a complex concussion clinic.

SHEPHERD PATHWAYS

All fellows will spend one year in Shepherd's post-acute setting (Shepherd Pathways). Services at Shepherd Pathways fall under three types of programs: 1) a comprehensive community re-entry day program, 2) a residential program for brain injury survivors

ready to gain skills living in a home-like setting but who still need 24-hour support, and 3) single-service outpatient therapies. Shepherd Pathways has treatment teams comprised of case managers, physical therapists, occupational therapists, speech therapists, neuropsychologists, neuropsychology fellows, rehabilitation counselors, recreational therapists, registered nurses, and a vocational specialist. Music therapy, pet therapy, and yoga services are also regularly offered as adjunctive services.

OUTPATIENT NEUROPSYCHOLOGY CLINIC (main campus)

In Shepherd Center's Neuropsychology Outpatient Clinic, neuropsychologists perform comprehensive evaluations. Most referrals come from area neurologists and primary care physicians. Shepherd Center neurologists from the Andrew C. Carlos Multiple Sclerosis Institute also refer their patients to the outpatient clinic for assessment. Many referral questions are related to concerns associated with Alzheimer's disease and other neurodegenerative conditions, brain tumors, multiple sclerosis, epilepsy, stroke, and traumatic brain injury.

SHARE MILITARY INITIATIVE

SHARE (Shaping Hope And Recovery Excellence) is a day treatment program designed to promote optimal recovery for injured veterans and active duty military service members. The primary goals of the program are to 1) provide a continuum of rehabilitation evaluation and treatment services for those who have sustained brain injury, spinal cord injury, or blast injury, 2) assist, support, and educate service members and their families during recovery, and 3) prepare them for life beyond the program's rehabilitation treatments. Eligibility criteria include 1) history of mild to moderate TBI, 2) co-occurring diagnosis of behavioral health issues, such as anxiety, depression and/or post-traumatic stress disorder, and 3) commitment to rehabilitation.

COMPLEX CONCUSSION CLINIC (CCC)

Shepherd Center's Complex Concussion Clinic offers comprehensive assessment and treatment by a team of specialists in neurology, vestibular and balance disorders, athletic training, rehabilitation medicine, and neuropsychology. The Complex Concussion Clinic streamlines care by providing interdisciplinary resources at a single site. The patient evaluation includes cognitive, ocular-motor, vestibular and balance testing, and, when needed, advanced imaging using three-dimensional and high-resolution technology. Treatment duration varies based on individual needs, but typically involves outpatient visits for 8-12 weeks. The CCC serves adolescents as well as adults, in a 4,000-square-foot therapy space, which has state-of-the-art equipment for strengthening, athletic conditioning and balance, oculomotor training, and gait training. The clinic's extensive program provides recreation therapy, cognitive therapy, occupational therapy, psychological counseling, vestibular therapy for dizziness and balance, and athletic training.

MULTIPLE SCLEROSIS INSTITUTE

The Andrew C. Carlos Multiple Sclerosis Institute at Shepherd Center provides treatment to people with multiple sclerosis (MS), suspected MS, or related disorders. A range of supportive services and treatments are available, including neuropsychological

assessment, psychological counseling, educational programs, vocational services, nutritional counseling, therapeutic recreation and wellness programs.

OUR TRAINING PROGRAM

We will have two fellowship openings available for the 2021-2023 training year. One fellow will be placed in each major rotation for the first year. The fellows will switch major rotations for the second year (i.e., Fellow 1 will spend first year on Inpatient ABI Rotation/Outpatient Rotation, second year at Post-acute ABI rotation; Fellow 2 will spend first year on Post-acute ABI Rotation, second year at Inpatient ABI rotation/Outpatient Rotation). Minor rotations are available in the second year of fellowship.

Fellows are trained in assessment, intervention, consultation, teaching, supervision and research. Training in assessment emphasizes both neurobehavioral and neuropsychological examinations. Emphasis is placed on effective determination of relevant factors in the patient's history, rationale for test selection, administration and scoring of tests, interpretation of results and communication of findings in both oral and written formats. Fellows examine persons with acute neurologic disorders, as well as persons presenting with chronic sequelae of neurologic disorders. Inpatient and outpatient assessments vary from neurobehavioral examinations to comprehensive neuropsychological evaluations, depending upon the clinical rotation and supervisor. Supervision emphasizes integrated conceptualization of neuropsychological data, functional abilities, and biopsychosocial history. Each fellow receives supervision from multiple neuropsychologists and neurorehabilitation psychologists during each fellowship year.

Fellows also learn to establish specific intervention plans based on neuropsychological and biopsychosocial data obtained via clinical interview and assessment. Fellows implement and monitor the outcome of intervention plans. Interventions are evidence-based and include behavior management plans in cases of acute and post-acute neurologic disorders and more traditional psychotherapeutic approaches for persons with more chronic adjustment problems. Family/couples therapy is also a focus of the fellow's intervention training. Each fellow is expected to become competent in all aspects of intervention planning and implementation.

Fellows are trained in seeking consultation with medical staff members, health care teams, families, administrative systems, and persons with neurologic disorders. Fellows are integrally involved in clinical consultation in formal settings, such as medical rounds and team conferences. Fellows regularly provide consultative education to patients, families, rehabilitation therapists, case managers, and health care administrators.

Fellows also have ongoing responsibilities for research throughout the fellowship. They receive supervision in research design, execution, monitoring, and evaluation. In addition, fellows provide clinical supervision in both assessment and intervention of graduate students completing clinical neuropsychology practicum rotations under the direction of Program faculty, when available. The fellowship also offers numerous didactic opportunities.

Clinical service requirements vary depending upon the specific clinical rotation and supervisor. In general, fellows maintain a clinical case load consistent with APPCN and State of Georgia requirements for postdoctoral training necessary for licensure and board certification. Each

year, fellows participate in a minimum of 60% clinical activity that includes assessment, intervention, and consultation duties.

Each fellow's specific interests and training goals are considered while structuring rotations. All fellows complete rotations in both inpatient and outpatient settings with clinical responsibilities appropriate to the rotation. Collectively, fellows will have a balance of assessment, intervention, and consultation which reflects prototypic contemporary neuropsychological practice in both inpatient and outpatient settings.

PRIMARY ROTATIONS

Primary rotations are required. Fellows may also select one or more minor rotations during fellowship, based on interest and availability.

