UAMS Pediatric and Child Clinical Postdoctoral Psychology Fellowship

College of Medicine, Department of Pediatrics
University of Arkansas for Medical Sciences

TRAINING HANDBOOK

The UAMS Pediatric Psychology Postdoctoral Fellowship is a multi-site program consisting of three (3; 2 in Little Rock and 1 in Springdale) full-time, 12-month positions, with the Fellowship providing 2000 hours of supervised training (which meets APPIC standards and Arkansas Psychology Board licensure requirements for postdoctoral training hours). These three positions are divided into three separate training tracks (outlined below). The fellowship begins on September 1st each year. An alternative start date may be arranged with advance notice and agreement from both the training directors and the post-doctoral fellow in cases of unforeseen circumstances. Failure to provide advance notice may result in the loss of the fellowship.

The Fellowship program is part of a comprehensive interdisciplinary training effort within the Department of Pediatrics at UAMS, and involves other trainees such as medical fellows, residents, students, social work interns, and speech/language pathology interns. In addition, psychologists are embedded in other sections within the Department of Pediatrics (i.e., Children at Risk, Adolescent Medicine, Behavioral Pediatrics, Center for Applied Research and Evaluation). The Fellowship is under the direction of the Section of Pediatric Psychology, which consists of 16 doctoral-level psychologists, 3 postdoctoral fellows, 3 master's-level psychological examiners, 2 neuropsychological technicians and graduate level-practicum students.

The Little Rock rotations are based on the Arkansas Children's Hospital (ACH) campus and include outpatient clinics, inpatient consultation and UAMS Dennis Developmental Center (DDC). Fellows housed in Springdale, Arkansas are primarily located at the Schmieding Developmental Center (SDC). Please see the SDC descriptions below for rotation and training details with focus on team-based evaluations, autism and developmental evaluations. Please see the ACH and DDC descriptions below for specific rotation and training details.

Three Fellowship Tracks

Track	Positions	Location	Primary Training Site
Assessment-Focused Pediatric Psychology	1	Little Rock	Arkansas Children's Hospital (ACH) and UAMS James L. Dennis Developmental Center (DDC)
Behavioral Health-Focused Pediatric Psychology	1	Little Rock	Arkansas Children's Hospital (ACH) and UAMS James L. Dennis Developmental Center (DDC)
Neurodevelopmental Assessment	1	Springdale, Arkansas	Schmieding Developmental Center (SDC)

Assessment-Focused Pediatric Psychology – Little Rock, Arkansas
This track is designed for applicants seeking **primarily psychological assessment experience**, with additional pediatric psychology clinical experiences throughout the year to develop a broad foundation in pediatric psychology. This includes the opportunity to:

- Provide psychological assessment and consultation in Arkansas Children's Hospital (ACH) Outpatient Specialty clinics such as: Cardiac Neurodevelopmental Follow-Up Program, Growth and Development, and Complex Care
- Participate in comprehensive evaluations of children and youth with neurodevelopmental, medical, emotional, and behavioral concerns through the UAMS James L. Dennis Developmental Center (DDC)
- Opportunity to receive specialized training in multidisciplinary evaluations for autism spectrum disorder
- Participate in inpatient consultation, including evaluations for patients in need of supportive services once discharged from the hospital
- Gain additional experience in behavioral health-related clinics and/or brief psychological interventions.

Therapy-Focused Pediatric Psychology – Little Rock, Arkansas
This track is designed for applicants seeking **primarily pediatric psychology intervention and therapy experience**, while also maintaining opportunities to develop and strengthen psychological assessment skills through participation in assessment clinics. This includes the opportunity to:

- Provide brief psychological interventions in various ACH outpatient Specialty clinics such as: Sleep Program, Cleft Clinic, Neurofibromatosis, Craniofacial Clinic, and Gastroenterology (GI) Clinics
- Participate in inpatient consultation
- Gain additional experience in evidence-based behavioral and psychological treatment
- Participate in interdisciplinary consultation and collaboration

Neurodevelopmental Assessment Track – Springdale, Arkansas
This fellowship experience will involve working with children and youth with neurodevelopmental differences (e.g., intellectual developmental disability, Autism Spectrum Disorder), other special health care needs (e.g., ADHD, learning differences, chronic illnesses), and emotional and behavioral concerns. This includes the opportunity to:

- Provide comprehensive evaluations of children and youth with neurodevelopmental, medical, emotional, and behavioral concerns
- Participate in comprehensive neuropsychological assessments
- Participate in interdisciplinary team evaluations
- Participate in interdisciplinary training and didactics

Additional Training Opportunity: Comfort Ability Clinic

All three fellowship tracks may have opportunities to participate in the nationally recognized Comfort Ability® Program at Arkansas Children's Hospital's Clark Center, a pediatric program developed at Boston Children's Hospital and Harvard Medical School to help children and youth with chronic pain.

Little Rock, Arkansas



Downtown Little Rock at night

As the capital city of Arkansas, Little Rock provides many of the benefits of living in a large city, without the negative aspects such as traffic congestion and high cost of living. The population of the greater Little Rock area is approximately 500,000. Fellows enjoy spending time outdoors at Pinnacle Mountain, the River Trail, and Eureka Springs. There are numerous community events and among Fellow favorites are Trivia Nights, Science After Dark, Brew at the Zoo, Shop and Sip, Arkansas Travelers baseball games and food festivals. The resort city of Hot Springs is a 1-hour drive from Little Rock and the Ozark Mountains are a 2-hour drive. Stretching along the Arkansas River, Little Rock is truly a wonderful place to live, work and play. In November 2004, Little Rock celebrated the opening of the Clinton Presidential Library. Little Rock sits among the gently rolling hills of central Arkansas. Summers can be hot at times while winter remains mild for the most part, with occasional snowfall. Arkansas boasts all her beauty in spring and fall with endless flowers in the spring and vibrant colors in the fall. The weather during these seasons can truly be described as perfect.

Please see Life in Little Rock: Little Rock Living: Discover the heart of Arkansas..

Springdale, Arkansas



Northwest Arkansas is the fastest-growing area in the state. It also offers many benefits of living in a big city such as performing arts, concerts, a minor league baseball team, and is home to the Arkansas Razorbacks with a great opportunity to enjoy collegiate sports in the SEC. Bentonville is becoming an art destination and is home to Crystal Bridges and a growing number of restaurants and art galleries. Bentonville also hosts a film festival in May, attracting top celebrities and independent filmmakers around the nation, while Fayetteville has a nationally renowned local theatre featuring original works as well as touring acts. The temperatures remain moderate much of the year and residents enjoy four seasons, and many outdoor activities including mountain biking, water sports, hiking, and an amazing system of walking trails that connect Northwest Arkansas.



UAMS Medical Center in Little Rock

UAMS Department of Pediatrics

Established in 1904, the UAMS Department of Pediatrics (DOP) is the largest Department in the University of Arkansas for Medical Sciences' College of Medicine and supports the Arkansas Children's System including Arkansas Children's Hospital (ACH), Arkansas Children's Northwest Hospital (ACNW) and Arkansas Children's Research Institute (ACRI). Our mission as a department is to promote clinical, research, education and advocacy efforts to improve the health of the children of Arkansas and educate incredible pediatricians and pediatric specialists.

The DOP has nearly 300 faculty members and provides its clinical services through Arkansas Children's system, which is the sixth-largest pediatric hospital in the nation and provides outstanding clinical facilities. UAMS is consistently ranked as one of the top institutions in the country and is the only comprehensive academic medical center and health sciences university. Arkansas Children's Hospital has been recognized for excellence in seven pediatric subspecialty services by US News & World Report for the second consecutive year. This places ACH as one of the top children's hospitals in the nation.

Working at both UAMS and AC, Fellows also have access to both the UAMS and AC medical libraries, Employee Health and Wellness and other campus resources. Additionally, Fellows at both sites can participate in the LEND training program. Fellows share dedicated office space in the section where all of the faculty are also located. Fellows receive administrative support from the Psychology Fellowship Coordinator and Office Manager. The Fellows are provided laptops with carrying bags, docking stations, desks, additional filing cabinets, telephones, business cards and access to a variety of training materials including books. Fellows receive training in the electronic medical record systems used on campus EPIC Hyperspace. To learn more about the DOP, please visit UAMS Department of Pediatric website.

Leadership Education in Neurodevelopmental Disabilities (LEND)

All Pediatric Psychology Fellows are partially funded by a grant to the Partners for Inclusive Communities. The LEND program is federally funded through the Maternal Child Health Bureau. The purpose of the LEND program is to provide trainees with experiences to competently apply knowledge and skills to the care of persons with developmental disabilities and their families; effectively participate in an interdisciplinary process of designing, evaluating, and implementing programs; and effectively work in an interprofessional team. In addition to these clinical and training experiences, the fellows are encouraged to initiate research and/or participate in ongoing faculty research efforts. For more information, please see the AUCD LEND website.
Discipline Director: Elizabeth Pulliam, Psy.D.

