

Integrated Behavioral Health Division Psychology Postdoctoral Fellowship 2023-2024

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Introduction

Organization Description: Denver Health is a vertically integrated community hospital system offering preventative care, primary care, specialty care, and acute care services regardless of ability to pay. Our hospital system and outpatient clinics provide care for 25 percent of Denver's population annually and 33 percent of the children in the Denver area. Our patients are diverse in all aspects including ethnic background, language, religion, ability, citizenship status, sexual orientation, and gender identity. There are ten federally qualified community health clinics as part of the hospital system located throughout the city, meeting the unique health needs of communities within which the clinics reside. Behavioral health services are an essential part of our interdisciplinary model of care. Our Integrated Behavioral Health Division consists of dedicated psychologists, licensed clinical social workers, psychiatrists, addictions counselors, telephonic counselors, and behavioral health educators working alongside primary care providers, nurses, medical social workers, pharmacists, and patient navigators.

Fellowship Overview: This is a one-year full-time integrated primary care fellowship with a clinical focus preparing fellows for independent practice in primary care settings with underserved populations and for leadership roles in the field. Under the supervision of a licensed psychologist, the fellow will engage fully in clinic responsibilities providing consultation services for primary care providers, crisis assessments, diagnostic evaluations, health promotion and behavior change interventions, and brief time-limited psychotherapy. There is opportunity for teaching, specialty projects, and supervision in Spanish based on the interest of the fellow. The monthly didactics are designed to support fellows in advancement of their knowledge and skill in health psychology, diversity, psychopharmacology, program development, and professionalism. Denver Health Hospital and Authority is associated with University of Colorado Hospital and fellows can access grand rounds, health equity lectures, and medical/psychiatric trainings across the systems. The program prepares fellows to be independently practicing psychologists, fulfilling all necessary requirements (outside of passing the EPPP) for Colorado licensure.

Benefits: Competitive benefits include health insurance, dental, vision, and retirement. **Salary:** \$55,000/year.

Training Philosophy

The purpose of the Integrated Behavioral Health training program at Denver Health is to train highly competent integrated behavioral health psychologists who are culturally responsive, justice oriented, ethically sound, and biopsychosocially informed, fostering leaders in the field. The program utilizes a scholar-practitioner model of training honoring psychology's tradition of evidence-informed interventions. In the setting of integrated care and in the context of a teaching hospital, there is a multitude of learning opportunities from members of the interdisciplinary clinic team. Postdoctoral fellows work closely with supervising licensed psychologists who serve as the primary teachers and professional role models. Learning is deepened by the knowledge of medical providers, substance treatment counselors, licensed clinical social workers, medical social workers, pharmacists, nurses, and other professionals working within the clinic setting. The program uses a developmental model of supervision and

focuses on helping fellows to advance their own identities as integrated care psychologists. Diversity awareness, respect for individual differences, and clinical implications are interwoven into the training curriculum and are a regular part of supervision and team discussions. Cultural awareness and cultural responsiveness are seen as ongoing processes.

Applicant Qualifications (to be met by start date):

- Completion of a doctoral internship accredited by the American Psychological Association (APA) or Canadian Psychological Association (CPA)
- Receipt of a doctoral degree in clinical or counseling psychology from an APA/CPA-accredited program or from a regionally accredited institution of higher education.
- Ability to collaborate with an interdisciplinary team in a fast-paced environment.
- Experience with rapid psychiatric evaluation, diagnosis, and safety assessment.
- Competence in delivering high quality, targeted interventions.
- Strong communication skills to facilitate effective consultation with an interdisciplinary treatment team.
- Previous work in integrated primary care preferred.
- Bilingual Spanish skills are preferred.

Postdoctoral Training Tracks

Track 1: Adult Medicine. Eastside Adult Internal Medicine & Primary Care Clinic

Bernard F. Gipson Eastside Family Health Center is the oldest U.S. community health center west of the Mississippi, providing care for patients since 1966 and is located in the Five Points neighborhood of Denver. There are multiple specialties available in this clinic including Pediatric Medicine, Adult Internal Medicine (where this track is located), OB/GYN, dental, physical therapy, and others. This is a medical resident training clinic which enhances interdisciplinary learning opportunities.

Webb Center for Primary Care. The Webb Center for Primary Care, located on Denver Health's main campus, is a large outpatient facility that houses primary care clinics for adults and children, as well as a pediatric dental clinic, pharmacy, outpatient behavioral health services and health information management. This position is located in the Adult Internal Medicine clinic which offers medical services to adults 19 +, including older adults.

Training Faculty

Billings, Giovanni. Training Committee, Licensed Psychologist.

Kerry Gagnon, PhD. Licensed Psychologist.

Matt Hoag, MA, LAC, LPC. Interim Director of Integrated Behavioral Health.

Fields, Devin. Training Committee, Licensed Psychologist.

