From the Editor’s Desk

As I put together my final installment of Grand Rounds, I was struck yet again by how crucial psychologists’ work is to the missions of AHCs and to society at large. In this issue of Grand Rounds, we highlight clinical and educational innovations in response to COVID-19 and set forth initiatives to promote professional well-being and diversity, equity, and inclusion within APAHC. In the midst of a pandemic and grappling with the racism embedded in so many systems in our country, psychologists’ contributions can offer guidance. Whether caring and advocating for patients or each other, our voices must be heard. I look forward to continuing to follow the amazing things our members are doing and want to take one last opportunity to encourage you to submit to Grand Rounds your achievements in education, research, clinical practice, advocacy, leadership, and any other professional pursuits.

We ourselves feel that what we are doing is just a drop in the ocean. But the ocean would be less because of that missing drop.

-Quote attributed to Mother Teresa
Well-being can be understood as the experience that includes having good mental health, high life satisfaction, a sense of meaning or purpose, and the ability to manage stress. It is not only for our patients or clients. Professional well-being is a topic that is timely and needed for all of us, particularly in the midst of the current pandemic and racial unrest. Interestingly, though, the collaboration between three APA divisions which focused on professional well-being started nearly two years ago when it became apparent that several members of the Association of Psychologists in Academic Health Centers (APAHC) were providing services in medical settings that focused on the well-being of health care providers and learners (i.e., medical students, residents). With increasing amounts of data indicating substantial physician burnout, psychologists began to ask how we could address some of our own needs around professional well-being for psychologists specifically. Communications to members of APAHC revealed a large interest in professional well-being efforts. In addition, those spearheading the interest in APAHC began collaboration with Divisions 38 (Society for Health Psychology) and 54 (Pediatric Psychology), both of whom had already created targeted interest groups on the same topic. Interested members of all three divisions were invited to join a chat room that allowed for open discussions and sharing materials across divisions. Representatives from each of these three divisions continue to meet monthly to discuss ideas and strategies. Currently, a workgroup (Nathaly Shoua Desmarais, PsyD, Suzanne Danhauer, PhD, Sasha Jaquez, PhD, Allison Dempsey, PhD, Lauren DeCaporale, PhD, Lori Dudley, PhD, and Kimberly Reynolds, PhD) is conducting a survey regarding professional well-being needs during the pandemic. The idea behind the survey is to understand the challenges psychologists are facing and create toolkits that we can make broadly available to other psychologists to enhance well-being and resilience for various professionals (medical providers, psychologists, learners, and other professional groups). Workgroups and interest groups provide an opportunity for members to develop a community around a shared interest that can lead to significant project productivity including conference presentations, workshops, publications, and national advocacy efforts and a great way to network with colleagues. The members of this workgroup look forward to a significant impact on our colleagues and their broader communities.

Interdivisional Workgroup on Professional Well-being

Nathaly Shoua Desmarais, PsyD
Florida International University
Herbert Wertheim College of Medicine

Suzanne Danhauer, PhD
Wake Forest School of Medicine

Click HERE to be added to the workgroup communication site!

APAHC 2021 is going virtual!

Abstracts accepted through Sep. 28

SAVE THE DATE
MARCH 4-5, 2021

CALL FOR ABSTRACTS NOW OPEN
HTTPS://AHCPSYCHOLOGISTS.ORG/APAHC-CONFERENCES-2021/

“Academic Health Center Psychologists as Agents of Change: Leadership, Innovation, & Resilience”
The COVID-19 pandemic struck, and the world irrevocably changed. In addition to increased health risks, daily routines are upended by school and work closures, and under-resourced families must cope with increased responsibilities. The virus creates a new normal marked by doubt, fear, depression, lack of trust, and an unsure future. People need to adapt to a dynamic state of “unknown unknowns.” Intolerance of uncertainty represents a transdiagnostic diathesis for clinical anxiety. Further, uncertainty intolerance catalyzes anxiety, and in turn, influences how young patients perceive pain, moods, and the ability to cope. This article explores how the pandemic accelerates this core vulnerability factor for anxiety in pediatric patients with subacute and severe chronic conditions and delineates treatment options to mitigate their distress.

Intolerance of uncertainty (IU) refers to an extreme discomfort with or inability to manage situations with a large number of unknown variables. Experimental manipulations demonstrate that increasing IU results in higher levels of worry. IU is a cognitive vulnerability for pathological anxiety, which is often triggered during developmental years. As a factor of anxiety symptom severity, IU may serve as a red flag for future generalized anxiety disorder and comorbid affective psychopathology in children.

Intolerance is linked to increased health anxiety in pediatric populations with severe chronic illnesses such as congenital heart disease, chronic kidney disease, and systemic lupus erythematosus. While the same connection is not demonstrated for subacute chronic illness, studies show elevated anxiety levels in pediatric populations with diabetes, functional abdominal pain, and asthma. These findings should alert healthcare providers to the probability that anxiety will increase significantly among children with chronic medical conditions.

This pandemic activates a particular sensitivity to uncertainty that may amplify the relationship between chronic illness and internalizing disorders. As pre-existing illnesses indicate higher risk for COVID-19 infection and complications, hypervigilance to somatic sensations may result. For immunocompromised patients, fear of contamination and avoiding contact with other people and public spaces are not new but now are emotionally intensified.

Children with chronic diseases are likely experiencing delay in care visits, causing more family stress. Elevated parental health anxiety during COVID-19 is driven by concern for their children and conflicting information from authorities and media outlets. Higher situational demands (such as self-isolation, additional abstract safety rules, increased pressure to stay clear to avoid COVID-19) limit effective coping strategies which may also contribute to heightened anxiety.

