



**YALE
SCHOOL OF
MEDICINE**

Department of Neurology

Division of
Neuropsychology

**Adult
Neuropsychology
Residency**

CONTENTS

Overview

Supervisors

Institutions and Program Description

Training Activities

Salary and Benefits

Application Procedures

Campuses

Life in Connecticut

Evaluation and Grievance Policies



OVERVIEW

PROGRAM PHILOSOPHY:

The mission of the Yale Neuropsychology Postdoctoral Residency is to educate and train clinical neuropsychologists in the competencies necessary for the practice of clinical neuropsychology, as outlined in the *Taxonomy for Education and Clinical Neuropsychology*. The program meets all requirements of the Houston Conference Guidelines and the Association of Postdoctoral Programs in Clinical Neuropsychology (APPCN). The program is anchored in a scientist-practitioner tradition, providing residents with training in both clinical and academic practice. This two-year program is designed to be the final training experience that allows residents to become independent clinical neuropsychologists. After completion, residents will be eligible for board certification by the American Board of Professional Psychology (ABPP).

YEAR 1 (Junior Resident)

- Generalist Neuropsychology Training
- Greenwich Hospital Campus
- Primary Supervisor: Stephanie Towns, PsyD, ABPP

YEAR 2 (Senior Resident)

- Specialty Neuropsychology Training
- Yale New Haven Campus
- Primary Supervisor: Emily Sharp, PhD, ABPP

IMPORTANT INFORMATION:

Program Orientation: 75% Clinical; 10% Research; 10% Education; 5% Administrative

Application Deadline: December 20th

Residency Interview: In person at annual INS conference or via zoom.

Residency Start Date: July 1st

Residency Salary: GME Scale: Year 1= PGY2 (post grad year 2); Year 3 = (PGY3)
<https://www.ynhh.org/medical-professionals/gme/resources/house-staff-benefits.aspx>



SUPERVISORS



Stephanie Towns, PsyD, ABPP-CN, Residency Program Director

Dr. Towns specializes in the assessment of patients with a variety of neurological diseases, such as neurodegenerative disorders (e.g., Alzheimer's disease), traumatic brain injury, and Parkinson's disease. Her research is focused on the relationship between cognition and sleep in patients with neurological disease. Dr. Towns is located in the Greenwich, CT office.



Emily Sharp, PhD, ABPP-CN, Chief, Division of Neuropsychology, Associate Program Director

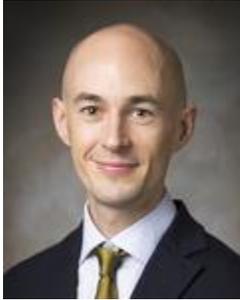
Dr. Sharp specializes in the assessment of neurodegenerative disorders (e.g., Alzheimer's disease) and Parkinson's disease (e.g., DBS surgery evaluations) as well as other neurologic conditions. Dr. Sharp is a member of the clinical core of the Yale Alzheimer's Disease Research Center (ADRC). Her research has focused on the relationship between cognitive engagement and cognitive decline.



Franklin Brown, PhD, ABPP-CN

Dr. Brown specializes in the cognitive assessment of epilepsy (and epilepsy surgery consultations), oncology (both neurological and chemotherapy effects), multiple sclerosis and neurodegenerative disorders. His research focuses on visual memory, cognitive inefficiency, and using tests to differentiate etiologies for cognitive decline. Dr. Brown developed the Brown Location Test, which he continues to research in temporal lobe epilepsy patients and has expanded this research to examine cognitive inefficiency in MS and oncology patients.





Christopher Benjamin, PhD

Dr. Benjamin is a neuropsychologist and neuroscientist specializing in adult epilepsy. After training in Australia, he completed his research training at Children's Boston/Harvard Medical School in fMRI and DWI for surgical planning, and his postdoctoral fellowship in clinical neuropsychology at UCLA's Semel Institute. His research centers on the use of cognitive assessment and functional MRI for presurgical mapping of language and memory.



Carmen I. Carrión, PsyD

Dr. Carmen Carrión is an English/Spanish bilingual clinical psychologist who provides culturally informed neuropsychological evaluations to individuals presenting with diverse clinical conditions. Her clinical and research interests include memory and neurodegenerative disorders with a focus on how demographic factors influence the manifestation of neurological syndromes. Dr. Carrión is a member of the Alzheimer's Disease Research Center (ADRC) and is actively involved in investigating the correlation between contextual disadvantages and the incidence and manifestation of neurodegenerative disorders.