Arkansas Children's Hospital (ACH)


AC Main Entrance

ACH is the only pediatric medical center and pediatric Trauma 1 facility in Arkansas. Known for being one of the largest pediatric medical providers with 359 beds and spanning 36 city blocks, ACH proudly provides world-class medical care to children and families throughout Arkansas and surrounding areas. Pediatric Psychology Fellows cover several outpatient medical clinics including Cardiology, CPAP Adherence, GI, High-Risk Newborn, Hearing Impairment, Weight Management, Nephrology and Sleep. Also, Fellows cover the Inpatient Consultation/Liaison Service for all of ACH. Fellows may select from various elective experiences, which include developmental disabilities, research, medical crisis and loss and various pediatric subspecialty outpatient clinics. ACH takes a patient-family-centered care approach including several patient and family-led initiatives and an extensive Family Engagement Center.

UAMS J.L. Dennis Developmental Center (DDC)



The DDC is an outpatient interdisciplinary evaluation and treatment center that serves a variety of patient populations with a focus on children with developmental, learning, and/or behavioral problems from birth through 13 years of age. In the DDC, Fellows can participate in psychoeducational assessment, autism spectrum disorders, behavioral assessment, multidisciplinary team assessment, and psychotherapy. For more information on specific clinics, resources and programs please see the UAMS DDC website

Little Rock Sample Clinical Rotation and Didactics Calendar

Fellow 1 – Assessment-Focused Track

Time	Monday	Tuesday	Wednesday	Thursday	Friday
7:45 AM				CDBC Lectures 7:45-8:30 AM	
8:00 AM	Inpatient Consult	Cardio-Neurodevelopmental Clinic	Growth & Development	Complex Care Clinic (1st, 3rd) DDC TEAM Evaluations (2nd, 4th, 5th)	DDC Rotation Psychological Evaluations
12:00 PM	-Fellow Conference+ (In-Person Only) (1st & 3rd) -Psychosocial Grand Rounds (In-Person and Virtual option)	Group Supervision (Fellows and practicum students)	Ethics Grand Rounds (3rd) Schwartz Rounds (2nd Bi-monthly) Eating Disorder Team Rounds (In-person)	Little Patients, Big Topics	Psychology Section Program Meetings
1:00 PM	Supervision/ Administrative	Cardio-Neurodevelopmental Clinic	Growth & Development	DDC TEAM Evaluations	LEND (In-person or virtual)

Fellow 2 – Behavioral Health-Focused Track

Time	Monday	Tuesday	Wednesday	Thursday	Friday
7:45 AM				CDBC Lectures 7:45-8:30 AM	
8:00 AM	Feeding	Sleep/CPAP Desensitization Program	Cleft Clinic (1st) Growth & Development (2nd, 3rd, &/or 4th) NF Clinic (Last week)	CMF Clinic (2nd) Sleep/CPAP Desensitization Program (1st, 3rd, 4th, 5th)	GI Clinic
12:00 PM	Fellow Conference+ (In-Person Only) 1st and 3rd Psychosocial Grand Rounds	Group Supervision (Fellows and practicum students)	Ethics Grand Rounds (3rd) Schwartz Rounds (2nd Bi-monthly) Eating Disorder Team Rounds (In-person)	Little Patients, Big Topics	Psychology Section Program Meetings
1:00 PM	Supervision/ Administrative	Inpatient Consult	Cleft Clinic (1st) Growth & Development (2nd, 3rd, &/or 4th) NF Clinic (Last week)	CMF Clinic (2nd) Inpatient Consult (1st, 3rd, 4th, 5th)	LEND (In-person or virtual)

*All didactics are allowed virtual and in-person unless otherwise noted

+ Provides lunch or snacks

UAMS Schmieding Developmental Center (SDC)

SDC is an outpatient interdisciplinary evaluation and treatment center also serving a variety of patient populations with a focus on neurodevelopmental assessments, complex learning problems, multidisciplinary team assessments, psychotherapy, group therapy and concussion management from birth through 18 years of age. Fellows will have the opportunity to participate in hierarchical supervision of graduate level psychology practicum student training, program development and quality improvement research. More information on clinics and programs can be found at SDC website.



Springdale Sample Clinical Rotation and Didactics Calendar

Time	Monday	Tuesday	Wednesday	Thursday	Friday
7:45 AM				CDBC Lectures 7:45-8:30 AM	
8:00 AM	Psychology/ Autism full-day evaluation	Psychology/ Autism full-day evaluation	SDC TEAM Evaluation	Psychology/ Autism full-day evaluation	Supervision/ Administrative
12:00 PM	Psychosocial Grand Rounds (In-Person and Virtual option) DOP Research Seminar (3rd)	Group Supervision (Fellows and practicum students)	Ethics Grand Rounds (3rd) Schwartz Rounds (2nd Bi-monthly)	Little Patients, Big Topics	Psychology Section Program Meetings
1:00 PM	Psychology/ Autism full-day evaluation	Therapy	SDC TEAM Evaluation	Psychology/ Autism full-day evaluation	LEND (virtual)

*All didactics are allowed virtual and in-person unless otherwise noted

Goals and Objectives of Training

1. To train postdoctoral fellows for independent practice in the area of pediatric psychology including assessment and treatment of individuals coping with a variety of medical and developmental disorders.

2. To provide structured educational and clinical experiences toward that goal, and corrective feedback as Fellows progress toward that goal.

    a. Fellows will understand the variety of factors that affect the mental and physical health of individuals (medical, developmental, genetic, familial, social, behavioral, emotional).
    b. Fellows will be able to distinguish normal versus atypical reactions to acute and chronic illness.
    c. Fellows will learn diagnostic assessment for patients across the age span.
    d. Fellows will learn a variety of objective measurements of cognitive, developmental, adaptive behavior, academic, emotional, and behavioral functioning to supplement their clinical interview and facilitate comprehensive assessment of patients seen in health care settings. They will further develop the knowledge of health-related assessment including health beliefs, adherence, quality of life, and coping.

e. Fellows will demonstrate the ability to write comprehensive diagnostic assessment reports including summarizing relevant objective assessment data, interview data, and clinical impressions. They will further demonstrate the ability to assess a variety of differential diagnoses, provide a concise case conceptualization, and design an appropriate treatment plan for patients and their families and document these elements within the context of this diagnostic report.
f. Fellows will understand behavioral, cognitive-behavioral, and other theories of behavioral change as they relate to healthy development, psychopathology, health-risk behavior, and prevention of disease throughout childhood and adolescence.
g. Fellows will develop expertise in empirically-supported interventions with children, parents, and families for use in health care settings. Fellows will have a working knowledge of best-practice methods for a variety of behavioral, emotional, and developmental conditions seen in medical settings, and cultivate a respect for and understanding of the empirical support for best-practice methods and treatment protocols.
h. Fellows will demonstrate the ability to document summaries of the provision of services within treatment sessions, as well as overall treatment progress, and revise the treatment plan as needed based on this progress.
i. Fellows will demonstrate the ability to communicate and coordinate assessment and treatment efforts with a variety of healthcare disciplines.
j. Fellows will have experience in multidisciplinary assessment and treatment teams providing clinical care.
k. Fellows will participate in a consultation-liaison service and understand the consultative role of psychology in the context of an inpatient medical setting.
l. Fellows will gain a basic understanding of disease processes and their medical management.

3. The fellowship position is primarily clinical, with expected effort in education, training, and scholarship.
   a. Fellows will give didactic seminars, presentations, and lectures on Section-wide meetings and training.
   b. Fellows will gain exposure to mentoring practicum students (if applicable).
   c. Fellows will have experience in analyzing literature reviews, and depending on the fellow's interest, will have an opportunity to write abstracts or manuscripts for conference presentation and/or publication.

4. To train post-doctoral fellows to work competently and respectfully with the wide range of individuals and communities they may encounter in practice.
   a. Fellows will gain experience in professional activities that support high-quality pediatric health care.
   b. Fellows will work collaboratively with faculty, staff, and trainees across the institution and will demonstrate professionalism and respect in all workplace interactions.
   c. Fellows will develop the ability to provide patient-centered care to individuals and families from a variety of backgrounds and will gain experience adapting clinical approaches to meet the needs of the patients they serve.

Professionalism

Fellows are expected to conduct themselves professionally during all aspects of their training activities, both clinical and non-clinical. Based on that, general expectations for our fellows while completing all training-related activities are as follows:

1. Fellows will appreciate important professional, ethical, and legal issues related to clinical work in healthcare settings.
2. Demonstrate respect for all patients, families, colleagues, staff, and other employees at UAMS.
3. Adhere to all UAMS policies and procedures regarding confidentiality.
4. Engage in training and professional behavior consistent with the most current ethical guidelines of the American Psychological Association (i.e., *Ethical Principles of Psychologists and Code of Conduct*)

See UAMS Basic Code of Conduct at the end of this document.

Competencies

Competencies expected for postdoctoral fellows are outlined within the goals and objectives noted above in this document and are consistent with APA Core Competencies guidelines suggesting advanced practice in the areas of patient care, clinical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice (please also see Methods of Evaluation, page 12). This fellowship satisfies guidelines for postdoctoral training and supervision in the state of Arkansas. Fellows will be evaluated at the end of each rotation by all supervising faculty (forms at the end of this document). Additionally, Fellows will evaluate their supervisors at the end of each rotation and conduct an exit interview to give their feedback on the Fellowship program.

Summary of Clinical Training and Supervision

Typical work hours are approximately 40-50 hours/week with approximately 75% time in direct face-to-face psychological services and 25% in supervision, professional development, didactic, research and other related activities. All activities are outlined below, including example rotation schedules and didactic trainings are also available on our website on the Curriculum and Supervision tab.