Inpatient ABI Rotation. Fellows participate in clinical, educational, and research components of the ABI Program. Clinical training focuses on inpatient neurorehabilitation of persons with cerebral trauma, stroke, anoxia, tumors, aneurysmal rupture, and other neurologic disorders. Fellows are exposed to a wide range of neuropathology and clinical syndromes seen in acute neurologic disorders. Fellows acquire skills and competencies in assessment, intervention, and consultation. Assessment competencies addressed during the rotation include test selection, administration, scoring and interpretation, report writing, and provision of feedback. Intervention competencies include formulation and execution of neurobehavioral treatment plans, individual and family therapy, and design and implementation of family and patient educational programs. Fellows also lead two patient adjustment groups per week and provide individual intervention as warranted.

Fellows are embedded within the interdisciplinary neurorehabilitation team which is comprised of a treating physician, case manager, speech therapist, physical therapist, occupational therapist, nursing, and other disciplines. Fellows engage in consultation with physicians, staff, patients, and families regarding cognitive, behavioral, and emotional issues. Fellows participate in medical rounds, multi-disciplinary team conferences, and educational programs during the rotation. Fellows may gain experience in supervision of graduate students and technical staff during the rotation. Fellows will have an opportunity to participate in pain management and collaborate with a pain psychologist as well as physiatrist on behavioral and pharmacologic pain interventions. *Primary Supervisors: Chelsea Day, Psy.D.; Michelle Jackson, Ph.D., ABPP-CN, Alex Alverson, Ph.D., Zac Yanis, Psy.D.*

Neuropsychology Outpatient Clinic Rotation. The outpatient neuropsychology rotation will run concurrently with the inpatient rotation, beginning in the third month of the inpatient rotation. The fellow will see one outpatient per week. Opportunity to rotate with supervisors in the outpatient clinic, MS Institute, and/or the CCC/SHARE clinic will be facilitated, pending fellow interests and clinic availability. The fellow will be involved in clinical interviews, neurobehavioral exams, test administration, report writing, neuroimaging review, and provision of feedback. *Primary Supervisors: Susan Shwartz, Ph.D., ABPP-CN (Outpatient Clinic), Gregory Brown, Psy.D. (CCC/SHARE), Robert Godsall, Ph.D. (MS Institute)*

Post-acute ABI Rotation. Fellows participate in clinical, educational and research components of the post-acute ABI program at Shepherd Pathways. Clinical training focuses

on post-acute rehabilitation of persons with a wide range of neurologic disorders. Fellows are exposed to chronic neuropsychological disorders and syndromes with the primary objective of developing a comprehensive understanding of the long-term sequelae of cognitive and emotional function following ABI. During the rotation, fellows acquire competencies in assessment, intervention, and consultation. Assessment competencies are similar to those skills addressed during the inpatient rotation. However, rather than focusing on diagnosis and treatment planning, the emphasis of outpatient assessments is aimed towards characterizing residual cognitive strengths and weaknesses, assessing capacity to return to work and/or school, decision-making abilities/capacity, medico-legal issues, and readiness to drive. Intervention competencies addressed during this rotation include individual, family, and group psychotherapy, provision of psychoeducation related to ABI and substance use, as well as design, execution, and monitoring of neurobehavioral plans.

The fellow's role is multi-faceted and includes leading educational and process groups, carrying a therapy caseload, completing neuropsychological evaluations, and creating behavior plans. Fellows consult with rehabilitation team members and physicians, and provide education regarding cognitive, behavioral and emotional consequences of ABI. Additionally, they participate in medical rounds, multi-disciplinary team conferences, and educational programs during the rotation. Supervision and teaching of technical staff and graduate students is expected during the outpatient rotation. *Primary Supervisors: Gary James, Psy.D., Kristian Nitsch, Ph.D.*

MINOR ROTATIONS: Below is a list of possible available minor rotations. Of note, additional opportunities for minor rotations may be available or developed based on individualized interest. Some minor rotations may not be available every year and some require state licensure for participation. Each fellow in satisfactory standing is expected to complete either two minor rotations [equivalent of one day per week for 3-month duration at rotation site] or one major rotation [equivalent of one day per week for 6-month duration at rotation site] during the second year.

Shepherd Center Minor Rotations

Multiple Sclerosis Rotation. Primary responsibilities involve neuropsychological assessment and therapeutic intervention with individuals with MS. Consultation opportunities are also available through participation in an interdisciplinary team, as well as through shadowing physicians and mid-level providers in rounding during clinic. Neuroimaging review with an MS neuro-radiologist specialist is also available. Fellows may also choose to participate in research and community programs provided by MS Center staff. *Primary Supervisor: Robert Godsall, Ph.D.*

Mild Traumatic Brain Injury (Concussion) Rotation. Fellows gain experience working with concussion injuries in both veteran and civilian populations. The SHARE Military Initiative at Shepherd Center is a comprehensive rehabilitation program that focuses on assessment and treatment for active duty or separated service members and veterans who have served in the U.S. military since September 11, 2001, sustained a mild to moderate brain injury, and have a co-occurring psychiatric diagnosis. Fellows will also have the opportunity to work with civilian populations in the Complex Concussion Clinic. This clinic offers

comprehensive assessment and treatment for individuals with persisting symptoms following concussion with a focus on return to play, return to learn, and return to work. Through this rotation, the fellow will gain a better understanding of concussion and contributing factors to persisting symptoms in military and civilian populations. The fellow will provide individual and group treatment, complete neuropsychological testing, provide education to clients and family members, provide education for the treatment team, and implement behavioral interventions as necessary. *Primary Supervisor: Gregory Brown, Psy.D.*

Dual Diagnosis Rotation. Fellows have the unique opportunity to conduct psychotherapy within a rehabilitation psychology model with individuals with dual ABI and SCI diagnoses. Fellows will experience the consultation model on both inpatient SCI units as well as the SCI Day Program. Fellows will follow some patients throughout their rehabilitation treatment as an integrated team member. For other cases, they will follow a consultation model, providing neuropsychological consultation and education to the treatment teams. Neuropsychological assessment of select dual diagnosis patients will also be expected. *Primary Supervisor: Katie Harris Rains, PsyD.*

Comprehensive Rehabilitation Unit (CRU) Rotation. Designed for patients who are admitted with conditions that occurred post-injury or disease, this program offers treatment to stabilize these conditions and help secure better future health. CRU also admits patients who have sustained a catastrophic injury resulting in an amputation, multiple trauma, spinal cord injury and acquired brain injury. Fellows are expected to provide psychotherapeutic interventions, work collaboratively within a multi-disciplinary team, and conduct neuropsychological evaluations. *Primary Supervisor: Sara Schleicher-Dilks, Ph.D.*