Joseph Jerez, PhD. Integrated Behavioral Health Psychology Postdoctoral Training Director, Licensed Psychologist.

Leigh Kunkle, PsyD. Supervisor, Webb Center for Primary Care

Tatiana Turo, PsyD. Licensed Psychologist.

Jeremy Vogt, PhD. Supervisor, Eastside Adult Internal Medicine. Licensed Psychologist.

Program Organization

The fellowship position is clinical in nature and emphasizes the skills of a generalist integrated care practitioner. r Generally, a fellow will be spending 34 hours per week in clinical care and 6 hours per week in other training and administrative activities for a **40-hour** work week. The following is a brief breakdown:

- 1) Individual Supervision: **2 hours/week = 8 hours/month**
 - a. Supervision is provided by a licensed psychologist who maintains professional responsibility for the cases of the postdoctoral fellow.
- 2) Training Director Meeting: 1 hour/bimonthly
- 3) Didactics (Journal Club, Infant Mental Health Seminar, Diversity Seminar & Diversity Affinity Group, Mindfulness Meditation and Resilience Group, Professional Development Seminar, Supervision Seminar, Cohort Development): 8 hours/month
- 4) Division and Clinic Team Meetings: 7 hours/month
- 5) Individual Professional Development (attending additional lectures, studying for EPPP, quality improvement projects): **40 hours/training year**
- 6) Teaching-Related Activities: 1 hours/month
- 7) Clinical Placement: Approximately **34 hours/week** split between 2 clinics

Postdoctoral Fellows will engage the following direct clinical activities/services:

- 1) Provide consultations for medical providers consisting of brief interventions and communication of findings to the medical team.
- 2) Conduct diagnostic evaluations.
- 3) Engage patient in health behavior change interventions.
- 4) Provide brief therapy with patients in the primary care setting, up to 6 sessions.

- 5) Communicate with external stakeholders and resources to provide continuity of care for the patient.
- 6) Complete clinical documentation

Training Progression: The postdoctoral fellow will be onboarded to the organization, the Integrated Behavioral Health Department, and the clinics within which they will work. The fellows integrate into the clinical setting by spending time in observation of the supervisor and other team members, engaging in co-consultations, and then providing direct patient services with supervision. Caseload will gradually increase throughout the training year to meet direct service requirements. Initial didactics will support adjustment to the postdoctoral fellowship and professional expectations. Ongoing didactics will increase understanding of the system of healthcare and behavioral health integration, clinical skills, and the role of psychologists as leaders. The final period of the training year is dedicated to obtaining licensure, applying for jobs, and transitioning into staff positions. See below for more information about the didactic sequence and competencies to be learned and demonstrated in this fellowship.

Didactics and Additional Training Opportunities

- 1) *Journal Club*. This monthly meeting is facilitated by expert Integrated Behavioral Health training faculty and provides discussion of the most current literature in integrated care and the identity of psychologists in the medical setting.
- 2) **Professional Development**. This monthly meeting is facilitated by the director of training and is an opportunity to consolidate one's identity as an integrated behavioral health psychologist, explore issues of early career psychology, discuss EPPP preparation, reflect on training experiences, explore integrated behavioral health leadership, and prepare for the job search and interview process. This serves as a bridge between being a trainee to being an independently practicing professional in the field of psychology.
- 3) *Psychologist as Advocate. Diversity Didactic and Affinity Identity Caucus Groups.*Diversity didactics are monthly trainings related to personal identity, culture, sexual orientation, gender, anti-racism, disability, and other relevant topics to increase knowledge, awareness, and clinical skill. In addition, the Integrated Behavioral Health department currently offers a monthly affinity caucus group exploring oneself in sociocultural context with discussion of power, privilege, oppression, systemic racism, and personal bias.
- 4) *Psychologist as Teacher*: Postdocs are required to provide teaching and training and will be given time within their month to prepare for these trainings. Potential training audiences include predoctoral interns, IBH social externs, and clinic providers and staff. Postdoctoral fellows may also have an opportunity to supervise a psychology extern or facilitate group supervision. A supervision didactic and consultation group is provided to build supervision skills.

- 5) *Community Lectures/Professional Development*. Denver Health and The University of Colorado Medical School are a community of learners. Postdocs are allotted 40 hours for the training year to attend a community lecture related to behavioral health, medicine, psychiatry, or an allied field. It is up to the postdoc to obtain approval from their supervisor in accordance with clinic schedule in order to attend these events. This time can also be used to study for the EPPP or used to attend a job interview.
- 6) Psychologist as model of self-care. Mindfulness Meditation and Resilience Group.

 Burnout, compassion fatigue, and moral injury is of notable concern in the mental health and medical fields. Mindfulness meditation and related stress reduction classes have evidence for reducing stress in providers. This monthly group provides information on stress management with mindfulness meditation practice as a core component.