Areas of training include:

- Diagnostic interviews, consultation, and brief interventions within outpatient medical subspecialty clinics.
- Psychoeducational, developmental, neuropsychological, and behavioral assessment, outpatient psychotherapy, and inpatient hospital consultation liaison.
- Interprofessional development and collaboration.
- Program development with possibilities for work with faculty on Q/I and research projects.
- Time allocated for additional conferences and trainings.

Direct Clinical Services

Fellows provide direct face-to-face clinical services in outpatient hospital clinics as well as inpatient consultations (Little Rock only). Each clinic is scheduled for a half day and typically lasts 3-4 hours. Inpatient consults are completed as time is available throughout the day and after clinic. Clinical rotations last 3-6 months depending on Fellows' training goals and clinic needs. Fellows work with the Co-Directors of Training to choose the rotation schedule. Clinical activities include face-to-face psychological services, case conceptualization, targeted readings and report writing, scoring and interpretation. Fellows are expected to provide coverage for inpatient consults as a backup if/when needed. This expectation does not apply if the fellow has received prior approval from the attending supervisor to be excused from consult duties due to conference attendance and being out of the office, vacation, or personal illness.

Curriculum and Learning Activities

Fellows begin the training year with a three-week orientation period where they have the opportunity to shadow faculty in clinical areas they will provide direct services, didactic lectures on specific medical populations and evidence-based behavioral interventions. In the fall, the Psychology Section conference offers opportunities for Fellows to learn from faculty peer-review case presentations and presentations. Over the course of the year, Fellows transition to leading the peer-review cases and educational presentations to facilitate discussion in a collegial manner. Fellows also participate in the Child Development and Behavioral Conference (CDBC) which focuses on clinical skills and developmental theories in the fall and progress toward specific clinical and ethical consideration in the spring.

Child Development and Behavioral Conference 2025 – 2026 Schedule

2025 schedule		
Date	Topic	Faculty
SEP 4	DDC Family Navigator/Intro to CDBC	Kim Macferran, MD, Amanda Fender, Shanetta Gibson.
SEP 11	Feeding Therapy and the DDC Referral Process	Rachel Wingfield, PhD
SEP 18	---------- No CDBC----------	
SEP 25	Introduction to TCAR (Team for Children at Risk)	Thanh Thanh Dai, MD
OCT 2	Tics, Tourettes, CBIT	Amy Seay, PhD
OCT 9	How to Unplug	Wendy Ward, PhD
OCT 16	Understanding Child Adversity and Resilience from an Infant Mental Health Perspective	Amanda Morris, PhD (Lynn Harris Guest Lecturer)
OCT 23	The Power of Play	Brooke Yancey-Ward, PsyD
OCT 30	Collaboration of UAMS: PACE and Arkansas DCFS	Victoria Buchanan
NOV 6	Autism in Girls	Trenesha Hill, PhD
NOV13	---------- No CDBC----------	
NOV 20	---------- Cancelled----------	
NOV 27	---------- HOLIDAY ----------	
DEC 4	Quality Improvement (QI): How to Conduct High Quality QI Projects	Devin Cook, DO
DEC 11	School Services and Due Process Considerations	Chayla Slaton, PhD
DEC 18	Resources for Children with Disabilities	Kimberly Macferran, MD
DEC 25	---------- HOLIDAY ----------	

2026 Schedule		
Dates	Topic	Faculty
JAN 2	----------HOLIDAY----------	
JAN 8	Evidence-based strategies to ensure your career success in an AHC	Wendy Ward, PhD
JAN 15	Functional Vision Evaluation	Katie Burns, MD
JAN 22	Adaptive car seats and referral process	Laura Wylie, CCLS, CPST
JAN 29	PANDAS: Childhood Post-Infectious Autoimmune Encephalopathy: What The Pediatrician Needs to Know	Natashia Bottoms, MD
FEB 5	CIRCUIT, Educational Support and Related Services through ADE	Amy Goddard, Ed.D. & Charity Avery, MCD CCC-SLP
FEB 12	An overview of Growth faltering and associated developmental outcomes	Jaimie Flor MD, Donna Holmes RN & Hannah Hurley RD
FEB 19	What Are the Kids Saying? Understanding Emerging Trends in Pediatric Developmental and Behavioral Health	Grace Stokes, PsyD
FEB 26	----------Cancelled----------	
MAR 5	Neural Tubes and Outcomes with Fetal Surgery	Mary Ann Scott
MAR 12	ASD vs ADHD	Jayne Bellando, PhD

MAR 19	Guardianship	Dennis Kuo, MD
MAR 26	---------- No CDBC ----------	
APR 2	Self-Regulation	Anna Christina Cusi, MD
APR 9	Engaging Learners At All Stages: DDC's Tuesday Morning Learner's Clinic	Claire Foster, MD
APR 16	Arkansas Reproductive Health Monitoring System (ARHMS): Public Health Surveillance and Research	Joy Shan, PhD
APR 23	Vision exams (No CEU)	Hannah Holtorf, OD
APR 30	Psychosocial issues facing pediatric transplant patients and families	Laura Goodhart, PhD
MAY 7	Genograms (No CEU)	Tiffany Lepard, MS, LCGC
MAY 14	Management of Growth Faltering and Developmental Outcomes in Growth Faltering	Jaimie Flor, MD
MAY 21	Growing Up Can Be Hard to Do: Transition of Care in the Child with Special Healthcare Needs	Erica Wiebe, MD
MAY 28	---------- No CDBC----------	

Fellows participate in a series of didactic and training activities (see below table for descriptions) including LEND training, pediatric and psychosocial grand rounds, a monthly administrative meeting, monthly peer review/case conferences and psychology presentations. Numerous additional presentations are also available in various specialty areas. Fellows spend 2-6 hours per week in direct learning activities.

Training activities focus on:

- Clinical experience in a variety of medical and developmental clinics
- Participation in multidisciplinary team assessment and treatment planning
- Direct observation of clinical skills
- Core reading manual and supplemental readings
- Case Presentation/Peer Review
- Required presentation to the section with evaluation/feedback to the trainee

Supervision

All supervision is conducted following the ASPPB Supervision Guidelines (ASPPB, 2015) and meets the APPIC standard of a minimum of 2-3 hours per week. Fellows meet individually for at least 1 hour weekly with the Primary Supervisor with a focus on monitoring progress of all required activities, ethical and best practice skills, setting and tracking professional development goals and mentoring. Fellows spend 2 hours per week minimum, with a range of 2-6 hours depending on training needs, in individual supervision for direct clinical services with a licensed psychologist. Primary and scheduled clinical face-to-face supervision occurs during Fellows' administrative time. Faculty are also available throughout the week as needed via phone, email, and unscheduled face-to-face supervision. All supervision is more intensive during the first and second rotations with Fellows spending closer to a minimum of 4 hours weekly in individual face-to-face supervision. As Fellows' competence increases and they move toward independent licensure, supervision is less intensive. Fellows meet weekly for 1 hour of group supervision where Fellows bring clinical, ethical, and professional development questions for discussion with faculty.

Didactic and Learning Activities

Activity	Description
Child Development and Behavior Conference (CDBC) 45minutes Weekly	Psychology, psychiatry and developmental behavioral pediatric trainees, nurses, social workers and respective faculty attend weekly educational and didactic lectures with topics focusing on diagnosis and treatment of the child developmental, genetic, congenital and mental health.
Department of Pediatrics Fellows Core Curriculum 1 hour 2nd & 4th Monday	Monthly conference for all Pediatric Fellows to provide Fellows with tools to transition successfully into academic, private or research positions.
Ethics Grand Rounds 1 hour monthly	Ethics Grand Rounds is an educational forum on a wide range of ethical issues in healthcare. All ACH and UAMS staff (and other parties interested in these topics) are invited to attend on-site at ACH or through videoconferencing.
Leadership Education in Neurodevelopmental Disabilities (LEND) 4 hours weekly, SEP-APR	See the description in the above explanation of training sites.
Little Patients, Big Topics (previously called Pediatric Grand Rounds) 1 hour weekly	All faculty, trainees and providers who work at ACH are invited to attend CME lectures designed to provide information that will enhance providers' clinical skills to diagnose and treat patients in the areas of pediatric subspecialty and primary care.
Quarterly Psychology Noon conference 1 hour quarterly	All faculty, trainees, and staff in the Pediatric Psychology Section are expected to participate in regular section meetings. Meeting topics may include administrative updates, ethical considerations, professional development, peer review of clinical cases, and educational presentations. These meetings provide opportunities for collaboration, shared learning, and ongoing professional growth.
Schwartz Rounds 1 hour bi-monthly	The Schwartz Rounds focus is on compassion at the heart of health care to reimagine how the workplace can better support the mental health and well-being of health workers, allowing them to focus on delivering equitable and compassionate patient care.
Psychosocial Ground Rounds 1 hour bi-monthly	Social work, Child Life, Pastoral Care, Patient Engagement, Behavioral Health providers and Department of Pediatrics faculty and trainees attend lectures designed to provide information that will enhance the impact of psychosocial determinants on medical outcomes, psychosocial resources and innovative behavioral health initiatives to improve patient care.