Off-Site Minor Rotations

Pediatric Neuropsychology Rotation. Fellows gain experience in assessment of children with various neurologic disorders. Fellows participate in programs provided by CHOA including brain mapping and WADA testing of children referred for epilepsy surgery. Goals for exposure and education will be discussed with interested fellows to ensure the training experience meets their needs. For example, past fellows have arranged to focus on Sports Neuropsychology with an emphasis on brief cognitive assessments and return-to-play protocols. Fellows may also participate in ongoing research. *Available Supervisors: Jacqueline Kiefel, Ph.D.; Thomas Burns, Psy.D., ABPP-CN*

Private Practice Rotation. Fellows gain experience in neuropsychological assessment and forensic/medico-legal evaluations within a busy private practice setting in the Atlanta community with a board certified neuropsychologist. *Primary Supervisor: John Sass, Ph.D., ABPP-CN*

RESEARCH ROTATIONS

There are numerous research studies being conducted within the ABI program and the Multiple Sclerosis (MS) Institute. Fellows have access to a pre-existing patient registry database for use in retrospective investigations. Additionally, fellows are exposed to ongoing faculty research and will participate in two year-long research rotations. There are countless possibilities for research using the archival database and joining existing projects within the hospital. Dr. Brick

Johnstone, ABI Research Director and fellow neuropsychologist, offers research support and biostatistician assistance. The Shepherd Center Noble Learning Resource Center (NLRC) is an excellent resource available to families, staff, and fellows with a librarian on staff to assist with literature searches and obtaining articles. Shepherd Center research department consultations are available by appointment, as needed. Access to REDCap for database management is also available. Interdisciplinary research is highly encouraged. Weekly meetings will involve project development, research article reviews/critiques, and ongoing project and database updates.

In the first year, fellows will be expected to co-author at least one project to be submitted for presentation at a national/international conference and ultimately submitted for publication. The fellows are encouraged to collaborate on projects, but each fellow should be first author on at least one project. The fellows will have a supervisory role over doctoral students conducting research within the department. Successful completion of the first research rotation will be determined by completion of the project write-up and submission requirement, participation in ongoing projects, and assistance in managing the department's database.

The second-year research rotation will involve continued tiered supervision of the graduate students and management of the department's neuropsychology database. It is expected that fellows, at minimum, submit a manuscript for publication in the second year. The manuscript is not required to have been accepted by the time the fellow completes their training to meet this requirement. They are also expected to submit at least one other project, such as a poster, paper presentation, or manuscript to a peer-reviewed journal. Manuscript publication can include write-up and submission of the poster presentation from the first research rotation. Successful completion of the second rotation will be determined by ongoing management of the patient registry database, tiered supervision of graduate students, and completion of at least two projects, as described above.

DIDACTIC OPPORTUNITIES

Didactic opportunities expand fellows' existing knowledge base in neuroanatomy, neuropathology, and the neurosciences, and foster the fellow's development as a neuropsychology scientist-practitioner. Through didactic and experiential training, the Fellow develops a strong understanding of brain-behavior relationships and furthers his or her knowledge in basic psychological principles, research methodology, psychometric issues, and general clinical psychology, as well as practice and professional issues. A variety of didactic training opportunities are available to the fellow including:

1. **Neuropsychology Seminar.** Fellows and faculty regularly present on foundational neuropsychological topics, present relevant cases, and discuss and critique neuropsychological literature.
2. **Neuroimaging Seminar.** There will be a biweekly neuroimaging seminar that fellows are required to attend. Seminar is optional for practicum students. Neuroimaging seminar will be held at the Shepherd Center every other Wednesday from 5-6pm, after the department case conference/seminar. Through review of imaging, seminar will cover basic neuroanatomy, neuropathology associated with various disorders and presentations, and neuroimaging journal club. Fellows will be involved in review and critique of neuroimaging journal articles and neuroimaging review of patient brain MRI and CT scans. The seminar will be co-led by Dr. Robbins and adjunct training faculty member, Dr. Kirk Bryant.

3. **Diversity Seminar.** The diversity seminar meets monthly. The objective of the seminar is to provide trainees with the sensitivity, awareness, knowledge, and skills for multiculturally competent clinical care.
4. **Professional Development.** Fellows will meet with faculty to discuss issues pertaining to career development, job search and experience, and other matters of relevance to development as an independent clinician. Fellows will also meet with the training director monthly to review professional development scenarios, discuss adjustment to fellowship, review any concerns, and provide feedback. Ongoing feedback will also be provided to fellows to support them throughout the year.
5. **Neuroanatomy Course.** In the summer following the first year of training, the fellows attend an intensive neuroanatomy course (“Neuroanatomical Dissection: Human Brain and Spinal Cord”) at Marquette University in Milwaukee, WI. All associated travel and course fees are covered by Shepherd Center.
6. **Diversity Sequence.** Attention to diversity and multicultural factors is actively encouraged and supported throughout all activities. Specific issues of import to the fellows and those that are relevant to our work at the Shepherd Center are highlighted during the Diversity Sequence over the summer months. Guest speakers from the community will meet with fellows and staff to discuss local history, their work with particular groups, or important information to know when working with specific cultural groups (e.g., religious groups, individuals with particular disabilities, ethnic/racial groups, immigration status, clinical groups, etc.)
7. **Morehouse School of Medicine.** Fellows have the opportunity to attend classes and laboratories associated with the Medical Neurobiology course at the Morehouse School of Medicine. This course is typically offered from March through May. Fellows are encouraged to review the course syllabus once it is available and to select lectures and labs that are of interest and work with their schedule at Shepherd Center. They can review their choices with their supervisor for final approval. There is no limit to the number of classes/labs that the fellows can attend, but prior approval is required. Topics include but are not limited to gross anatomy of the brain, meninges, brainstem, spinal cord, cranial nerves, hypothalamus, and applied anatomy. It is a medical course, so the focus is primarily neuroanatomy and neuropathology with some emphasis on implications for functional presentation and treatment.
8. **Additional opportunities.** Fellows also have the opportunity to attend various grand rounds, such as neurology and neuroradiology grand rounds at Children’s Healthcare of Atlanta (CHOA). There is ample opportunity to attend local workshops and national conferences. In order to acclimate and prepare fellows for the ABPP/ABCN exam, fellows will also take a practice written exam and participate in fact finding exercises.