Professional Development Seminar Sample Schedule

Sample Professional Development Schedule:

September: Adjustment to Postdoc

October: EPPP Preparation

November: Leadership in Integrated Behavioral Health

December: Psychologists as Advocates

January: Research for Clinicians in Integrated Behavioral Health February: Career Adjustment and Career Decision-Making

March: Identity as a Psychologist in Integrated Behavioral Health April: Tips from Hiring Managers in Integrated Behavioral Health

May: Interviews and Job Applications

June: Disseminating Integrated Behavioral Health Model & Psychologists in Medical

Residencies

July: Applying for Licensure August: Review and Summary

Objectives, Competencies, and Assessment Methods

Based on the work of the Colorado Consensus Conference and literature addressing competency in primary care and postdoctoral psychology education*, the following postdoctoral goals and competencies are addressed and evaluated during the training year:

- 1) Professional Values and Interdisciplinary Collaboration
 - a. Further develop identity as a psychologist on an interdisciplinary team
 - b. Increase skills in team communication.
 - c. Maintain the ethics of the discipline of psychology within a medical setting.
 - d. Practice within window of competence and seek supervision when needing additional support.
- 2) Intervention

- a. Provide culturally responsive, whole person and family-oriented care.
- b. Effectively assist patients in making health behavior changes
- c. Provide high quality therapy that meets the needs of the patient, the practice population, and the clinical team primarily through brief therapy modalities.

3) Assessment

- a. Conduct efficient and focused diagnostic assessments with specific attention to the consultation question.
- b. Conduct effective risk assessments in the context of primary care and further develop clinical decision-making around disposition.
- c. Utilize and interpret screening and assessment measures within the primary care model and based on the assessment needs of the clinic.
- 4) Cultural Awareness and Responsiveness
 - a. Awareness of oneself and others as cultural beings.
 - b. Use of cultural context in conceptualizing health and health behaviors.
 - c. Increase ability to advocate for patients within the healthcare system and in larger societal context.
 - d. Work to reduce stigma related to mental health and medical diagnoses and treatment.
 - e. Demonstrate respect for the patients we serve and our colleagues using affirming and non-stigmatizing language.
- 5) Teaching and Scholarly Practice
 - a. Teach both formally and informally. Provide training to allied health professionals regarding the psychological factors that impact health and behavior change strategies that can be used to further health.
 - b. Develop and teach at least 3 primary care psychology trainings.
 - c. Considers quality improvement activities and uses knowledge of psychological research to facilitate evidence-based practice within the primary care setting.
- 6) Responsible member of the Denver Health community
 - a. Follow Denver Health policies and procedures and comply with clinic specific expectations as outlined by the rotation supervisor and the clinics' program managers.
 - b. Maintain confidentiality and HIPAA compliance.
 - c. Complete required organizational trainings.

Evaluation Periods

September of Postdoc Initiation: Learning Agreement and Goal setting

December: Formative Evaluation

February: Formal Mid-year Evaluation

September of Postdoc Completion: Formal Final Evaluation

*Due process procedures are initiated in the event that a Fellow does not meet the expected level of competence.

Sample Evaluation

Based on Robinson, P.J. & Reiter, J. T. (2015). *Behavioral Consultation and Primary Care: A Guide to Integrating Services*. NY: Springer and the Postdoctoral Health Psychology Competencies.

Instructions: Use a rating scale of 1 (low) to 5 (high) to assess skill competence in attributes within each of the six domains.

Indicate the number corresponding to the skill rating that best describes current skill level.

Domain 1: Clinical Practice & Integrated Behavioral Health Assessment Skills

- 1. Attends to entire clinic population.
- 2. Participates in preventative care.
- 3. Promotes small changes in a large number of patients.
- 6. Understands the relationship of medical and psychological systems.
- 7. Uses appropriate assessment tools.
- 8. Clarifies referral problem with patient and PCP.
- 9. Limits assessment focus to one referral problem.
- 10. Conducts brief life context interview.
- 11. Conducts effective functional analysis of target problem.
- 12. Combines information from life context and functional analysis interviews to create effective interventions.
- 13. Empowers patients to make health behavior changes.
- 14. Shows knowledge of best practice guidelines, ESTs.
- 15. Matches interventions to patient's strengths and deficits.
- 16. Demonstrates basic knowledge of medications.
- 17. Writes clear, concise chart notes.
- 18. Gets chart notes and feedback to care team when relevant in a timely manner.
- 19. Demonstrates skill in collaborating with psychiatry services and assisting with tracking response to psychiatric medications.
- 20. Understands relevant policies and procedures of the BHC service.
- 21. Accurately and carefully completes all billing activities.

Domain 2: Practice Management & Leadership Skills

- 22. Uses 30-minute visits efficiently.
- 23. Stays on time when conducting consecutive appointments.
- 24. Completes treatment episode when improvements noted and plan is clear.
- 25. Uses continuity visits.
- 26. Uses flexible patient contact strategies.
- 27. Assists with high utilizers of medical care.
- 28. Coordinates care with other agencies or other professionals that are not co-located.
- 29. Uses community resources.
- 30. Appropriately triages to specialty MH and chemical dependency.
- 31. Effectively markets BHC services.