Methods of Evaluation

Competencies expected for postdoctoral fellows are consistent with APA Core Competencies guidelines suggesting advanced practice in the areas of patient care, clinical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice. Competencies have been specifically designed to help track progress in these areas. Fellows typically enter at the level of Intermediate in basic clinical skills and move toward the Advanced level at the end of the Fellowship (ADPTC & CCTC, 2007). Fellows are provided a copy of the competencies at the start of the training year and will be evaluated at the end of each rotation (3-6 months depending on training needs and interests) by all supervising faculty (forms at the end of this document). Fellows will then be evaluated a total of 2-4 times per year. Fellows will evaluate their supervisors at the end of each rotation and conduct an exit interview to give their feedback on the Fellowship program.

Our guiding philosophy is that most problems are best resolved through direct interaction between the Fellow and supervisor or other staff member as part of the ongoing working relationship. Fellows are encouraged to first discuss any problems or concerns with the supervisor or staff member involved. In turn, supervisors and staff members are expected to be receptive to complaints, attempt to develop a solution with the Fellow, and to seek appropriate consultation. In addition to the evaluations, the Training Committee meets monthly to discuss broader training issues and Fellows' progress. Should any concerns be noted by the Training Committee,

Fellows will be notified within one week by the Co-Directors of Training or a faculty mentor to address concerns for timely feedback. Please see the Due Process and Grievance Policies and Procedures document (page 21 of the handbook) regarding concerns for Fellow performance and/or behavior and concerns.

Stipend and Benefits

The current 12-month stipend is $56,300. Typical work hours are approximately 40-50 hours/week with 80% time in clinical service and related activities. Fellows are eligible for the UAMS health insurance plan including vision and dental, short and long-term disability, and retirement planning. UAMS offers 11 paid holidays and Fellows accrue 15 vacation and 12 sick days (please note time off must be taken in accordance with all clinic leave policies). Please see UAMS HR for more details. Please note that stipends, benefits, and paid time off may vary from year to year depending on available funding.

Co-Directors of Training

The Fellowship program is under the responsibilities of Co-Directors of Training (DOT), Drs. Mina Nguyen-Driver and Brooke Yancey-Ward. The DOT responsibilities include but are not limited to: oversight of the fellowship program and fellows' progress toward achieving the stated goals and objectives (and related competencies), central role in the first month's orientation and structured training experiences, ongoing individual supervision with fellows rotating with her and group supervision for all fellows in the program, documenting the structured evaluation and feedback process for fellows.

Co-Directors

Dr. Mina Nguyen-Driver, Psy.D. completed her internship at UC Davis Medical Center and her post-doctoral fellowship at UCSF Benioff Children's Hospital Oakland. During these experiences, she received comprehensive clinical training in the assessment of medically complex pediatric patients dealing with a wide spectrum of medical conditions. Over the past 20 years, Dr. Nguyen-Driver has accumulated extensive expertise in the fields of rare diseases and behavioral health. In addition, Dr. Nguyen-Driver has taken on a leadership role by supervising the educational experiences of psychology graduate students, pre-doctoral interns, and post-doctoral trainees specializing in pediatric psychology. Dr. Nguyen-Driver has a passion for teaching and mentorship and serves on the UAMS DEI Council, which is dedicated to advancing diversity within the College of Medicine.

Dr. Brooke Yancey-Ward, Psy.D., completed her internship at Virginia Beach City Public Schools and her post-doctoral fellowship at the University of Arkansas for Medical Sciences (UAMS) and Arkansas Children's Hospital. During these training experiences, she worked with children across the age span, ranging from infants as young as 6 months old to 18+, as well as their families, and received training in assessment, empirically supported therapeutic interventions, and consultation-liaison services. Since joining UAMS as faculty in 2022, Dr. Yancey-Ward has been involved in several outpatient clinics, inpatient consultation-liaison services, research projects, and inpatient rounding with multidisciplinary teams as well as in the Neonatal Intensive Care Unit (NICU) where she focuses on maternal mental health. Dr. Yancey-Ward has recently had the honor of becoming one of the Associate Directors of Training for the post-doctoral fellowship program and has a passion for having an active role in the training of our fellows. Dr. Yancey-Ward is the inaugural president of the Sunshine Committee, which focuses on promoting employee wellness and collegiality, and is a member of the Social and Community Engagement Committee.

Little Rock

Jayne Bellando, Ph.D.
Position: Full Professor
Graduate Program: Texas Tech, 1988
Rotation Supervision: Autism team testing in the DDC
Clinical Interests: Psychological and educational testing, social skills and anxiety issues with children with Autism Spectrum Disorders
Research Interest: Community outreach and educational programs

Shari Gaudette, Ph.D.
Position: Associate Professor
Graduate Program: University of Utah, 2006
Rotation Supervision: Inpatient C&L, DDC psychological evaluations
Clinical Interests: psychoeducational assessment, treatment of anxiety disorders, and behavioral management and emotional support of overweight youth.

Laura Goodhart, PhD
Position: Assistant Professor
Graduate Program: University of Central Arkansas, 2022
Rotation Supervision: Nephrology Clinic
Clinical Interests: adherence support, treatment for anxiety disorders, developmental and psychoeducational evaluations, and supporting patients with chronic illness

Tiffany Howell, Ph.D.
Position: Associate Professor
Graduate Program: University of Georgia, Athens, GA; Ph.D. 2012
Rotation Supervision: Headache Clinic, Inpatient C&L, DDC Therapy (adherence, coping, biofeedback)
Clinical Interests: Chronic Pain, Headache, PANS/PANDAS, Sickle Cell Disease, and Treatment Adherence

Elizabeth Pulliam, Psy.D.
Position: Professor, Director of Psychology Services in DDC, LEND Discipline Coordinator
Graduate Program: Nova Southeastern University, 2004
Rotation Supervision: DDC psychological evaluations or therapy (feeding, behavior management)
Clinical Interests: feeding disorders in young children, psychological and educational evaluation, treatment of emotional, behavioral, and adherence concerns in children with medical and/or developmental challenges.

Chayla Slaton, Ph.D.
Position: Assistant Professor
Graduate Program: University of Central Arkansas, 2021
Rotation Supervision: Cardio-Neurodevelopmental clinic (CNP), Inpatient C&L, and DDC Psychological Evaluations (Autism Teams and Psych Only)
Clinical Interests: Psychological and educational evaluations, neurodevelopmental disorders such as autism spectrum disorder, behavior management, and helping families navigate the school system.

Rachel Wingfield, Ph.D.
Position: Assistant Professor
Graduate Program: University of Central Arkansas, 2021
Rotation Supervision: Feeding, Inpatient C&L, Sleep Clinic, GI Clinic
Clinical Interests: pediatric feeding disorders; avoidant restrictive food intake disorders; pediatric sleep disorders; CPAP adherence for pediatric patients; autism evaluations; and working with patients with medically complex concerns and parental support.

Brooke Yancey-Ward, Psy.D.
Position: Assistant Professor, Co-Director of Training
Graduate Program: University of Indianapolis, 2019
Rotation Supervision: High-Risk Newborn Clinic, Inpatient C&L, Growth and Development
Clinical Interests: feeding disorders in young children, maternal mental health in NICU populations, developmental testing for infants and young children, treatment of emotional, behavioral, and adherence concerns in medically complex patients, and working with medically complex children and their families.

Springdale

Damon Lipinski, Ph.D.
Position: Associate Professor, Director of Psychology Services in SDC
Graduate Program: University of Memphis 2009
Rotation Supervision: Pediatric Neuropsychology
Clinical Interest: Traumatic Brain Injury, Epilepsy, Neurological Disorders, Learning Disorders, and the Multidisciplinary Management of Concussion. He currently directs the SDC Concussion program and multidisciplinary team at UAMS Northwest.

Mina D. Nguyen-Driver, Psy.D.
Position: Professor, Co-Director of Training
Graduate Program: Alliant University/CSPP, 2000
Rotation Supervision: Pediatric Psychology, Fellowship Supervisor at SDC.
Clinical Interests: providing evaluation and treatment for children with complex developmental and medical concerns, using a variety of modalities including comprehensive assessment and consultation, and short and long-term cognitive behavioral therapy. Diagnoses: adjustment disorder, depression, anxiety, autism spectrum disorder, ADHD, and parent management training.

Lauren Quetsch, Ph.D.
Position: Associate Professor
Graduate Program: West Virginia University, 2019
Clinical Interests: Providing evidence-based, family-focused interventions with neurodiverse youth that incorporate their social ecological systems to promote overall wellbeing. I provide neurodiversity-affirming care to enhance family understanding of their youth's unique needs with common goals including: (a) the reduction of youth experiences of emotional and behavioral dysregulation (e.g., aggression), (b) the reduction of trauma symptoms, (c) the building of social support, (d) the strengthening of family relationships, and (e) the fostering of positive family communication strategies.

Mary Ann Scott, Ph.D., ABPP
Position: Professor
Graduate Program: Oklahoma State University 1993)
Clinical Interests: Neurodevelopmental Disorders, Genetic Disorders, Congenital Heart Disorders, Neuro-oncology, Sensory Impaired Children, and working with medical specialists, families, and educational systems to enhance outcomes.

Amy Seay, Ph.D.
Position: Associate Professor
Graduate Program: University of Arkansas 2010
Rotation Supervision: Behavioral Health (SDC)
Clinical Interests: identifying and treating maladaptive health behaviors, providing behavioral health services for issues related to pediatric health conditions, addressing emotional and behavioral functioning, and promoting health-related quality of life for patients with acute and chronic health conditions.