SUPERVISION

Supervision is provided in all aspects of the fellow’s clinical, research and teaching activities. All supervising faculty are licensed in Georgia. All fellows are assigned a primary supervisor for each clinical rotation; however, day-to-day supervisory responsibility is rotated among the faculty so that the fellow is exposed to different expertise and professional styles. Each week, the fellow will receive one to two hours of individual supervision, in addition to approximately two hours of group supervision obtained through clinical and didactic activities. Additional informal supervision regularly occurs as the fellow manages the demands of clinical services. Styles and modes of supervision vary according to setting. The fellow receives supervision on case

presentations, performance in team meetings and seminars, consultative/supervisory work, writing skills, and overall professional conduct. Professional development, career planning, and interviewing skills are also addressed during supervisory sessions. By the completion of the fellowship, all fellows will have more than the requisite 1,500 hours of supervised work experience needed for licensure in Georgia and all other jurisdictions of the Association of State and Provincial Psychology Boards. In addition, all fellows are required to sit for the written part of the national licensure examination, the Examination for Professional Practice in Psychology (EPPP), during the two-year fellowship. It is expected that the EPPP Part 1 will be completed by December of the second year of fellowship.

At the beginning of each rotation, fellows meet with their supervisors to discuss clinical responsibilities and supervisor/fellow expectations. Fellows receive feedback on performance during weekly supervision sessions. Fellows have formal evaluations twice a training year (mid-year and end of year). At the conclusion of each rotation, fellows receive written feedback on their performance. If deficiencies are noted, the supervisor and fellow jointly develop a remediation plan with oversight and input from the Training Director, for these deficiencies. In the event formal disciplinary action is warranted, appeals regarding performance deficiencies must be submitted in writing and will only be considered by the director of the fellowship after appropriate attempts to resolve disagreements have been undertaken.

DIVERSITY

The Shepherd Center is deeply committed to the training of future neuropsychologists from a culturally competent framework and fostering an environment that is highly sensitive to and appreciative of all aspects of diversity. We believe that increased self-awareness and appreciation for other viewpoints and cultures make psychologists more effective practitioners, scientists, supervisors, and teachers. For this reason, sensitivity to individual differences and cultural humility are integral aspects of our training philosophy.

Our overall objective is to provide residents with the awareness, knowledge, and skills to provide clinical services across cultures and diverse settings. Training is focused on integration of diversity related knowledge into clinical services. A specific emphasis is placed on incorporating prior/current diversity related concepts and knowledge into evidence-based assessment and intervention practices. A diversity didactic is offered monthly to support trainees in self-reflection, learning, and increasing awareness of diversity in all its forms. All staff strive to incorporate diversity throughout didactics, clinical care, supervision, and research.

SPECIALTY TRAINING CRITERIA

Shepherd Center's postdoctoral fellowship program abides by the structural and programmatic standards identified in the Houston Conference Guidelines. Below are these assurances and how our program addresses each point.

1. The faculty is comprised of a board-certified clinical neuropsychologist and other professional psychologists.

As of the latest update to this brochure, there are three board certified clinical neuropsychologists on staff (two boarded in clinical neuropsychology and one boarded in rehabilitation psychology; the latter psychologist is trained as a clinical neuropsychologist, per the Houston Conference Guidelines).

2. Training is provided at a fixed site or on formally affiliated and geographically proximate training sites, with primarily on-site supervision.

All faculty are on-site and provide in-person supervision. All major rotations and most minor rotations are also at the Shepherd Center main hospital or nearby locations that house core Shepherd programs. While COVID-19 precautions are in place, supervision may be offered via online platforms, as allowed by APPCN guidelines.

3. There is access to clinical services and training programs in medical specialties and allied professions.

The residency is housed in a rehabilitation hospital where medical services are provided throughout the workday and/or at all hours. The hospital employs numerous medical providers (physiatrists, neurologists, and consultants in psychiatry, gastroenterology, urology, pulmonology, reconstructive surgery, and more) and allied professions (psychologists, LPCs/LCSWs, speech therapists, occupational and physical therapists, and more). Fellows work closely with these professionals and learn from them in formal and informal ways.

4. There are interactions with other residents in medical specialties and allied professions, if not other residents in clinical neuropsychology.

Our fellowship recruits two fellows each year, and if a position is not filled, we actively recruit in the off-year to ensure that the resident always has a co-fellow. In addition to the Shepherd Center fellowship cohort, residents are encouraged to participate in available didactics at other sites, such as Children’s Healthcare of Atlanta.

5. Each resident spends a significant percentage of time in clinical service, clinical research, and educational activities, appropriate to the individual resident's training needs.

The fellow spends the majority of their time engaging in clinical services, followed by educational activities, research, and consultation. Each fellow is directly involved in determining the focus of their work and education in an effort to address personal goals and outcomes for postdoctoral training, as long as they are consistent with and meet the minimum core competencies required for specialty training in clinical neuropsychology.

COMPETENCIES

The fellow will be trained and evaluated in the competencies delineated by Smith (2019), which details the education and training in clinical neuropsychology and describes 16 competency domains. As noted, clinical neuropsychologists are not expected to utilize or implement all competency skills equally over the course of their career, but initial demonstration of competence will be assessed prior to completion of the residency. The 10 competencies are listed below. Please refer to Smith (2019; Table 12) for details on these competencies and how they are applied in practice.

Integration of science and Practice	Assessment
Ethical and Legal Standards/Policy	Intervention
Individual and Cultural Diversity	Research
Professional Identity and Relationships/Self-	Teaching/Supervision/Mentorship

Reflective Practice	
Interdisciplinary Systems/Consultation	Management/Administration

Shepherd Center provides ample opportunities to develop and apply each of these competencies, particularly given the multidisciplinary team models and focus on patient- and family-centered care. The balance among assessment, intervention, and consultation is particularly crucial to our setting. Research is an important component of the training, and opportunities for supervision, teaching, and learning of management/administration processes are also integrated throughout the educational program provided by the fellowship. Continuous feedback and guidance are offered to the fellows to ensure they are developing into a strong professional who advocates for themselves and their discipline in multidisciplinary settings and on the local, regional, and national level.