Lucas Driskell, PsyD

Dr. Driskell specializes in the assessment of individuals with cerebrovascular diseases (e.g., stroke, CADASIL) and neurodegenerative disorders (e.g., Alzheimer's disease, dementia with Lewy bodies). Outside of his clinical practice, he has a particular interest in advancing education, training, and advocacy within the specialty of neuropsychology, as well as education of the general public (SciComm).



Timothy Belliveau, PhD, ABPP – CN, RP

Dr. Belliveau specializes in assessment and rehabilitation after traumatic injuries. His research interests include the assessment of performance validity during cognitive exam, measurement of patients' post-injury expectations, and the development of models for complex diagnostic and prognostic classification.





Alice Perez, PhD

Dr. Perez is a bilingual neuropsychologist who conducts neuropsychological assessments in both English and Spanish. Her clinical activities involve conducting neuropsychological evaluations to individuals with various conditions, including neurodegenerative diseases, autoimmune disorders, and other neurological diseases. Recently, her research interests include assessing cognitive impairment in incarcerated individuals. She also has a background in basic neuroscience research.



INSTITUTIONS and PROGRAM DESCRIPTION

MISSION

The Yale School of Medicine's mission is to educate and nurture creative leaders in medicine and science, promoting curiosity and critical inquiry in an inclusive environment enriched by diversity. We advance discovery and innovation fostered by partnerships across the University, our local community, and the world. We care for patients with compassion and commit to improving the health of all people.

The mission of the Neuropsychology Residency Training Program is to develop advanced competencies in the clinical practice of neuropsychology with the following key goals:

- To learn the principles and methods of neuropsychological evaluation, in accordance with the foundational and functional competencies of neuropsychology as outlined in the *Taxonomy for Education and Training in Clinical Neuropsychology*
- To gain an understanding of brain-behavior relationships in the context of a variety of neurological, psychiatric, and medical diseases.
- To become skilled in providing culturally sensitive neuropsychological evaluation of patients from diverse racial, ethnic, and socioeconomic backgrounds.
- To design and execute clinical neuroscience research.

PROGRAM OVERVIEW

The program is administered through the Department of Neurology. The residency program accepts one resident per year. Each year, there is a first year (junior) and second year (senior) resident. These residents join other neuropsychology trainees including externs and interns. Our program primarily emphasizes the assessment of cognitive symptoms of neurological disorders in a diverse patient population. The majority of the training experiences will be conducted in outpatient neuropsychology clinics, in consultation with neurology and neurosurgery. The patient population includes adults over 18 with a variety of neurological, psychiatric, and medical disorders, including: Alzheimer's disease and other neurodegenerative diseases, Parkinson's disease and other movement disorders, cerebrovascular disease, multiple sclerosis, brain tumors, other cancers, traumatic brain injury, epilepsy, as well as less common neurological disease processes.



The program is housed within the department of Neurology on two campuses (<https://medicine.yale.edu/neurology/divisions/>). The first year of the Yale Neuropsychology Postdoctoral residency is designed as a generalist experience, located in outpatient facilities of Greenwich Hospital, in Greenwich, CT. Residents can expect to receive referrals from neurology, neurosurgery, geriatrics, psychiatry and primary care. Referral questions will range from dementia diagnosis to assessment of traumatic brain injury sequelae in a given week. During the second year, residents will move to the Yale New Haven Hospital campus where they will have the opportunity to select more focused rotations in neurodegenerative disease, movement disorders/DBS, epilepsy, multiple sclerosis, neuro-oncology, stroke, and/or traumatic brain injury. Additionally, residents who are proficient in Spanish can receive additional training in bilingual neuropsychological assessment. During their time at each campus, residents will have access to dedicated workspace, computer, and library services.



RESIDENCY TRAINING ACTIVITIES

CLINICAL EXPERIENCES

Residents will rotate among at least three different supervisors over the course of their residency, with options for tailoring their experience based on interests and training goals. Clinical rotations will be split between the Greenwich, CT and New Haven, CT campuses.

During the first year of the residency, the trainee will be required to rotate with Dr. Towns on the general neurology service. The Greenwich neuropsychology clinic provides assessment for all the neurology providers within the healthcare system (and many outside providers) in southern Connecticut. As such, the referral question will range widely and might include: memory disorders, movement disorders, stroke, traumatic brain injury, and neuro-oncology.