Estefany Soto, Ph.D.
Position: Assistant Professor
Graduate Program: University of Central Arkansas, 2024
Clinical Interests: Developmental and psychological evaluations, with a particular interest in expanding access to culturally responsive assessment services, increasing representation, reducing barriers to care, and promoting equitable mental health and developmental services for Spanish-speaking families.

Mara Whiteside, Ph.D.
Position: Associate Professor
Graduate Program: University of Central Arkansas, 2015
Rotation Supervision: Pediatric Neuropsychology, Clerkship Supervisor
Clinical Interest: Pediatric Neuropsychology and School Psychology. Areas of interest: oncology late effects, genetic disorders, neurodevelopmental disorders, learning disabilities including dyslexia, and special education. She serves as the clerkship supervisor at Schmieding Developmental Center.

Post Fellowship Positions

Our fellows leave the program with competitive training, and the majority of our past fellows accept positions in academic medical centers and children's hospitals. Our fellows are employed in top academic medical centers, including:

- Children's Hospital of Pittsburgh
- Children's Hospital of Wisconsin/Medical College of Wisconsin
- Children's Mercy Kansas City
- Cincinnati Children's
- Cook Children's Hospital
- Helen DeVos Children's Hospital
- Nemours Alfred I. DuPont Hospital for Children
- Novant Health
- Parkland Health & Hospital System
- Riley Hospital for Children at Indiana University Health
- St. Jude Children's Research Hospital
- Texas Children's Hospital
- The Hospital for Sick Children
- University of Arkansas for Medical Sciences
- University of Missouri, School of Medicine
- University of Oklahoma Health Sciences Center

Our Fellows have gone on to positions to provide direct clinical services, educational programming, quality improvement/program development, and training in subspecialty areas of:

- Adolescent Medicine
- Autism/developmental testing and treatment
- Consultation and Liaison
- Feeding specialists
- Gastroenterology/Hepatology
- Hematology/Oncology
- Integrated primary care
- NICU/Cardio Neurodevelopmental Programs
- Pediatric Neuropsychology
- Rehabilitative Medicine
- Sleep Medicine
- Weight Management Programs

Our Fellows hold hospital and departmental leadership positions to support strategic planning, interdisciplinary professional education, clinical and research initiatives, and population health management for behavioral, developmental, and mental health programming in the roles of:

- Associate Provost
- Clinical Program Director
- Division Chief/Director
- Hospital/University Administration
- Lead Psychologist
- Principal Investigator
- Co-Directors of Training

Applying to Fellowship

Eligibility
- Completion of all course requirements from APA or CPA-accredited programs will be considered.
- Successful completion of or currently completing an APA accredited or APPIC member pre-doctoral internship.
- Candidates should have well-established clinical interests and experience in pediatric psychology, child psychology, and/or behavioral medicine.

Post-Application Requirements
- Personal interview to be completed via in person or Teams/Zoom.

Pre Hire Requirements
- Successful completion of APA/APPIC accredited internship
- Granted Provisional Licensure status by the Arkansas Psychology Board prior to starting the fellowship.
- Pass criminal background checks by the Arkansas State Police and FBI, including fingerprinting
- Pass pre-employment drug screening
- Must have NPI number before starting the fellowship.
- Complete all pre-hire paperwork from UAMS Human Resources within 10 business days of receiving email.
- Complete LEND paperwork within 10 business days of receiving email.
- Respond to any emails from Co-Directors of Training, UAMS staff, or faculty within three business days.

Application Deadlines and Materials
Early Review 12/1/2026
Deadline 4/1/2027*

***Deadline**: Applications are accepted until filled, with interviews held on a **rolling basis**. Virtual interviews will be offered.

Start Date: The fellowship begins on **September 1st each year**. An alternative start date may be arranged with advance notice and agreement from both the training directors and the post-doctoral fellow in cases of unforeseen circumstances. Failure to provide advanced notice may result in the loss of the fellowship.

Applicants must submit the following:
- Letter of Intent
- Curriculum Vitae
- verification of graduate training requirements form
- Graduate transcript
- Three letters of recommendation must come directly from letter writers

Please indicate in your cover letter the location/track(s) for which you would like to be considered and describe your qualifications and interest in our program. If you wish to be considered for more than one track, please identify each track in your cover letter.

Application materials may be submitted directly to:

Mayumi Godwin
Fellowship Coordinator
MGodwin2@uams.edu

Interviews
Virtual Interviews conducted via Zoom with on-site visits available after the APPIC Common Hold Date (CHD 2/16/27).

Early applicants will be notified by December 15, and later applicants will be notified within 2 weeks of receipt of a completed application if they receive an interview. Interviews will start with an overview of the program and then will include individual sessions with current fellows and training faculty. Interviews will be scheduled for four hours with possible follow-up meetings with specific faculty to further discuss training opportunities as needed. Additional information regarding the interview structure will be provided at the time of scheduling.

Equal Opportunity Institution

At the University of Arkansas for Medical Sciences (UAMS), we are looking for Post-doctoral fellows who believe in excellence as a way of life. If you think you have the skills and commitment to succeed at the highest level, consider a career at UAMS, the state's only academic health sciences center. Combining diverse talents and expertise, our employees work together to provide advanced patient care.

The University of Arkansas is an equal opportunity institution. The University does not discriminate in its education programs or activities (including in admission and employment) on the basis of any category or status protected by law, including age, race, color, national origin, disability, religion, protected veteran status, military service, genetic information, sex, sexual orientation, or pregnancy. Questions or concerns about the application of Title IX, which prohibits discrimination on the basis of sex, may be sent to the University's Title IX Coordinator and to the U.S. Department of Education Office for Civil Rights.

If you require reasonable accommodations, please get in touch with our Affirmative Action and Equal. Opportunity Department at (501) 686-5681 or UAMS HR Affirmative Action Resources.

For information regarding Visa types and support, please find more information at https://hr.uams.edu/immigration-services/

Contact Information

Training Co-Directors

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blyancyward@uams.edu

Training Program Coordinator

Mayumi Godwin
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UAMS at Arkansas Children's
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DUE PROCESS AND GRIEVANCE POLICY AND PROCEDURES

This document describes the due processes policy that applies to the Psychology Postdoctoral Fellow (referred to as Fellow) at the University of Arkansas for Medical Sciences (UAMS)/Arkansas Children's Hospital (ACH). When a Fellow is identified as performing at a level of competency judged to be "unsatisfactory" (according to the Standards established by the American Psychological Association), the Pediatric Psychology Fellowship Training Committee (comprised of the psychology faculty involved in the Training Program) may select from several courses of action.

Behavior of Concern

Behaviors that might warrant action include but are not limited to:

- Violation of the ethical standards for Psychologists as established by the American Psychological Association, in either the provision of clinical services or research activities;
- Incompetence in the performing of typical psychological services in this setting and/or inability to attain competence during the fellowship.
- Failure to meet the minimum standards for patient contact, administrative requirements, or didactic training;
- Behavior(s) judged to be currently unsuitable and which hampers the Fellow's professional performance;
- Receiving a 1 on a performance evaluation.

Fellow Performance Problems

Performance problems may arise because of educational or academic deficiencies, psychological adjustment problems and/or inappropriate emotional responses, inappropriate management of personal stress, inadequate level of self-directed professional development, inappropriate use of and/or response to supervision, etc. Behaviors typically become identified as performance problems when they include one or more of the following characteristics:

- The behavior is not merely a reflection of a knowledge or skill deficit that can be rectified by academic or didactic training or supervision.
- The quality of services delivered by the Fellow is sufficiently negatively affected.
- The behavior has the potential for ethical or legal ramifications if not addressed.
- The behavior shows a persistent insensitivity to diversity considerations related to race, ethnicity, gender, sexual orientation, age, disability status, SES, etc.
- The Fellow's emotional difficulties interfere with his or her capacity to perform competently.
- The Fellow's interpersonal style interferes with his or her intra-professional and interdisciplinary relationships with peers, coworkers, supervisors, and/or subordinates.
- The Fellow does not acknowledge, understand, or address the concern when it is identified.
- The Fellow's behavior does not change as a function of feedback, remediation efforts, and/or time.
- A disproportionate amount of attention by training personnel is required.
- The Fellow's behavior negatively impacts the public view of the training program or institution.

Guiding Principles to Ensure Due Process

The following principles serve to ensure that decisions made by the training program about Fellows are not arbitrary or personally based. These principles ensure that the Fellow is provided with ongoing and meaningful feedback, opportunities for remediation, and information about appeals procedures:

- Presenting Fellows with written documentation of the program's expectations related to professional and personal functioning.
- Stipulating the procedures for evaluation, including when and how evaluations will be conducted. Such evaluations should occur at meaningful intervals.
- Articulating the various procedures and actions involved in making decisions regarding problem behaviors.
- Communicating with Fellows early and often about how to address problem behaviors.