COVID-19 Response

COVID-19 has dramatically altered clinical and research practice for many institutions. Fortunately, Shepherd Center has been quick to respond in creating an environment that is safe for all patients, families, and staff while continuing to meet clinical and training needs. Fellows are provided with KN95 face masks, eye shields (e.g., goggles), and hand sanitizer. Modifications have been made to the testing environment to ensure safety, as well, including use of a plexiglass shield. Didactics have largely been moved to online platforms, which has allowed for greater diversity of expert guest speakers from other institutions.

Shepherd Center’s inpatient ABI program continues to operate at full capacity and Shepherd Pathways’ day program maintains a steady census of patients, with modifications to scheduling to reduce the risk of infections, such as canceling groups and arranging schedules such that patients are not eating on-site. Psychology has been able to offer two Adjustment Groups with proper social distancing protocols. Telehealth services are readily available for patient psychotherapy, family counseling and education, and feedback sessions.

Given the large clinical database and continued clinical practice, research has continued without break. Our fellows are using archival data as well as amending standard practice to include new measures to allow for novel research.

FELLOWSHIP FACULTY

Alex Alverson, Ph.D joined Shepherd Center as a clinical neuropsychologist in 2019. Dr. Alverson earned a Bachelor of Science in Psychology from Georgia Tech in 2009, and in 2017, earned his doctorate in Clinical Psychology from the University of Houston in Houston, TX. He attended the University of Alabama Birmingham – Birmingham VA Medical Center Consortium for his clinical internship. He then completed a two-year postdoctoral fellowship in Neuropsychology at the South Texas Veterans Health Care System in San Antonio, TX, which included rotations in inpatient and outpatient polytrauma rehabilitation, the VA Neuropsychology Outpatient Clinic, the San Antonio Military Medical Center, and University of Texas Health Sciences Center. Dr. Alverson serves as a neuropsychologist on the inpatient acquired brain injury unit and conducts outpatient neuropsychological evaluations in the Neuropsychology Outpatient Clinic, as well as serving on the stroke committee.

Gregory S. Brown, Psy.D., is the supervising neuropsychologist for the SHARE Military Initiative and Complex Concussion Clinic. He joined the Neuropsychology Department in January 2018 as the clinical neuropsychologist for the SHARE Military Initiative and the Complex Concussion Clinic. Dr. Brown earned his doctoral degree in 2014 from the Georgia School of Professional Psychology. He completed his internship at the Central Arkansas VA with a concentration in Neuropsychology and a two-year APPCN postdoctoral fellowship in Neuropsychology at Shepherd Center. Prior to his return to Shepherd Center, Dr. Brown worked as a neuropsychologist at Madigan Army Medical Center in Tacoma, WA in the Army Intrepid Spirit and Traumatic Brain Injury Program. His current clinical focus is neuropsychological assessment and intervention of mild traumatic brain injury in both veteran and civilian populations. Dr. Brown also serves as adjunct faculty in the psychology graduate program at the Georgia School of Professional Psychology where he has taught since 2015. He has also served as the team neuropsychologist for the Atlanta United soccer team since January 2019.

Chelsea Day, Psy.D. is a clinical neuropsychologist and the inpatient Acquired Brain Injury Neuropsychology Supervisor. Dr. Day joined the Shepherd Center team in 2010, where she completed her two-year postdoctoral fellowship in Clinical Neuropsychology. She serves as the neuropsychologist for three teams on the inpatient acquired brain injury unit, where she conducts neuropsychological evaluations, monitors neurobehavioral presentation as well as develops and implements behavioral management strategies and provides psychoeducation regarding acquired brain injury to patients and families. She also conducts outpatient neuropsychological evaluations in the Neuropsychology Outpatient Clinic. Dr. Day serves as one of the supervisors for Shepherd Center's APPCN clinical neuropsychology fellowship program. She serves on the Disorders of Consciousness and Sexuality and Intimacy committees at Shepherd Center. She greatly values a multi-disciplinary approach to rehabilitation interventions.

Rob Godsall, Ph.D. has been part of the Shepherd Center team since 1997 and is now the Senior Clinical Neuropsychologist serving the Andrew C. Carlos MS Institute of Shepherd Center. Dr. Godsall received his doctorate in clinical psychology from Georgia State University, where his specialty interests were clinical neuropsychology and family systems therapy. Dr. Godsall completed his clinical internship at the Center for Behavioral Medicine of the University of Missouri-Kansas City School of Medicine, where he completed rotations in forensic psychology and neuropsychology. He then completed a two-year postdoctoral fellowship in neuropsychology in the behavioral neurology section of the neurology department at the Emory School of Medicine. Along with his work in neuropsychology, Dr. Godsall continues to pursue his interests in the impact of family systems on the course of neurological disorders. Dr. Godsall served on the Professional Advisory Board for the Georgia chapter of Epilepsy Foundation for 14 years, including chairman, and formerly served on the Health Advisory Committee for the National MS Society, Georgia chapter.

Katie Harris, Psy.D. is a neuropsychologist specializing in assessment and intervention with rehabilitation populations. She obtained her doctoral degree in clinical psychology with an emphasis in neuropsychology from Roosevelt University in Chicago. Dr. Harris completed her internship at VA Northern California Healthcare System in the neuropsychology track. She then

completed a two-year postdoctoral fellowship in rehabilitation neuropsychology at Johns Hopkins Hospital in the Department of Physical Medicine and Rehabilitation. Dr. Harris joined the Shepherd Center psychology department (Spinal Cord Injury Unit) in 2019, where she collaborates with a team of healthcare providers to support patients' cognitive and emotional wellness.

Laurie Nash, Ph.D., ABPP-RP, is Director of Psychology at Shepherd Center. Dr. Nash is board certified in Rehabilitation Psychology by the American Board of Professional Psychology. Clinically, she serves as both a rehabilitation psychologist and neuropsychologist for SCI programs at Shepherd Center. She also teaches and maintains a small private practice in Atlanta. Dr. Nash completed her internship at Mt. Sinai Medical Center, New York, and her 2-year postdoctoral fellowship in Neuropsychology at the Shepherd Center. She is active in Division 22 of the APA. Interests include the impact of depression and cognitive impairment on recovery from injury, the effects of injury on family functioning, and post-traumatic growth.