Domain 3: Consultation Skills

- 32. Focuses on and responds to referral question.
- 33. Conducts effective curbside consultations.
- 34. Describes interventions in transparent language to encourage PC team support.
- 35. Tailors recommendations to work pace of PC.
- 36. Provides presentations to PCPs and other team members.
- 37. Researches questions about BH interventions.
- 38. Assertively follows up with PCPs, when indicated.
- 39. Understands and operates comfortably within PC culture.
- 40. Understands team roles.
- 41. Available for on-demand consultations.

Domain 4: Individual and Cultural Diversity

- 42. Demonstrates understanding of how their own personal/cultural history, attitudes, and biases may affect how they understand and interact with people different than themselves
- 43. Recognizes own biases and stereotypes, personal limitations, and areas for future growth and takes action to reduce such biases.
- 44. Open to exploring one's feelings and reactions to power and privilege issues.
- 45. Actively works for antiracism and facilitates antiracism in clinic and community environments.
- 46. Facilitates discourse and acts as an ally when oppression or poor treatment is imposed on stigmatized and underserved groups.
- 47. Demonstrates respect for and values differing worldviews in all domains of professional practice and professional interactions.

Domain 5: Ethical and Legal Standards

- 48. Acts in accord with hospital/ACS bylaws, credentialing, privileges, and staffing responsibilities as they pertain to fellowship.
- 49. Recognizes and manages ethical and legal issues that arise during health psychology professional services, training and research activities.
- 50. Recognizes and manages conflicts when they arise between ethical code for clinical health service psychologists and ethical codes for other health care team members.
- 51. Follows APA Ethical Principles and Code of Conduct.
- 52. Applies ethical decision-making processes in order to resolve dilemmas.

Domain 6: Scientific Practice

- 53. Utilizes scientific literature in clinical practice.
- 54. Utilizes scientific methods and knowledge from psychology and related disciplines to examine processes as they relate to health promotion, illness prevention, or program evaluation.

Domain 7: Teaching and Supervision

- 55. Provides effective teaching activities for clinical health psychology concepts
- 56. Adapts teaching style and content to the audience (including an interprofessional audience)
- 57. Demonstrates knowledge of supervision practice in health psychology.

Domain 8: *Professional Identity*

- 58. Demonstrates an emerging professional identity as a health psychologist who understands the unique contributions of psychology to health care.
- 59. Demonstrates awareness of issues and challenges unique to working in health care settings and systems.
- 60. Uses training, skill, and knowledge to advocate for equity in health care and access for patients.

Summary of Strengths:
Summary of Areas of Growth:
Summary of deficient areas that need immediate corrections. Include suggestions on how to work on these areas.

Performance Improvement and Due Process

Introductory Statement: The Denver Health Integrated Behavioral Health department is committed to teaching and fellow growth. The program faculty is dedicated to the success of the postdoctoral fellows and understands that the postdoctoral year is a time of notable development and transition. If problematic behaviors occur, the training faculty will work with the postdoctoral fellow in order to make improvements and gain competency; however, grossly unethical or illegal behavior will not be tolerated. The program will follow the Denver Health Human Resources Policy for Accountability Based Performance (PolicyStat ID: 6659211). The policy below outlines general procedures for addressing unsatisfactory performance or problematic behaviors.

The Denver Health Human Resources department outlines the following areas of work accountability to which postdoctoral fellows are held:

- 1. **Attendance:** In general, being present and on time at the start of each shift, returning from breaks/lunch on time, not leaving early without approval and working required shifts. Departments may have additional attendance expectations. ** Generally, Accountability Based Performance issued for attendance will be separate from overall job performance; however, DHHA may combine pathways when attendance is affecting performance.
- 2. **Overall Job Performance:** The performance of a fellow's job duties and assignments encompass the following elements:
 - a. **Job Standards:** Knowledge, skills, abilities, personal and cultural awareness, and competencies to successfully perform the fellow's job duties and responsibilities and function professionally on work teams.
 - b. **Organizational Requirements:** Adhering to DHHA's principles, practices, policies, protocols, procedures, standards, guidelines, and directives, including but not limited to, practicing within scope, maintaining licenses, certifications, competencies, annual mandatory training, flu shots, and compliance with the Code of Conduct.
 - c. **Behavior:** Interpersonal interaction with the public, patients, families, vendors, staff, students, affiliates, volunteers, and co-workers that is professional, empathetic, and courteous and in accordance with the Code of Conduct, HR Principles and Practices, and the organization's Standards of Behavior.
 - 1. *Problematic behaviors:* lack of skill, awareness, or knowledge that impacts the postdoctoral fellow's ability to provide high-quality and ethical patient care and function professionally on work teams.
 - 2. *Unsatisfactory performance:* the postdoctoral fellow is performing at a level that is below that which is expected for a psychologist in their pre-licensure year. This includes clinical skill deficits, lack of personal and/or cultural awareness, or prolonged difficulty in integrating into the setting or the clinic team. Unsatisfactory performance may also occur when the postdoctoral fellow is not

utilizing feedback to improve or integrating supervisory feedback into practice.