- Instituting a remediation plan for identified inadequacies, including the competency domain(s) in which performance is not adequate, target behaviors, expectations for acceptable performance, steps for remediation, supervisors' responsibilities, time frame for expected remediation, and consequences of not rectifying the inadequacies.
- Provide a written procedure to the Fellow that describes how the Fellow may appeal the program's action.
- Ensuring that Fellows have sufficient time to respond to any action taken by the program.
- Using input from multiple professional sources when making decisions or recommendations regarding the Fellow's performance.
- Documenting, in writing and to all relevant parties, the action taken by the program and its rationale.

Supervisory Actions and Steps to Hearing and Notifications

If performance problems are noted by a Fellow's supervisor(s), the following procedures will be initiated:

- The Fellow's supervisor(s) will meet with the Co-Directors of Training to discuss the problem and determine what action needs to be taken.
- The Co-Directors of Training will schedule a formal review hearing of the Fellow's progress and all performance problems with the Training Committee.
- The Fellow will be notified, in writing, that such a review hearing is occurring and will have the opportunity to provide an oral or written statement. The Fellow will be notified that he or she will have the results of the review in three weeks or less.
- The Training Committee will meet and review all of the Fellow's work to date, including the identified problems.
- In discussing the problem and the Fellow's response, the Co-Directors of Training and Committee may adopt one or more of the following methods or may take any other appropriate action:
  - Take no further action and inform all parties of this decision.
  - Issue a *Verbal Warning* to the fellow. A Verbal Warning emphasizes the need to engage in recommended amelioration strategies to address the performance problem. No record of this action is kept.
  - Issue a *Performance Notice* (1st written warning). A Performance Notice formally indicates that the training faculty is aware of and concerned with the Fellow's performance and that the problem has been brought to the attention of the Fellow. It also indicates that the faculty will work with the fellow to specify the steps necessary to rectify the performance problems and that the behaviors are not significant enough to warrant serious action. Remediation strategies as described below should be implemented following the issuance of a Performance Notice. A signed copy of the Remediation Plan will be kept in the Fellow's file, as will a copy of the Performance Notice.
  - Issue a *Probation Notice* (1st written warning). A Probation Notice indicates that the training faculty will actively and systematically monitor for a specific length of time the degree to which the Fellow addresses, changes, and/or otherwise improves the problem behavior. The Fellow must be provided with a written statement that includes a description of the actual problem behaviors, the specific recommendations for rectifying the problem, the time frame for the probation during which the problem is expected to be ameliorated, and the procedures designed to ascertain whether the problem has been appropriately rectified. Additional remediation strategies must be implemented at this time. A copy of the Probation Notice and the revised Remediation Plan will be kept in the Fellow's file.
- The Co-Directors of Training will then meet with the Fellow to review the action taken within three weeks of when the Fellow was notified of the review process. If placed on probation, the fellow may choose to accept the conditions or may challenge the decision. The procedures for challenging the decision are presented below (see below Procedures for Appeal by a Fellow).
- Once the Performance Notice or Probation Notice is issued by the Co-Directors of Training, it is expected that the Fellow's performance will be reviewed no later than the next formal evaluation period or, in the case of probation, no later than the time limits identified in the probation statement. If the problem has been rectified to the satisfaction of the faculty, the Fellow and other appropriate individuals will be informed and no further action will be taken.
- If it is determined that the conditions for revoking the probation status have not been met, the Co-Directors of Training may take any of the following actions:

- Continue the probation for a specific time period, with written notice to the Fellow of ongoing steps that must be taken to ameliorate the problem in the specified time frame.
- Issue a written **Suspension Notice** (2nd written warning). This indicates that the Fellow is not allowed to continue engaging in specified professional activities until there is evidence that the behavior in question has improved.
- Issue a written **Warning Notice** (2nd written warning). This indicates that if the problem behavior does not change, the Fellow will not meet the criteria for fellowship completion.
- Issue a written **Termination Notice**. This indicates that the Fellow will be terminated from the fellowship program as of the date specified in the notice.

When the aforementioned interventions do not, after a reasonable period, rectify the problem, or when the Fellow seems unable or unwilling to alter his or her behavior, the
Co-Directors of Training and Committee may take more formal action, including such actions as:

- Giving the fellow a limited endorsement, including the specification of competency domains and practice settings in which he or she is competent to practice. This information will be conveyed to all relevant state psychology licensing boards.
- Communicating to the Fellow that he or she has not completed the training program, with the possibility of continuing for an additional specified period beyond the training year.
- Terminating the Fellow from the training program. This includes issuing a Termination Notice by UAMS Human Resources policies (https://hr.uams.edu/employee-relations/employee-relations-information/). This information will be communicated to all relevant state psychology licensing boards.

Remediation Strategies

When performance problems have been identified and documented as discussed above, the training faculty, in conjunction with the Fellow, will formulate and implement strategies for the remediation of such problems. These strategies will be appropriately documented and implemented in ways that are consistent with due process procedures. Such strategies may include, but will not be limited to the following:

- Increasing supervision time, either with the same or other supervisors.
- Changing the format, emphasis, and/or focus of supervision.
- Strongly recommending personal therapy. Referrals will be provided.
- Reducing the Fellow's clinical or other workload or modifying his or her schedule in other ways.
- Requiring specific academic coursework, didactics, or independent study.
- Recommending, when appropriate, a leave of absence and/or a second fellowship.
- Recommending and assisting in implementing a career change for the Fellow.

Procedures for Appeal by a Fellow

Fellows who wish to contest supervisory actions and decisions must submit a written challenge to the Co-Directors of Training within 10 days of receipt of the faculty decision. Failure to submit a written challenge within 10 days will be taken as assent to the supervisory actions and decisions. Once a written challenge is received, the following steps will occur:

- The Section Chief of Psychology will convene a Review Panel consisting of the Co-Directors of Training, two faculty members selected by the Section Chief of Psychology, two faculty members selected by the Fellow, and a non-Psychology UAMS or ACH Administrator.
- A review hearing will be conducted, chaired by the Section Chief of Psychology, in which evidence is heard from the supervisor(s), who have the right to be present at the hearing.
- The Fellow will retain the right to be present at the hearing, to hear all facts, and to dispute or explain his or her behavior.
- Within 15 days of the completion of the review hearing, the Review Panel will file a written report, including any recommendations for further action. Decisions made by the Review Panel will be made by a majority vote of the five-panel members. The Fellow will be informed of the recommendations by the Section Chief of Psychology and through receipt of a copy of the panel report.
- If the Review Panel finds in favor of the Fellow, no further action against the fellow will be taken. The Section Chief of Psychology will consult with the faculty supervisor(s) concerning the decision.

- If the Review Panel finds in favor of the supervisor(s), the original supervisory action will be implemented.
- The Review Panel may, at its discretion, find neither in favor of the supervisor nor the Fellow. It may instead modify the original supervisory action or issue and implement its own action. In this instance, the Section Chief of Psychology will consult with both the supervisor(s) and the trainee concerning the decision.

Fellow Grievances

Fellows are encouraged to first discuss any problems or concerns with the supervisor or staff member involved. In turn, supervisors and staff members are expected to be receptive to complaints, attempt to develop a solution with the Fellow and to seek appropriate consultation. If these discussions do not produce a satisfactory resolution of the concern, an informal or formal grievance may be filed.

A grievance is defined as an expression of dissatisfaction regarding an aspect of the Fellow's treatment by a supervisor or the organization. Grievances shall be used as due process by those who believe that a rule, procedure, or policy has been applied in an unfair or inequitable manner or that there has been unfair or improper treatment by a person or persons.

Informal mediation: Either party may request the Co-Directors of Training to act as a mediator, or to help in selecting a mediator who is agreeable to both the Fellow and the supervisor or staff member. Such mediation may facilitate a satisfactory resolution through continued discussion. Alternatively, mediation may result in recommended changes to the training environment.

Formal grievance: If informal measures are not successful, or in the event of a serious grievance, the Fellow may initiate a formal grievance process by sending a written request for intervention to the Co-Directors of Training.

- The Co-Directors of Training will notify the Section Chief of Psychology of the grievance and call a meeting of the Pediatric Psychology Fellowship Training Committee to review the complaint. The Fellow and supervisor or staff member will be notified of the date that such a review will occur and will be given allowed the Committee with any relevant information regarding the grievance.

- Based upon a review of grievance and any relevant information, the Pediatric Psychology Fellowship Training Committee will determine the course of action that best promotes the Fellow's training experience. This may include recommended changes within the placement itself, a change in supervisory assignment, a change in rotation placement, or other training modifications.

- The fellow will be informed in writing of the Training Committee's decision and asked to indicate whether they accept or dispute the decision within three weeks of the filing of the grievance. If the Fellow accepts the decision, the recommendations will be implemented. If the Fellow disagrees with the decision, he or she may appeal to the Section Chief of Psychology and a non-Psychology UAMS or ACH Administrator. The Section Chief of Psychology and the non-Psychology UAMS or ACH Administrator will render the appeal decision, which will be communicated to all involved parties, and to the Training Committee.

If a formal grievance involves any member of the Training Committee (including the Co-Directors of Training), that member will recuse himself or herself from participating in the review of the grievance due to a conflict of interest. A grievance regarding the Co-Directors of Training may be submitted directly to the Section Chief of Psychology or non-Psychology UAMS or ACH Administrator for review and resolution. Any findings resulting from a review of a Fellow grievance that involves unethical, inappropriate, or unlawful faculty or staff behavior will be submitted to the Chair of Pediatrics for appropriate personnel action.