Michelle Jackson, Ph.D., ABPP-CN will serve as Co-Director of the fellowship beginning with the 2021-2023 cohort. She joined Shepherd Center as a clinical neuropsychologist in 2016. Dr. Jackson completed her undergraduate degree in psychology at Loyola University in New Orleans, LA and earned her doctorate in Clinical Psychology in 2014 from Suffolk University in Boston, MA. She completed her clinical internship at the University of Mississippi Medical Center-Jackson VAMC Consortium. She then completed her two-year APPCN postdoctoral fellowship in Neuropsychology at Methodist Rehabilitation Center in Jackson, MS, where she provided neuropsychological assessment and neurobehavioral treatment for adolescents and adults with a variety of neurological illnesses and insults, including stroke and traumatic brain injury. At Shepherd Center, she is a neuropsychologist for three teams on the inpatient acquired brain injury unit and conducts outpatient neuropsychological evaluations in the Neuropsychology Outpatient Clinic. She is co-chair of the Behavior Committee. Dr. Jackson also serves as one of the supervisors for Shepherd Center's APPCN clinical neuropsychology fellowship program. Dr. Jackson is originally from Trinidad.

Gary A. James, Psy.D., current Training Director. He joined Shepherd Center in 2004. He is the Neuropsychology Supervisor at Shepherd Pathways, Shepherd Center's post-acute brain injury program, as well as the Outpatient Clinic. Dr. James graduated with a Bachelor of Science in Psychology from McGill University in Montreal, Canada, and earned his doctorate in Clinical Psychology from Baylor University in 2002. He had previously served as adjunct faculty in psychology graduate programs at Argosy University (Atlanta campus) where he had taught from 2006 through 2019. Dr. James provides neuropsychological assessment and neurobehavioral treatment for adolescents and adults with a range of neurologic illnesses and also provides treatment (primarily individualized, couples, and group interventions). He serves on the Traumatic Brain Injury Committee at Shepherd Pathways.

Kristian Nitsch, Ph.D. is a neuropsychologist specializing in the assessment and treatment of complex medical and rehabilitation populations, with a focus on individuals with acquired brain injury. Dr. Nitsch completed his doctoral degree in clinical psychology with an emphasis in rehabilitation psychology at the Illinois Institute of Technology in Chicago. He completed internship at the Charleston Consortium, comprised of the Ralph H. Johnson VA and Medical University of South Carolina, in the clinical neuropsychology track. Following internship, Dr.

Nitsch completed a two-year post-doctoral fellowship in rehabilitation neuropsychology at the Johns Hopkins University School of Medicine in the Department of Physical Medicine and Rehabilitation. Dr. Nitsch joined the Shepherd Center Psychology Department (Shepherd Pathways post-acute acquired brain injury program) in 2020, where he collaborates with an interdisciplinary team of health care providers conducting neuropsychological evaluations and individual psychotherapy to support patients' cognitive and emotional wellbeing.

Sara Schleicher-Dilks, Ph.D. earned her undergraduate degree in psychology from the College of the Holy Cross in Worcester, MA. After receiving her bachelor's degree, she worked as a cognitive remediator for individuals with traumatic and acquired brain injury in Queens, NY. She completed a one-year APA-approved clinical internship with a neuropsychology concentration at the Albuquerque VA in New Mexico. She earned her Ph.D. in clinical psychology with a concentration in clinical neuropsychology from Nova Southeastern University Ft. Lauderdale, FL in 2015. Dr. Schleicher-Dilks completed a 2-year formal post-doctoral fellowship at MedStar National Rehabilitation Hospital in Washington D.C., where she completed rotations on the inpatient brain injury and stroke units, brain injury day treatment program, concussion clinic, outpatient neuropsychological assessment clinic, and outpatient psychotherapy clinic. She joined Shepherd Center in September 2017 as part of the Comprehensive Rehabilitation Unit, where she provides neuropsychological services to individuals with brain injury, spinal cord injury, and other complex neurologic injuries.

Susan Shwartz, Ph.D., ABPP-CN currently serves as the Assistant Training Director for the fellowship and will transition to being the Co-Director for the 2021-2023 fellowship years. She joined Shepherd Center in 2016 as a clinical neuropsychologist at Shepherd Pathways, Shepherd Center's post-acute brain injury program. She served as a clinical supervisor for fellows and students at Pathways until September 2020 when she transitioned to the Outpatient Clinic. Dr. Shwartz graduated with a Bachelor of Science in Psychology from the University of Maryland, College Park, and earned her masters and doctorate degrees from Georgia State University's joint Clinical Psychology and Neuropsychology/Behavioral Neurosciences program in 2010 and 2014, respectively. She completed her clinical internship in the neuropsychology track at the Minneapolis VA Health Care System and her APPCN postdoctoral fellowship in neuropsychology at the Memphis VA Medical Center. Dr. Shwartz serves on the Stroke and Outpatient committees at Pathways, as well as the Diversity and Inclusion Task Force.

Zac Yanis, Jr., Psy.D. is a clinical neuropsychologist for Shepherd Center's inpatient Brain Injury Rehabilitation Program. He conducts neuropsychological assessments and collaborates with each patient's multidisciplinary treatment team to provide cognitive, emotional and neurobehavioral interventions. Prior to joining Shepherd Center full time, Dr. Yanis worked as independent clinician at Cognitive Rehabilitation of Georgia (CRG), a private group practice located in Decatur. He also serves as an adjunct professor in the Department of Clinical Medical Psychology at Mercer University, Atlanta. He completed his second year of neuropsychology fellowship at CRG, where his training was consistent with the Houston Conference Guidelines for specialty training in clinical neuropsychology, including direct supervision by a board-certified neuropsychologist (ABPP/CN). Prior to that, he completed one year of an APPCN neuropsychology fellowship in the Acquired Brain Injury Inpatient Unit at the Shepherd Center, an APA-accredited predoctoral neuropsychology internship at the Coatesville VAMC, and multiple neuropsychology externships through Emory's Center for Rehabilitation Medicine,

Shepherd Pathways, Restore Neurobehavioral Center, and CRG. He completed his graduate training at the Georgia School of Professional Psychology in Atlanta. Dr. Yanis serves on the TBI Committee.

Associate Faculty

The following faculty work at external institutions and in private practice and serve as supervisors on minor rotations or lead seminars.