Use of Accountability Based Performance for Postdoctoral Fellow Improvement

Accountability Based Performance (ABP) provides a path to employee improvement. It is important to note that there are degrees of ABP. In the context of training, these degrees may be progressive; however, any degree below may be used depending on the circumstances according to HR policy. The facts and circumstances of each situation will be reviewed and considered on a case-by-case basis.

- 1. Concerns may be identified by the faculty/training staff, clinic team membership or clinic team lead, the training director, the program director, colleagues, or other personnel and brought to the training committee. The issue will be raised to the postdoctoral fellow as soon as feasible to informally resolve the problem. The opportunity for informal resolution is dependent on the extent of the concern being raised. A reasonable timeframe will be established during which the faculty will revisit the area of concern, and this will be communicated to the fellow. The faculty who brought the concern will monitor change/progress in coordination with the direct supervisor.
- 2. If a postdoctoral fellow's problem behavior persists beyond an attempt to informally resolve the issue or if a fellow receives an unsatisfactory program evaluation (evaluation that is well below what is expected of a pre-licensure psychologist), the fellow will be notified that further *degrees* of the *Accountability Based Performance* (*ABP*) procedure will be used.
 - a. Expectation Setting: Notice: The postdoctoral fellow will be notified by the supervisor or the supervisor with the training director and/or director of the Integrated Behavioral Health division that a performance concern has been raised and the expectation setting conversation will be scheduled within 10 business days. Hearing: The fellow will also be given an opportunity to provide a response to the area of concern during the expectation setting conversation with the supervisor and training director and/or director of the Integrated Behavioral Health division. This is considered a non-disciplinary intervention that addresses the area of concern by outlining specific expectations for improvement and a timeline for improvement. This action is documented and may be included in the postdoctoral fellow's program evaluation.
 - b. **Reminder 1:** This is a disciplinary action that addresses non-compliance with expectations. The decision to pursue this action will be made within the context of the training committee with the input of the postdoctoral fellow's supervisor, the training director, and the director of Integrated Behavioral Health. *Notice:* A verbal and written notice will be given to the postdoctoral fellow of the initiation of a formal Performance Improvement Plan (PIP) and a meeting will be scheduled to discuss within 10 business days. *Hearing*: At that that meeting, the fellow will be given an opportunity to respond to the initiation of a PIP with the supervisor

and the director of training and/or the director of the Integrated Behavioral Health division and use the appeals process outlined below to contest this decision. See below for PIP guidelines. If improvement is made, but the fellow continues to demonstrate need for improvement at the end of the designated time frame, the PIP will be expanded or modified to meet the professional and training needs of the fellow. A written statement at the end of the PIP period will be provided by the training director indicating whether goals have been met, further improvement time is needed, or further disciplinary action is indicated.

- c. Reminder 2: A second disciplinary action will be initiated if the fellow has not sufficiently addressed activities of the PIP at re-evaluation with little or no improvement or the improvement was not sustained over time. The decision to pursue this action will be made within the context of the training committee with the input of the postdoctoral fellow's supervisor, the training director, and the director of Integrated Behavioral Health. Program suspension will be initiated at this time which includes removing the fellow from all clinical service provision for a specified period of time, during which the program may support the fellow in obtaining additional didactic training, close mentorship, or engage some other method of remediation. The length of the suspension period will depend upon the nature of the problem and will be determined by the fellow's supervisor and the training director. *Notice*: The need for a Suspension Plan will be shared with the fellow in writing and a meeting to discuss will be scheduled within 10 business days. *Hearing*: At that meeting, the fellow will be given an opportunity to respond to the SP with the supervisor and the director of training and/or the director of the Integrated Behavioral Health division and may use the appeals process outlined below to contest this decision. See below for SP guidelines. This action will be noted on the postdoctoral program evaluation. A written statement at the end of the suspension period will be provided by the training director indicating whether goals have been met, further improvement time is needed, or consideration of termination of employment is warranted.
- d. **Termination of Employment:** If above improvement process does not rectify problematic behavior or unsatisfactory performance, the training committee, training and IBH director, and a representative from HR will make a determination regarding termination from the program and employment. This requires approval from the HR Employee Relations Center. Postdoctoral fellows who are terminated under the ABP process may not be eligible for rehire according to DHHA HR Policies and Procedures.
- 3. Performance Improvement Plan (PIP) and Suspension Plan (SP): The PIP and SP are generally used when a postdoctoral fellow is unable to demonstrate competency in a new role/position or as a process to improve inadequate job performance. The PIP requires a supervisor or manager to identify the postdoctoral fellow's job performance that is not meeting expectations and to define the desired performance expectation and will include:
 - a) the actual behaviors or skills associated with the problem;
 - b) the specific actions to be taken for rectifying the problem;

- c) the time frame during which the problem is expected to be ameliorated; and,
- d) the procedures designed to ascertain whether the problem has been appropriately remediated.