In the resident's second year, they will be permitted to tailor their experiences for greater specialization. These may include more focused rotations in memory disorders, movement disorders, bilingual assessment, presurgical epilepsy, multiple sclerosis, neuro-oncology, and neurovascular assessment. Each of these rotations will also include some portion of generalized neurology assessment as well. Residents are expected to choose at least two of these experiences but will have the opportunity to complete up to four or five.

Residents are expected to complete at least two outpatient neuropsychological assessments per week and may complete up to four as each rotation allows. The number of assessments conducted per week will vary with the level of the resident's skills/comfort level and the complexity of the assessments conducted. The typical outpatient testing battery is two to four hours and is determined based on the referral question. Residents will be expected to conduct their own testing on the majority of patients, although tiered supervision of extern level trainees is available on some rotations.

Residents also have several multidisciplinary opportunities including attendance in the neurology resident noon lecture series, geriatric psychiatry lecture series, neuroimaging series, neuropathology brain cutting series, Wada, and ADRC case consensus conferences. When offered, residents will have the opportunity to take Dr. Hal Blumenfeld's course based on his exceptional book, "Neuroanatomy through Clinical Cases." Residents will have the opportunity to take the lead on and/or collaborate on existing faculty research. Beyond, the school of medicine, Yale University offers the insatiable mind endless opportunities for lectures, arts, and culture.

RESEARCH EXPERIENCES



Residents are expected to complete one to two research projects over the course of their residency. Research projects may include investigator driven projects, collaborative projects (e.g., within the ADRC), educational projects, and/or program development and evaluation projects. Each year/project requires a product for presentation, which can be at the Yale Med-Ed day, the Neurology Research blast day, and/or an annual neuropsychology conference presentation. The second-year project should culminate in a poster/paper presentation or a peer-reviewed manuscript publication. Residents are provided with at least 4 hours of protected research time per week. At the beginning of their residency, they will meet with a research mentor to conceptualize and map out their research project(s). Research mentors may change as the residency progresses based on faculty availability and resident interests.

DIDACTIC LEARNING OPPORTUNITIES

Required weekly didactic experiences include: Group Supervision, Neuropsychology Seminar, Neurology Grand Rounds, Neurology Clinical Grand Rounds, and Neurology Morbidity and Mortality Conference. Other didactic experiences (depending on year/rotation) include: Clinical Neuroscience Grand Rounds, Epilepsy Surgery Conference, Epilepsy Fellowship Lecture, DBS Surgery Conference, Movement disorders video rounds, ADRC Case Conference, Neuropathology/Brain Cutting, and Neuro-oncology Lecture.

The Neuropsychology seminar will include didactic presentations about neuroanatomy and neurological disease syndromes, professional development seminars, and board certification practice exams/fact-finding sessions designed to prepare the resident to successfully take their board exams upon completion of the residency.

SUPERVISION

Residents will be expected to begin the program with clear competence in neuropsychological testing and scoring, medical record review, and report writing skills. Throughout the course of the program, residents will progress to increasing levels of independence including conducting clinical interviews, interdisciplinary consultations, didactic seminar presentations, and feedback sessions. Residents will participate in *at least two hours per week* of individual supervision with their primary rotation supervisor. Residents will also participate in a *1-hour weekly group supervision* with other residents, interns, and externs. In addition to clinical supervision, residents will meet monthly with their research mentor and the program director to review progress and address any concerns.

COMPETENCIES

The primary goal of the Yale Neuropsychology residency is to provide residents with the experience and training necessary to allow them to practice as independent clinical neuropsychologists at the level of competency outlined in the *Application of a Competency Model to Clinical Neuropsychology* (Rey-Casserly, Roper, Bauer, 2012). At the completion of the residency, trainees are expected to reach competency (as outlined in the article above) within each of the areas outlined below.