Kirk Bryant, Ph.D. completed his BA at Ohio University and his MS at Cleveland State before receiving his PhD in Clinical Psychology with a concentration in neuropsychology at Saint Louis University. He completed a neuropsychology internship at the Missouri Health Sciences Psychology Consortium. Following this, he completed an APPCN fellowship at West Virginia University (WVU) School of Medicine, where he stayed on as a faculty member for two years. Currently, he is a neuropsychologist at WellStar Medical Group Psychological Services with an adult focus and a general interest in brain-behavior relationships in diverse neurological conditions. Dr. Bryant co-leads the Neuroimaging Seminar with Dr. Robbins.

Thomas Burns, Psy.D. ABPP-CN is Director of Neuropsychology, Children's Healthcare of Atlanta (CHOA) and Associate Clinical Professor in the Department of Physical Medicine and Rehabilitation at Emory University School of Medicine. Dr. Burns directs the Neuropsychology Service at CHOA and specializes in cortical mapping and WADA testing with children referred for epilepsy surgery, traumatic brain injury, concussion, and birth trauma. Dr. Burns serves as adjunct faculty, providing didactic seminars and serving as the supervisor for the pediatric neuropsychology minor rotation.

Daniel Drane, Ph.D., ABPP-CN Assistant Professor in the Departments of Neurology and Pediatrics. He received his Ph.D. in Clinical Psychology from Fuller Graduate School of Psychology in 1994, completed his residency in Neuropsychology at the University of Alabama at Birmingham, and his postdoctoral fellowship in Neuropsychology at the Medical College of Georgia. Dr. Drane is board certified in Clinical Neuropsychology through the American Board of Professional Psychology (ABPP). In addition to his Emory University appointment, he is an Affiliate Associate Professor position at the University of Washington School of Medicine in Seattle, where he served as the Director of the Epilepsy Neuropsychology Program from 2001-2007. He is a Fellow in the National Academy of Neuropsychology (NAN). Dr. Drane serves as adjunct faculty, providing didactic seminars and optional external didactic training opportunities, such as observations of WADA and stimulation mapping of language and other functions, via the Neuropsychology Program in the Department of Neurology at Emory University School of Medicine.

Jessica Robbins, Ph.D. is currently employed at WellStar and has been developing their inpatient program. She previously worked at Shepherd Center as a clinical neuropsychologist from 2016 through 2020. Dr. Robbins received her undergraduate degree from Samford University. She earned a MS degree from Mississippi State University before receiving her PhD in Clinical Psychology with a concentration in neuropsychology from Nova Southeastern University. As a Birmingham VAMC funded intern, she completed a clinical psychology internship with an emphasis in neuropsychology at the University of Alabama at Birmingham Psychology

Training Consortium. Next, Dr. Robbins finished an APPCN fellowship in neuropsychology at West Virginia University School of Medicine. Dr. Robbins serves as the co-leader of the Neuroimaging Seminar.

John Sass, Ph.D., ABPP-CN maintains a private practice in Decatur, GA at Cognitive Rehabilitation of Georgia. Dr. Sass received his Ph.D. from Georgia State University specializing in neuropsychology. He completed internship training in neuropsychology at Long Island Jewish Medical Center in New York and conducted research in stroke rehabilitation at the Emory Center for Rehabilitation Medicine in Atlanta. He additionally is the consulting neuropsychologist for the Restore Neurobehavioral Program in Atlanta and has served in this role since 1995.

Dr. Sass has also been actively involved in the brain injury community having served as a board member of the Brain Injury Association of Georgia and Chair of the Professional Provider Council. He has conducted numerous educational and in-service training seminars in the area of brain injury and rehabilitation. He served on a select committee of experts to develop the official brochure on mild TBI for the Centers for Disease Control. He believes in the need for evidence-based treatment outcomes in neuropsychological rehabilitation as well as an emphasis on brain injury prevention through continuing education.

Associated Shepherd Center Staff

The fellow will have the opportunity to interact with numerous physicians. Below is a list of the primary psychiatrists with whom they will work on their major rotations.

Andrew Dennison, M.D. is the medical director of Acquired Brain Injury Program at Shepherd Center. He is a board-certified physical medicine and rehabilitation physician with additional subspecialty board certification in brain injury medicine. Dr. Dennison joined Shepherd Center's medical staff in July 2011 as a staff psychiatrist. He treats patients who are recovering from traumatic or non-traumatic brain injuries, as well as people who have had complications from a stroke or tumor. Dr. Dennison also currently serves as the vice chair of the Brain and Spinal Injury Trust Fund Commission. Dr. Dennison received his bachelor's degree from Emory University in 2000 and his medical degree from the University of Pennsylvania in 2004. He completed his residency in physical medicine and rehabilitation at Baylor College of Medicine/University of Texas-Houston PM&R Alliance in 2008. Following his residency, Dr. Dennison, completed a fellowship in traumatic brain injury at Carolinas Rehabilitation in Charlotte, N.C.

Payal Fadia, M.D. is the Medical Director of the Post-Acute Acquired Brain Injury Program at Shepherd Pathways. She is a board-certified physical medicine and rehabilitation physician with additional subspecialty board certification in brain injury medicine. She joined Shepherd Center as a psychiatrist in Shepherd's Acquired Brain Injury and Neurospecialty units in 2008. Before joining Shepherd Center, Dr. Fadia managed the acute rehabilitation inpatient service at Norwalk Hospital in Connecticut. Dr. Fadia earned an undergraduate degree in biochemistry and microbiology from the University of Florida, then went on to medical school at St. Georges University School of Medicine in Grenada, West Indies. She completed her residency in physical medicine and rehabilitation at Baylor College of Medicine and a fellowship in traumatic brain injury/stroke rehabilitation and spasticity management at the University of Texas-Houston.

Ashley Johnson, MD. a staff physiatrist at Shepherd Center. She joined the medical staff in September of 2020 and leads four interdisciplinary treatment teams in Shepherd Center's inpatient Brain Injury Rehabilitation Program. Dr. Johnson obtained her medical degree at the University of Rochester School of Medicine and Dentistry in Rochester, New York. She did her post-graduate training in physical medicine and rehabilitation (PM&R) at Temple University Hospital in Philadelphia, Pennsylvania. She also completed a brain injury medicine fellowship at MossRehab at Albert Einstein Medical Center, also in Philadelphia.