These procedures are not intended to prevent a Fellow from pursuing a grievance under any other mechanisms available to UAMS employees, including EEO, or under the mechanisms of any relevant professional organization, including APA or APPIC. Fellows are also advised that they may pursue any complaint regarding unethical or unlawful conduct on the part of psychologists licensed in the State of Arkansas by contacting the Arkansas Psychology Board.

Informal Resolution of Concerns

If a Fellow has any type of concern during their training year, expectations are that the Fellow will first attempt to address the situation directly with the affected individual or individuals. For instance, a Fellow may have concerns about the way they are treated, how supervision is being conducted, ethical or safety concerns, or other issues. If speaking directly with the individual is for some reason not appropriate, the Fellow should first consult with the Co-Directors of Training or designated faculty mentor. If that is also not deemed a viable option, the fellow should then speak with the Section Chief of Psychology. The Fellow may also utilize their year-long supervisor for guidance and support, but this supervisor will not act in a formal capacity to resolve the issue.

Our training faculty strives to provide a supportive and open atmosphere that allows the resolution of any issues within this normal sequence. However, we recognize that the inherently unequal power in the supervisor/supervisee relationship may conceivably lead a Fellow to be reluctant to discuss some concerns with training faculty. Therefore, at any time during the training year, any Fellow who wishes to consult with someone outside of the program is an informal and confidential avenue for discussion and problem-solving.

SUBJECT: BASIC CODE OF CONDUCT

PURPOSE

To outline the general guidelines governing employee conduct and behavioral standards at the University of Arkansas for Medical Sciences ("UAMS").

SCOPE

All UAMS employees, faculty, residents, vendors, volunteers, non-employees, and contractors ("UAMS personnel").

POLICY

This policy outlines the general guidelines for appropriate conduct for all UAMS personnel. UAMS personnel are expected to support UAMS' mission and core values while creating an inclusive and respectful work environment. The ability of UAMS to meet its mission will increasingly depend on, and be strengthened by, incorporating constructive diversity and inclusion in its personnel. To support UAMS' mission and core values and create an inclusive, respectful work environment, all UAMS personnel shall use appropriate conduct as outlined here.

Expectations in Interpersonal Relations

1. Refrain from using abusive, provocative, or profane language, and should avoid creating or being party to a disturbance or physical violence.

2. Observe the principle of mutual respect in their contacts with patients, visitors, and students, and in their working relationships with faculty and other personnel.

3. Treat others with dignity, fairness, and impartiality.

4. Do not engage in horseplay, scuffling, running, throwing objects, immoral or indecent behavior on any UAMS premises.

5. UAMS personnel or guests should not visit other UAMS personnel in their work areas for non-work related purposes. Official breaks with other UAMS personnel should be taken in designated areas to not disrupt the work area.

Workplace Bullying

UAMS does not tolerate workplace bullying behavior, whether intentional or unintentional. Workplace bullying is behavior that creates an abusive work environment for an UAMS personnel.

Bullying behavior is behavior in the workplace that a reasonable person would find hostile, offensive, and not related to an employer's legitimate business interests. Workplace bullying can include group bullying, peer-to-peer bullying, supervisor–to-subordinate bullying, and situations when a subordinate employee subjects a supervisory-level employee to bullying. These acts may occur as a single, severe incident or as repeated incidents, and may include, but are not necessarily limited to, the following:

1. Physical bullying includes pushing, shoving, kicking, poking, and/or tripping another, assault or threat of a physical assault, and damage to a person's work area, work product, or property.

2. Verbal bullying includes: (i) slandering, ridiculing, insulting or maligning a person or that person's family; (ii) persistent name calling that is hurtful, insulting, or humiliating; (iii) using a person as the butt of jokes; or (iv) abusive and offensive remarks.

3. Nonverbal bullying includes directing threatening gestures toward a person or invading personal space after being asked to move or step away.

4. Cyberbullying includes bullying an individual using any electronic format, including but not limited to, the Internet, interactive and digital technologies, or mobile phones.

5. Exclusion includes socially or physically isolating, excluding, or disregarding a person in work-related activities.

Social Media

UAMS expects good judgment to be used when posting on social media sites. Social media activity that violates this Basic Code of Conduct or other UAMS policies may result in disciplinary action in accordance with UAMS *Administrative Guide Policy 4.4.02, Employee Discipline* up to and including termination.

Cellular Phones and Electronic Devices

1. Personal cellular or electronic devices should not be used when they could pose a security or safety risk, or when they distract from assigned or expected work duties.

2. Personal cellular or electronic devices should not be used in the presence of patients and guests unless the use occurs as a part of **official UAMS responsibilities**, while on duty, prior to start of shift, and after shift ends, and while on any UAMS premises.

3. Bluetooth devices should not be worn or used in patient care areas, food preparation areas, common areas, and public areas while on duty, prior to start of shift, and after shift ends, and while on any UAMS premises.

4. During break periods, personal cellular, electronic, or Bluetooth devices **can** be used in designated eating/break areas and not in a manner that will distract others.

5. **Prohibited:** Use of personal cellular or electronic devices on speakerphone, while on duty, prior to start of shift and after shift ends, and while on any UAMS premises.

Physical Appearance and Presentation

1. Certain positions require wearing prescribed uniforms while on duty. Department supervisors or their designees are responsible for informing UAMS personnel of specific requirements. See UAMS *Administrative Guide Dress Code Policy 4.4.21* for details.

2. UAMS expects its personnel to come to work clean, neat, and wearing attire appropriate for the work environment. UAMS personnel should use good judgment and not wear excessive fragrances or extreme hair color. See UAMS *Administrative Guide Dress Code Policy4.4.21* for details.

3. UAMS ID badges are to be clearly visible and worn above the waist. Badges should be removed, but available to present upon request, when not in an official work capacity, while on any UAMS premises. See UAMS *Administrative Guide Dress Code Policy 4.4.21* for details.

4. Reporting to work or being on any UAMS premises while impaired by or under the influence of intoxicating liquor or controlled substances, or by giving the appearance of intoxication, including but not limited to smell of alcohol, is forbidden.

5. Representing UAMS must be done accurately and honestly, including describing job title, description, and position.

6. When not on duty, UAMS personnel should not be on any UAMS premises, except for valid reasons.

Job Duties and Functions

1. UAMS personnel are expected to meet the expectations outlined in the position description including all verbal, written, and posted work assignments and other duties as assigned.

2. Attention, care, and respect must be given when performing job duties.

3. Compliance with all UAMS policies is expected of all UAMS personnel.

Attendance

1. Regular and punctual attendance is expected and should be maintained. Departments should follow their established Attendance Policy for reporting absenteeism from work and appropriately address attendance deficiencies.

2. Permission from their supervisor or the supervisor's designee must be obtained, in advance,

when it becomes necessary to leave the designated work areas during scheduled work hours.

3. At times, it is expected that UAMS personnel, whenever possible, respond to work assignments outside of regularly scheduled hours, as it may be necessary to provide essential staffing or support services to meet business needs.

Maintaining Records

1. Recording work time must be done accurately.

2. Advance approval from the supervisor or designee is expected to work additional hours and shifts.

3. Do not clock in or out for other UAMS personnel.

4. Falsifying or inaccurately entering information on any UAMS or hospital records, including patient records, time records, employment applications or other personnel records is strictly prohibited. Failure to meet this expectation can be grounds for immediate dismissal.

Health and Safety

1. Smoking is prohibited on any UAMS property, including parking lots as UAMS is a smoke-free campus and this activity is not allowed.

2. Sleeping on the job is **strictly forbidden**, except for when in an **on-call status** and should be done only in designated areas approved by the supervisor or designee.

3. Know and observe established fire and emergency procedures.

4. Only authorized UAMS entrances and exits should be used to enter or exit the premises.

5. Establish safe work practices and follow all published safety rules.

Property Access and Use Privileges

1. The use of UAMS Internet is for official business purposes only. Disciplinary action may be taken for any inappropriate use.

2. UAMS telephones, fax machines, and other telecommunication devices are intended for official UAMS business transactions. These resources should not be used for personal reasons, except in cases of an urgent nature or with prior approval from the supervisor.

3. UAMS property and equipment must be used in a safe and proper manner. Making equipment inoperative or failing to use proper safety devices can result in injuries to one's self or others.

4. UAMS property should be used for official business purposes only.

5. UAMS equipment, buildings, and grounds should be kept clean, orderly, and

in good condition. Creating or contributing to unsanitary or unsightly conditions is not permitted.

Solicitations

1. Engaging in solicitation and/or distribution of printed or written material or posting and/or removal of notices or signs is not allowed, unless when explicitly permitted or authorized in advance.

2. Refer to *Administrative Guide Policy 4.4.09, Ethical Conduct/Gift Policy*, regarding gratuities, gifts, or personal favors from vendors, patients, or visitors.

Campus Police and Security Measures

1. Anyone finding property on the main UAMS campus should contact the **Clinical Risk Department at (501) 296-1039** or **Academic Services at (501) 686-5577**, where a lost and found service is provided. UAMS premises away from the main campus should develop lost and found procedures.

2. Packages, handbags, purses, tote bags, briefcases, shopping bags, or other containers being brought into or taken from any UAMS building must be made available for inspection upon request by supervisors or the Campus Police Department.