Foundational Competencies include:

1. Professionalism
2. Individual and cultural diversity
3. Ethical, legal standards, and policy
4. Reflective practice/self-assessment/self-care
5. Relationships
6. Scientific knowledge and methods
7. Research/evaluation

Functional Competencies include knowledge-based and applied competencies in:

1. Evidence-based practice
2. Assessment
3. Intervention
4. Consultation
5. Teaching/Supervision
6. Systems



CAMPUSES

YALE NEUROPSYCHOLOGY LOCATIONS

Greenwich Hospital – Yale New Haven Health

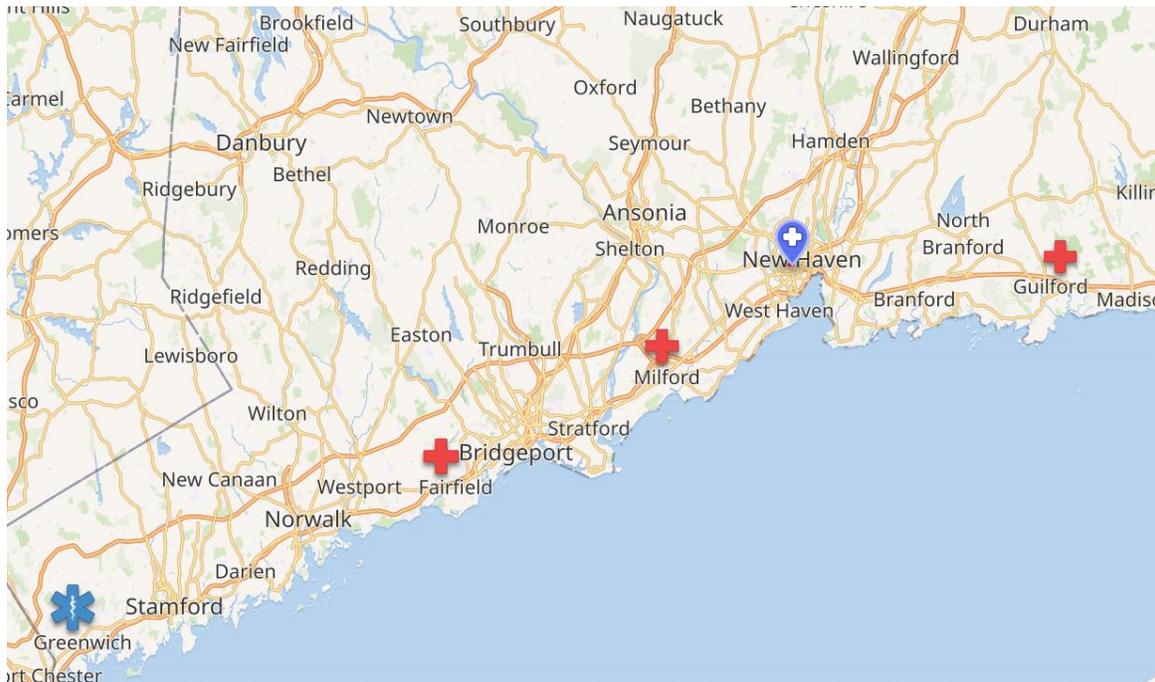
55 Holly Hill Lane
Greenwich, CT 06830

New Haven Campus – Yale New Haven Health

800 Howard Ave, LL
New Haven, CT 06519

Additional Neuropsychology Clinics/Supervisor Locations:

- Yale Medicine/YNHH – Milford
- Yale Medicine/YNHH – Fairfield
- Yale Medicine/YNHH – Guilford



SALARY and BENEFITS

The resident's salary follows NIH guidelines for postdoctoral residents. In addition to salary, residents are provided with \$1400 of professional development funds. Health insurance is provided. Vacation, sick leave, family leave, and professional leave are all available, consistent with existing policy's regarding resident leave. Department policy offers 10 days of personal vacation leave, in addition to federal holidays. See <https://www.ynhh.org/medical-professionals/gme/resources/house-staff-benefits.aspx> for more information.

APPLICATION PROCEDURES

The application process includes submission of the following: a cover letter articulating goals and experiences; curriculum vitae; three letters of reference (preferably including at least one letter from an internship neuropsychologist supervisor and at least one from an ABPP/CN neuropsychologist); two sample case reports; APPCN Verification of Completion of Doctorate, and graduate school transcripts. If you have not completed your dissertation at the time of your application, please include a letter from the chair of your dissertation committee indicating the status of your project and your anticipated date of completion. Please also include information on the status of your dissertation in your cover letter. Materials should be submitted online through the APPA CAS Postdoctoral Fellowship application portal. The link to this portal is: <https://appicpostdoc.liaisoncas.com/>

Other material that the candidate would like the Program Selection Committee to consider is welcome. Applications are due by December 20th of the year prior to when the fellowship begins (e.g., 2022-24 position applications are due December 20, 2021). Applicants are notified of their application status prior to the February meeting of the International Neuropsychological Society (INS). Applicants selected for further consideration typically interview with our faculty at the INS meeting although other interview formats (video interview or in-person interview) may also be utilized if the candidate is unable to travel to INS.