Ford Vox, M.D., is a staff physiatrist in the Brain Injury Program. He serves as the medical director of the Disorders of Consciousness Program and is the chair of the Medical Ethics Committee. Dr. Vox is board certified in Physical Medicine and Rehabilitation (PM&R) and Brain Injury Medicine. He completed his residency in PM&R at Washington University in St. Louis and his fellowship in brain injury medicine at Boston University. He earned his doctorate in medicine from the University of Alabama at Birmingham School of Medicine. Dr. Vox treats inpatients in the Shepherd Center Brain Injury Rehabilitation Program. Dr. Vox leads three interdisciplinary teams on the Acquired Brain Injury Unit. As a journalist and commentator Dr. Vox is a contributor for CNN and the medical analyst for Atlanta NPR's station WABE 90.1. He writes about the practice of medicine, the health care industry, health care policy and medical science. Dr. Vox also hosts RehabCast, the official monthly podcast of the Archives of Physical Medicine and Rehabilitation.

EXIT CRITERIA

Successful completion of the training program is reflected by the following accomplishments, as delineated by the Houston Conference Guidelines:

1. Fellow demonstrates advanced skill in the neuropsychological evaluation, treatment and consultation to patients and professionals sufficient to practice on an independent basis.
2. Fellow demonstrates advanced understanding of brain-behavior relationships.
3. Fellow demonstrates sufficient scholarly activity, e.g., submission of a study or literature review for publication, presentation, submission of a grant proposal or outcome assessment.
4. A formal evaluation of competency in the exit criteria 1 through 3 shall occur in the residency program.
5. Fellow is eligible for licensure in the state/province in which he or she intends to practice.
6. Eligibility for board certification in clinical neuropsychology by the American Board of Professional Psychology.

STIPEND

Stipends are based on the NIH-fellowship rates that calculate years of post graduate experience. Clinical neuropsychology fellows are paid a full-time stipend of \$52, 704 for year one and \$53, 076 for year two of the program, provided in biweekly payments. Fellows are eligible for comprehensive health, dental and vision insurance, as well as basic life and disability insurance. Fellows receive 24 days of paid time off per year. Professional development funds are available for conference presentations and travel for educational purposes. Fellows are also given three educational days per year to attend conferences, in addition to an educational day to take the EPPP. Fellows will be reimbursed for EPPP test fee once they successfully pass the exam during

fellowship range of dates. Other benefits include free parking, access to dictation software, full access to medical library services, and numerous perks (e.g., discounts) in the community.

METROPOLITAN ATLANTA

With a population of approximately 5.9 million, the Atlanta metropolitan area manages to be urban while retaining southern charm and hospitality. The city offers numerous entertainment and cultural attractions, boasting many sports teams, museums, professional theater, a symphony and ballet. Atlanta's restaurants offer cuisine ranging in style and taste from "Southern Georgia" to "South of France" (foodies will not be disappointed). Sports enthusiasts will find opportunities to enjoy professional baseball, football, basketball, and soccer. It is a sprawling city with no natural boundaries; therefore, over 8,000 square miles encompass what is known as Atlanta that includes 28 counties and 140 governing municipalities. This space allows for easy access to outdoor recreation, including golf, hiking, and canoeing. Lake Lanier lies 45 miles northeast, Lake Allatoona is 35 miles northwest, Callaway Gardens is 80 miles south, and the North Georgia Mountains, which include the southern end of the Appalachian Trail, are 70 miles north of Shepherd Center. The coastal beaches and islands of the Atlantic Gulf are within 4 to 6 hours driving time. Winter temperatures are mild, with occasional freezing temperatures during January or February. Snow is rare and short-lived. Summers are hot and humid, with temperatures in the 80s and 90s. Atlanta is the location of at least three medical schools and twelve colleges and universities. Several graduate programs house neuropsychology training programs (majors) or offer neuropsychology emphases (Smith, 2019).

Eligibility

Applicants must meet the following prerequisites to be considered for our postdoctoral training program:

- Completion of doctoral degree, including defense of dissertation, from a clinical or counseling psychology doctoral programs accredited by the American Psychological Association (APA) or the Canadian Psychological Association (CPA) before the start date of the residency
- Completion of an APA-accredited psychology internship program
- In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification form upon hire. Shepherd is unable to commit to sponsoring H-1B visas at this time.

APPLICATION PROCESS

Shepherd Center accepts fellowship applications biennially. We encourage you to apply early as we typically begin to receive applications in November of the year prior to the start date. Invited applicants are strongly encouraged to interview with us in person at Shepherd Center, as this gives you an opportunity to view the facility and meet the faculty. We also conduct interviews at the North American meeting of the International Neuropsychological Society (INS). Fellows typically begin training the Tuesday after Labor Day, but this date is negotiable.

Our fellowship/residency program abides by APPCN policy that no person associated with our program will solicit, accept, or use any ranking-related information from any residency applicant. All applicants must register with National Matching Services to be ranked for the fellowship. For your convenience, an APPCN Resident Matching Program Request for Applicant Agreement Package form is included at the end of this brochure. **Our APPCN Matching Program**

Code is 9942. Please retain this code, as you will need it when submitting your resident site rankings. Applicants unfamiliar with National Matching Services are directed to an informational web site at www.natmatch.com/appcnmat. Shepherd Center is an Equal Opportunity/Affirmative Action employer. We invite applications from members of minority and other underrepresented groups in professional neuropsychology or rehabilitation psychology.

Persons wishing to apply for admission to the fellowship must submit the following documents scanned into a single compressed PDF file via email to: susan.shwartz@shepherd.org:

1. Letter of interest including training and clinical experiences and an explanation of your specific interests in our fellowship program.
2. Curriculum Vitae.
3. APPCN Verification of Completion of Doctorate Form.
4. One neuropsychological report (appropriately de-identified), preferably one relevant to our clinical population.

The following materials should also be submitted directly from the source:

5. Official graduate school transcripts sent directly from the program.
6. Three letters of recommendation from professionals familiar with your academic or clinical work, at least one of which is from a current supervisor. The letters should address your clinical and academic skills, particularly as they relate to training in neuropsychology.
7. For applicants that have not completed the dissertation defense, a letter from the chairperson of dissertation indicating the status of research project (e.g., completed data collection) and the anticipated date of completion. Note: If the dissertation chairperson is also writing a letter as a clinical supervisor, information regarding dissertation status can be included in that letter. **No applicant will be permitted to begin fellowship training if his or her dissertation has not been completed.**

Official graduate transcripts and letters of recommendations can either be emailed to susan.shwartz@shepherd.org or mailed to:

**Dr. Susan Shwartz
Shepherd Center
2020 Peachtree Rd
Atlanta, GA 30309**

The complete application should be received by January 6, 2021. Earlier submissions are preferred.