A few tailored training interventions may be utilized in the context of a PIP or SP to improve the postdoctoral fellow's competency. Below are some examples:

- 1. Additional didactic requirements
- 2. Required supplemental reading
- 3. Reduction in clinical activities and increased time observing or being observed
- 4. Recording (with written consent) sessions for review with supervisor
- 5. Increased amount of supervision
- 6. Recommendation to engage in personal therapy
- 7. Recommendation for leave of absence
- 4. <u>Administrative Suspensions</u>: DHHA may suspend any postdoctoral fellow, with pay, pending an investigation into circumstances which may warrant ABP. Managers should consult the HR Employee Relations Center before placing a postdoctoral fellow on administrative suspension. Any time postdoctoral fellows are suspended for an investigation, they must immediately surrender all keys, DHHA property, pagers/telephones, and identification badges. Postdoctoral fellows are not to return to work until notified by the manager that placed them on suspension or the HR Employee Relations Center.
- 5. **ABP Documentation:** Postdoctoral fellows will be asked to sign the ABP form for Reminder 1, Reminder 2, and PIP/SP. Their signature does not necessarily indicate agreement, but that they reviewed the action and received a copy of the same. If a postdoctoral fellow refuses to sign the ABP form, this should be noted on the form. Reminder 1, Reminder 2, and PIP/SP documents shall be included and will remain in the postdoctoral fellow record file and in the director of behavioral health's files.
- 6. Application of ABP to postdoctoral fellows who violate HIPAA: DHHA has established and will apply appropriate sanctions (ABP) against members of its workforce (including employees, volunteers, residents, students and non-employees) who fail to comply with the organization's policies and procedures involving the proper access, use and disclosure of protected health information (PHI). Any HIPAA violation or suspected HIPAA violation should be reported as soon as possible to the HIPAA Privacy Officer, HIM Director and/or the Chief Information Security Officer. These individuals will investigate the matter in coordination with the HR Employee Relations Center to determine whether a violation occurred and if so, the appropriate level of the violation. The type of ABP applied to violations shall vary depending on the severity of the violation, whether the violation was intentional or unintentional, whether the violation indicates a pattern or practice of improper access, use or disclosure of health information, and similar factors.
- 7. **Appeal Process:** Timely response is required to appeal either an unsatisfactory program evaluation or the decision to initiate a PIP or SP. The postdoctoral fellow is invited to

submit in writing with justification of why they appeal the decision within 10 business days. The written appeal and an in-person appeal will be presented to the training faculty. The fellow may request a specific member of the training faculty to serve on the review panel. After thorough discussion, the training faculty will vote to 1) uphold, 2) modify, or 3) overturn the original decision by majority vote. The postdoctoral fellow will be made aware of the final decision within 5 business days in writing. The Denver Health Human Resources Department policies and procedures will be followed.

Rights and Responsibilities of Fellows

- -Fellows have the right to be treated with respect and fairness.
- -Fellows have the right to receive regular, timely, and specific feedback related to training concerns or performance issues.
- -Once Performance Improvement and Due Process Procedures have begun, fellows have the right to provide a response to the decision and state their own case without retaliation or intimidation.
- -Fellows have the responsibility to maintain a growth mindset and make efforts to address skill deficits or identified problematic behaviors.
- Fellows have the responsibility to maintain professional, respectful, and ethical conduct.

Rights and Responsibilities of the Training Program

- -The program has the right to initiate a Performance Improvement Plan, a suspension, and/or a termination.
- -The program faculty and director have the right to be treated with respect.
- -The program has the responsibility to support postdoctoral fellows who are demonstrating skill deficits or concerning behaviors within the resources of the program utilizing a developmental and growth mindset approach.
- -The program has the responsibility to protect patients from harm.

Grievance Procedures

Grievance procedures are used when a postdoctoral fellow raises a concern about a member of the program (supervisor, faculty member, training director, program director, colleague, or other trainee) or the program itself (program policies, curriculum, etc.). This process is designed to address fellow concerns and protect the postdoctoral fellow from retaliation for concerns raised in good faith.