Our Program participates in the APPCN Match Program. We rank all competitive applicants. Applicants are provided feedback about their status in accord with APPCN guidelines. If you are applying to our program and receive a pre-emptive offer from a non-APPCN program, we encourage you to contact us to discuss your ranking with us.



We follow all APPCN regulations concerning communication during the match, but these regulations allow us to provide you information about your status with our program.

Life in Connecticut

Connecticut has many historical, cultural, scientific, and academic spaces. Greenwich and New Haven are connected by the MTA Metro North train line. This convenient train access continues to Philadelphia to NYC to Boston and beyond. Greenwich CT is one of the best kept secrets of the resident experience at Yale is life in New Haven (aka Elm City) a major cultural, scientific and academic hub located between Boston and New York. See these excellent resources:

For more information on life at Yale and in New Haven see:

[Life at Yale \(Yale University\)](#)

[Living in New Haven](#)

[City of New Haven](#)

For more information on life in Greenwich see:

[8 Reasons to Live in Greenwich](#)

[Life in Greenwich](#)



Evaluation and Grievance Policies

Residents will undergo written evaluation every six months completed by their primary rotation supervisor. These evaluations (available upon request) are based on the competencies outlined above, with the expectation that the resident will become proficient in all competency areas listed. Residents who are not performing at the expected level of competence will be placed on a competency remediation plan (based on that provided by the American Psychological Association), which will include specific competencies not reached, a description of the problem within each domain, dates of intervention/informal discussion of problems, steps already taken by trainees and supervisors to address the problem, and a specific remediation plan with dated timeline for trainee and supervisor responsibilities for helping to trainee reach the appropriate level of competency, as well as, consequences for unsuccessful remediation.

Residents will evaluate the training program annually (along with trainees at other levels to allow for anonymity). Verbal feedback will be requested regularly during supervision and sessions with the program director. Residents who feel uncomfortable or unable to voice concerns to the program director are encouraged to approach the associate program director or division head with any concerns.

If a Resident is unable to resolve his/her problem, a grievance may be initiated through the Director/Associate Dean of GME. A written statement setting forth the basis for the grievance and the outcome or remedy sought shall be submitted to the GME Coordinator, who will give it to the Chairperson of the GMEC. To be accepted for consideration, a grievance must be initiated by the Resident within ten (10) working days of the time he/she first had knowledge of the incident that gave rise to the grievance. The Chair of the GMEC shall then arrange a meeting with the House Officer to select the grievance panel. The panel will be immediately notified and shall meet with the resident within fourteen (14) working days after receiving the Step 1 appeal. The panel shall conduct a review of the grievance, shall develop the facts and information which are relevant to the grievance, shall meet with all other relevant parties and shall issue a written decision. The panel's decision shall be issued within fourteen (14) working days of the meeting. A copy of the decision shall be given to the Resident and to the GME Coordinator, who shall give it to the GMEC Chairperson.

If the Resident is not satisfied with resolution of the Grievance at Step 1, the Resident may appeal to Step 2 of the Grievance Procedure. This appeal must be in writing and comply with the requirements of paragraph F under Policy above, 2 copies must be submitted to the GME Coordinator, within seven (7) working days after receiving the Step 1 decision. He/she will



deliver the appeal to individuals who will hear the Step 2 grievance. In the event a grievance is not appealed to Step 2 within the seven (7) working day time frame, the Step 1 decision shall be considered final.

A second step grievance will be reviewed by one of the following, depending on the salary source of the Resident: 1) Chief of Staff/Senior Vice-President for Medical Affairs of Yale-New Haven Hospital, 2) Representative of the Dean, Yale University School of Medicine. Either the panel or the Chief of Staff, as applicable, shall meet with the resident within fourteen (14) working days after receiving the Step 2 appeal. The Chief of Staff/Representative of the Dean shall conduct a review of the grievance and reach a written decision promptly. The Chief of Staff's /Representative of the Dean's decision shall be issued within ten (10) working days of his/her meeting with the Resident. Either decision shall be deemed final and binding on all concerned parties.

For additional information about institutional grievance policies, residents can visit the House Staff Handbook at <https://www.ynhh.org/medical-professionals/gme/resources/handbook.aspx>