3. Unauthorized firearms or weapons of any kind **must not**, under any circumstances, be brought onto any UAMS premises, including UAMS parking lots.

4. All criminal acts on any UAMS premises, including UAMS parking lots, are prohibited.

5. Stealing, misappropriating, or unauthorized removal of property from UAMS premises is strictly prohibited. This includes the removal of any discarded UAMS property and sample products.

PROCEDURE

The Division of People and Culture (DPC) should be contacted with any questions related to this policy. Appropriate corrective measures should be taken in instances where there have been violations of this Code of Conduct. Such actions should be undertaken with care, objectivity, and full consideration for the rights and interests of UAMS and its personnel.

REFERENCE

UAMS Administrative Guide Policy 3.1.03, Telephone Use Policy
UAMS Administrative Guide Policy 11.4.01, Employee/Student Incident/Injury Reporting UAMS Administrative Guide Policy 11.4.15, Unsafe Equipment and Furniture

UAMS Administrative Guide Policy 3.1.01, Smoking/Tobacco Use Policy
UAMS Administrative Guide Policy 4.4.02, Employee Discipline
UAMS Administrative Guide Policy 4.4.09, Ethical Conduct/Gift Policy
UAMS Administrative Guide Policy 11.3.07, Workplace Violence Prevention Plan UAMS Administrative Guide Policy 2.1.42, HIPAA Sanctions Policy
UAMS Administrative Guide Policy 2.1.08, Reporting of HIPAA Violations UAMS Administrative Guide Policy 4.4.21, Dress Code/Appearance



Signature: _____ **Date:** **August 10, 2023**

Evaluation Forms

Fellowship Competency Evaluation

Name of Psychology Fellow:
* must provide value

Name of Faculty Providing Rating:
* must provide value

Indicate which rotation(s) is being evaluated:
* must provide value

Indicate the assessment method(s) you used for the present evaluation:
* must provide value

- [ ] Direct Observation
- [ ] Case Presentation
- [ ] Review of written work
- [ ] Review of raw test data
- [ ] Discussion of clinical interaction
- [ ] Comments from other staff
- [ ] Other

Specify the training experience you supervised:
* must provide value

Level of Supervision

Unexpected Intensive Supervision Required (1): Frequent and routine supervision of each activity in areas where the Fellow should be expected to function more autonomously given their education, previous training, and/or previous supervision in this area.

Expected Intensive Supervision Required (2): Frequent and routine supervision of each activity as expected throughout fellowship; use when the Fellow has no prior experience with activity or in specialty area that requires intensive training (e.g. the first rotation of Autism assessment for a general track trainee)

Moderate Supervision Required (3): Supervisor provides overall management of fellow's activities, competency attained in all but non-routine cases, depth of supervision varies as clinical needs warrant-common level of supervision through fellowship

Minimal Supervision Required (4): Rating expected at completion of postdoctoral training, competency attained at full psychology staff privilege level; however, supervision still required while in unlicensed or training status

Rate the level of supervision the fellow required for each professionalism objective:

	Unexpected Intensive Supervision Required (1)	1.5	Expected Intensive Supervision Required (2)	2.5	Moderate Supervision Required (3)	3.5	Minimal Supervision Required (4)	Not Applicable
Effectively presents and tailors clinical information to a range of individuals (children, parents, older health professionals, lay audiences) * must provide value	○	○	○	○	○	○	○	○
Leads inter-professional teams providing health and behavioral services to children and families * must provide value	○	○	○	○	○	○	○	○
Teaches students and trainees regarding local mental health laws and ethical issues relating to clinical work in pediatric psychology * must provide value	○	○	○	○	○	○	○	○
Educates others regarding issues ○ **relating to work with diverse clients and families (race, ethnicity, age, sex, sexual orientation, disability status)** * must provide value		○	○	○	○	○	○	○
Models appropriate professional boundaries and behavior for trainees and other professionals * must provide value	○	○	○	○	○	○	○	○
Conducts ongoing self-reflective practice regarding one's own health behaviors and reactions to working with children and their families under conditions of acute and chronic stress * must provide value	○	○	○	○	○	○	○	○
Participates in continuing education ○ **focused on pediatric psychology** * must provide value		○	○	○	○	○	○	○

Summarize the fellow's professionalism strengths and needs:

Interpersonal: Rate the level of supervision the fellow required for each interpersonal objective:

	Unexpected Intensive Supervision Required (1)	1.5	Expected Intensive Supervision Required (2)	2.5	Moderate Supervision Required (3)	3.5	Minimal Supervision Required (4)	Not Applicable
Provides written and oral communication that facilitates collaboration with parents, families, and other professionals * must provide value	○	○	○	○	○	○	○	○
Effectively facilitates communication ○ **between patients, families, and other professionals** * must provide value		○	○	○	○	○	○	○
Provides consultation to patients, ○ **families, and other professionals tailored to their needs and understanding** * must provide value		○	○	○	○	○	○	○
Integrates knowledge of team organization, relevant systems and policies, and relationship-building principles to promoting effective relationships among teams * must provide value	○	○	○	○	○	○	○	○
Uses effective strategies to maintain ○ **challenging relationships** * must provide value		○	○	○	○	○	○	○

Summarize the fellow's interpersonal strengths and needs:

Did you supervise any of the fellow's research/science activities this rotation?

* must provide value

○ Yes
○ No

Did you supervise any of the fellow's clinical practice activities this rotation?

* must provide value

○ Yes
○ No

Did you supervise any of the fellow's educational activities this rotation?

○ Yes

* must provide value

- ○ No

Did you supervise any of the fellow's system activities this rotation?

* must provide value

- ○ Yes
- ○ No

Individualized Goals

Please identify the goal(s) the supervisor and fellow established for this rotation:

Were the established goals met?

- ○ Yes
- ○ No

Please provide additional feedback areas of strength and need for the fellow.

Conclusion

Please provide any additional, more general positive comments regarding the fellow:

Please provide any additional, more general positive comments regarding the fellow's need of additional development or remediation, including recommendations:

Has the fellow successfully completed the rotation(s)?

* must provide value

- ○ Yes
- ○ No

Select "No" if Unexpected Intensive Supervision was identified more often than not in one or more areas of the competency domains.

Has this evaluation been reviewed with the fellow?
* must provide value

- ◯ Yes
- ◯ No

Supervisor's Signature
* must provide value

Date
* must provide value

M-D-Y

Submit

Save & Return Later

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Supervision Evaluation Form

Name of Fellow:
* must provide value

Name of Faculty:
* must provide value

Science

	Not applicable	Poor (1)	Below Average (2)	Adequate (3)	Good (4)	Excellent (5)
Demonstrated knowledge of biological, cognitive, social, affective, sociocultural, and life span developmental influences on children's health and illness * must provide value	◯	◯	◯	◯	◯	◯
Provided and/or reviewed scientific literature relevant to the science of pediatric psychology * must provide value		◯	◯	◯	◯	◯

Systems

	Not applicable	Poor (1)	Below Average (2)	Adequate (3)	Good (4)	Excellent (5)
Understands how other systems (e.g., school, health care, state and federal policies) affect pediatric health and illness and a child's adaptation to illness * must provide value		◯	◯	◯	◯	◯
Understands the roles of other disciplines in health service delivery systems * must provide value	◯	◯	◯	◯	◯	◯

Professionalism

	Not applicable	Poor (1)	Below Average (2)	Adequate (3)	Good (4)	Excellent (5)

Available for supervision during the established times as well as on an "as needed" basis	◯	◯	◯	◯	◯

* must provide value

Communicated in a professional and respectful manner relating to all verbal, nonverbal, and written communication * must provide value		○	○	○	○	○
Created an environment that facilitated safe discussion of diversity, socioeconomic factors, family systems, and access to care in relation to health disparities in children * must provide value	○	○	○	○	○	○

Relationships

	Not applicable	Poor (1)	Below Average (2)	Adequate (3)	Good (4)	Excellent (5)
Willing to assume or adapt the supervisory relationship to fulfill the many roles of a supervisor (e.g., consultant, educator, advocate, community liaison) * must provide value	○	○	○	○	○	○
Helped develop or sustain collaborative relationships to promote healthy interprofessional team functioning characterized by mutual respect and shared values * must provide value	○	○	○	○	○	○

Application

	Not applicable	Poor (1)	Below Average (2)	Adequate (3)	Good (4)	Excellent (5)
Promoted use of current evidence-based interventions appropriate for primary care, subspecialty clinics, or inpatient consults to treat health and mental health related issues * must provide value	○	○	○	○	○	○
Understands pediatric acute and chronic illness, injury conditions, and medical management from the medical literature, including the effects of disease process and medical regimen on child emotional, cognitive, social, and behavioral development	○	○	○	○	○	○

Education

	Not applicable	Poor (1)	Below Average (2)	Adequate (3)	Good (4)	Excellent (5)
Adapts teaching methods to support ◯ **my areas of strength while also developing new skill sets and knowledge** * must provide value		◯	◯	◯	◯	◯
Incorporates and/or encourages educational opportunities from other disciplines (e.g., Grand Rounds, Faculty Lectures) * must provide value	◯	◯	◯	◯	◯	◯

Did you and your supervisor create specific supervision objectives at the beginning of the rotation?

* must provide value

◯ Yes

◯ No

Comments:

Fellow Signature

* must provide value

* must provide value

M-D-Y

Submit

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