- 1) In accordance with the ethics code as outlined by the American Psychological Association, fellows, if feasible, are encouraged to raise the issue directly with the person of concern and work to resolve the concern informally. If related to the program itself, the fellow can raise the concern with one's direct supervisor, the training director, or the director of Integrated Behavioral Health.
- 2) If an informal resolution is unsatisfactory, the concern should be submitted formally in writing to the training director. If the concern is regarding the training director, the concern should be submitted to the director of Integrated Behavioral Health. The person being grieved will also have a chance to provide a written response. The Training Director or another fellowship supervisor appointed by the Training Director's supervisor will serve as Chair of the Grievance Committee and will assemble a three-person committee in seven business days of the grievance being filed.
- 3) This Committee will make every effort within 10 business days to gather information regarding the grievance, inform the fellow of its findings, and offer recommendations to the Fellowship Training Director (or, if the complaint involves the Fellowship Training director, to the Director of Integrated Behavioral Health) and to the postdoctoral fellowship faculty.
- 4) Should the fellow contest this decision, the fellow can state in writing the issues with which the fellow does not agree and any suggestions for resolution within 10 business days. The suggested resolutions will be voted on the fellowship faculty, with a simple majority of a quorum (defined as 60% of the total faculty) deciding the issue. The decision of the fellowship faculty is final, to the extent that the staff and resources needed for resolution are part of the fellowship program.
- 5) Resolution of grievances requiring staff or resources outside of the fellowship program will be reviewed with the Medical Director of Ambulatory Care Services and with Denver Health Human Resources.

** If there are concerns about colleagues outside of the training program or the conduct of the employees of Denver Health, please refer to the Human Resources Code of Conduct. Concerns can be reported to the Denver Health ValuesLine at 1-800-273-8452 or reported using the ValuesLine web form at http://www.denverhealth.ethicspoint.com/. The ValuesLine is available toll-free 24/7. You can make an anonymous report to a trained professional that is not a Denver Health employee. A postdoctoral fellow's supervisor can help make decisions regarding when and how to report ValuesLine concerns.

Policies, Procedures, & Educational Benefits

Dress Code: The dress and personal hygiene of employees reflects professional image of Denver Health. Professional attire is required and functionality should be consistent with the work area. Dress slacks, button down shirts, ties (optional), polos, dresses, and blouses are acceptable. Sports shoes, sweat suits, backless clothing, and flip-flops are NOT permitted. Badges are required to be worn at all times, easily visible to the patient and other staff. Refer to the Denver Health Dress Code policy located on the Pulse for more specific information.

Planned Paid Time Off (PTO): Full-time postdoctoral fellows will earn 6.15 hours of PTO every 2-week pay period. Supervisors and appropriate clinic leadership should be notified at least 60 days in advance to block clinic schedules and plan for time away. After approval by both the clinic and the supervisor, the fellow can enter the time away into the *Time and Attendance* system for final approval by the training director. Benefit balances can be found in the *Time and Attendance* system.

Unplanned Time Off: Denver Health does not differentiate between planned time off and sick leave. If postdoc fellows are unable to come to work because of illness or another urgent circumstance, supervisors should be notified as soon as feasible and clinic call-out policies should be followed. Unplanned time off should then be entered into the *Time and Attendance* system as soon as reasonably possible.

Professional Development Time Off: You are allotted 40 hours per year to devote to professional development activities including attending lectures, conferences, grand rounds, other educational events in the Denver Health community or the Denver community, studying for the EPPP, or interviewing for jobs. No more than 2 days can be taken in a row without further approval by the IBH director. Note that further time necessary for interviewing must be taken as PTO. All time away from clinic must be approved by your direct supervisor and final approval will be reserved for the Training Director and the Director of IBH Services.

Supervisor Time Off: Supervisors may have planned or unplanned time out of clinic. Generally speaking, the supervisor will designate a covering licensed provider within the building or the second supervisor will be available for phone consultation. The supervisor responsible will notify the postdoc of what to expect during the time when they will be out of the clinic.

Billing and Documentation: Postdoc fellows will be submitting bills to insurance companies for services provided according to the Integrated Behavioral Health billing standards. The strictest integrity is required in this process making sure that billed visits meet the minimum requirements to be billed and proper documentation supports the billing code submitted. Training will be provided on how to bill and document encounters in the electronic medical record and all notes will be signed by an attending psychologist. Documentation should be completed within 24-48 hours of seeing a patient.

At-home Electronic Access: It is recommended that all fellows set-up at-home access to the Denver Health Network in order to facilitate remote work if needed. This will provide a secured way of completing notes or other work-related activities from home. All patient documents should remain in the clinic to protect patient confidentiality.

Session Tracking and Productivity: Productivity requirements are a part of professional practice within many organizations and is a metric tracked by Denver Health. As such, monthly productivity will be measured and periodically discussed with fellows.

Work Related Injury: Denver Health employees who are injured at work should report to their clinic manager as soon as possible and should contact the "Ouch Line" at 303-436-OUCH (6824).

Clinic Safety: Denver Health is committed to the safety of patients and employees. Security is available in all clinics and can be notified via vocera or phone at any time during clinic operating hours. Postdoc fellows are encouraged to speak with their supervisors immediately regarding inappropriate patient behavior. Nurse practice managers and the clinic medical director are additional sources of support if at any time questions of safety arise. Fellows are encouraged to discuss with their supervisor regarding how to document patient issues.

Program Evaluations and MedHub: MedHub is an electronic platform that will be used to document evaluations from supervisors of fellows and from fellows of the supervisor and the training program. Evaluations of the program will be conducted both at mid training year and at the end of the training experience.

Research Resources:

The Denver Health Office of Research offers research trainings and seminars available to all employees, as well as access to MEDLINE Complete, REDCap, and Qualtrics:

- MEDLINE Complete is a full-text database of biomedical and health journals.
- REDCap (Research Electronic Data Capture) is a secure, HIPAA-compliant web-based application designed for data collection for research studies.
- Qualtrics is an online (web-based) survey platform to conduct survey research, evaluations, and other data collection activities. The links to these resources are available in the postdoctoral fellowship folder.

Electronic Media Policy: Fellows who choose to use social media should be mindful of how online documentation could be perceived professionally. It is recommended to utilize strict privacy settings. Information about patients or other inappropriate comments should never be posted. It is not appropriate to seek out information about patients through social media. In response to the evolving nature of technology, the American Psychological Association has developed guidance and can be consulted for further information/recommendations: http://www.apa.org/about/social-media.aspx

Discrimination, Sexual Harassment, and Retaliation: See PolicyStat ID: 2846400 for complete policy. Denver Health prohibits discrimination based on any protected status regarding any employment decision. Denver Health prohibits all forms of sexual harassment. Likewise, Denver Health prohibits retaliation against an employee for reporting, participating in or assisting with the investigation of a complaint under this policy. Annual training is designed to bring awareness to all employees regarding these issues.

***All other policies and procedures of Denver Health and the Integrated Behavioral Health Department will be followed.

COVID-19

Denver Health has been working tirelessly to keep up with the latest precautions and evidence related to COVID-19. Safety for patients, staff, and visitors is a top priority.

For all up-to-date information regarding COVID-19 at Denver Health: https://www.denverhealth.org/for-professionals/denver-health-employees/coronavirus-staff-resources

The postdoctoral fellows will be notified of any updates to hospital Covid19 protocols.

Colorado Department of Regulatory Agencies

The Colorado Department of Regulatory Agencies (DORA) is the state agency that oversees the work of psychologists. Postdoctoral fellows are required to obtain a Psychologist Candidate Temporary Permit in order to practice psychology and count hours toward licensure in the state. As of 2022, applicants for psychologist licensure must complete 1,500 clock hours of supervised experience over a minimum of 1 year with 75 hours of supervision after obtaining a doctoral degree in psychology. In addition, a passing score on the Examination for Professional Practice in Psychology (EPPP) must be earned. Licensure requirements do vary by state, so postdoctoral fellows are encouraged to review the licensing information of the state of intended licensure. In order to be authorized to take the EPPP, DORA must receive final transcripts conferring the doctoral degree. This generally means that the postdoc is eligible to take the EPPP at any time during the postdoc year and after.

Further information on these applications can be found here:

DORA

https://dpo.colorado.gov/Psychology

EPPP

https://www.asppb.net/default.aspx

Letter from the training director:

Dear Postdoctoral Fellow,

Welcome to Denver Health and to the Integrated Behavioral Health (IBH) department. We are pleased you are here! We look forward to both teaching and training you while also learning from your experiences and perspective. This is a year of transition and growth, moving from supervised to independent practice. The training faculty is here to support you in this journey.

In the first few weeks of the fellowship program, we will work to collaboratively develop training goals and will use these as a guide throughout the year. Postdoctoral training is a time to understand who you are as a psychologist and how that translates into the next steps in your professional journey. Our IBH department faculty has a depth of expertise and diversity of interests/areas of specialty. Take this time to tap into this collective knowledge and professional wisdom. We are passionate about integrated care and working with diverse populations. We plan to share our experiences and knowledge with you so that you may bring integrated behavioral health into the future, so that you may be an advocate, and so that you may be a leader. We hope to demonstrate a balance between work and life and between generosity and making a fair living. Denver Health is a teaching hospital, so take the time to learn from the myriad of professionals that make your clinics run and that help people live healthier lives. Simultaneously, be excited about the role and perspective that you bring in this process; no doubt many of your clinic colleagues will be learning from you this year.

Again, our sincerest welcome to Denver Health and to our IBH team.

Joseph Jerez, PhD Integrated Behavioral Health Training Director Denver Health Hospital and Authority



Denver Health Medical Center Integrated Behavioral Health Training Program

Acknowledgement of Handbook Policies and Procedures

I,	quirements and abide by the included policies Resources Department. I further understand that rogram has the responsibility to monitor my
Fellow Signature:	Date:
Printed Name:	
Training Director Signature:	Date:
Printed Name	