Continues on next page
Not surprisingly, the COVID-19 public health crisis demands innovation in behavioral health care delivery. Fortunately, pediatric psychologists working in general and specialty care clinics are well equipped to meet these emerging imperatives. Recognizing that intolerance of uncertainty and fear of loss of control is both common to pediatric patients diagnosed with a variety of chronic as well as acute medical conditions and is ignited by the pandemic gives clinicians a running start on their initial functional analyses. Once treatment targets are identified and personalized, interventions need to be effective, efficient, and scalable.

CBT represents the gold standard for treating anxiety and depressive spectrum disorders in youth.\textsuperscript{14,15} Additionally, CBT is increasingly the “go to” approach to caring for pediatric patients with comorbid physical and behavioral health conditions.\textsuperscript{16} Moreover, recent advances in CBT include more modular, transdiagnostic, and unified procedures that foster flexibility, applicability, as well as scalability.\textsuperscript{17,18,19} As the 50-minute hour is becoming relatively rare in most integrated healthcare and other high volume settings, these pioneering models are especially valuable.

Fortunately, child psychotherapy owns a ready “stockpile” of evidence-based procedures.\textsuperscript{20} Psychoeducation, target monitoring/measurement-based care, behavioral activation, and cognitive restructuring are recommended interventions for depressive spectrum disorders. Psychoeducation, target monitoring, relaxation, exposure, and cognitive restructuring are good choices for anxiety disorders. Further, classic parent management techniques such as praise, attention, time-out and response options nicely fit the bill for disruptive/non-compliant behaviors. PracticeWise maintains a website of materials, treatment pathways, progress monitors, and procedural summaries detailing the specific intervention videos describing the interventions. This handy resource is especially valuable for providers working in pediatric primary and specialty care settings. Finally, these techniques are readily applicable to telehealth applications.

All pandemics create uncertainty. Families experience sudden losses of consistency and lowered perceived control.\textsuperscript{21} Youth with chronic medical conditions face increased risk of psychological sequelae enhanced by IU. Access to behavioral health resources is critical during this public health crisis. Pediatric psychologists are frontline workers uniquely positioned to mitigate exacerbation or development of psychological symptoms by targeting pandemic-related uncertainty in these patients. They can draw on existing resources of evidence-based interventions such as modular transdiagnostic CBT practices that are well-suited for integrated healthcare settings.
Diversity, Equity, and Inclusion: APAHC Strategic Initiatives

The APAHC Board is committed to supporting diversity, equity, and inclusion (DEI) initiatives within the association as well as nationally. Toward that end, the Board members have discussed and created this list of Strategic Initiatives.

Presidential Trio

Catalyze and support the development of strategic initiatives of other committees as well as the implementation and evaluation of DEI initiatives over the next five years with a review and new goal-setting at that time in support of a long-term, sustained effort. Work toward an even more diverse board with efforts to engage/recruit APAHC members who are Under Represented Minorities (URM; broadly defined) to join board committees and run for board positions. Develop a culture of inclusion on the board, modeling self-reflection and awareness of bias.

Diversity & Health Disparities

Serve as the experts and collaborators with all DEI board initiatives. Lead endeavors to promote racial literacy and a climate of social justice for APAHC members as well as for the communities we serve. Collaborate with other committees such as membership recruitment initiatives, speaker/article requests, webinar, newsletter, and conference planning that highlights DEI content. This collaboration may take many forms, including liaisons to the other committees. Provide insight and creative ideas utilizing their committee for brainstorming and when appropriate as subject matter experts.

Membership

Develop benchmarks for current membership demographics: gender, race, ethnicity. Revise membership questions on website to include sexual orientation, religion, disability to benchmark those as well. Engage in intentional membership recruitment efforts targeting URM (broadly defined) to improve these numbers over the next 5 years.

Treasurer/Finance Committee

Work with board members to develop a budget that can support DEI initiatives within the context of a balanced budget that supports fiscal stability so that APAHC can support these efforts long-term.

Division 12 Representative

Work with Division 12 on any joint DEI initiatives. This may include the emerging Division 12 Mentorship program with which APAHC could partner. Assist with dissemination of DEI efforts in Division 12 Newsletter to serve as a model for other sections of Division 12.

Communications (including Social Media, Grand Rounds, and JCPMS)

Advertise webinars and conference and their DEI content and routinely post social media content that highlights key concepts in DEI. Utilize the APAHC listserv for discussion and dissemination of emerging best practices in the areas of DEI and include advertisement to organizations that incorporate URM. Develop an ongoing column in Grand Rounds dedicated to DEI and solicit submis-
inions from more diverse psychologists. Support a special issue of JCPMS in DEI. Commit to engagement and inclusion of underrepresented minorities as Editorial Board members and as both mentors and mentees in the new Mentored Review Program.

**Trainee and Early Career Psychologists**

Galvanize early career members in all APAHC DEI initiatives including membership recruitment, social media, newsletter content, conference content, JCPMS Mentored Reviewer efforts, and utilize the ECP listserv for discussion and dissemination of emerging best practices in the areas of DEI.

**Education and Training Committee**

Support webinars related to DEI for continuing education of psychologists within and outside of APAHC membership.

**Web Editor**

Review website to ensure content reflects the diversity in our profession as well as the communities we serve. Develop a section of the APAHC website for DEI resources, including linking to APA resources.

**Research Committee**

Develop surveys and writing projects focused on DEI as related to clinical care, teaching, and research activities in AHCs.

**APAHC Biennial Conference**

Foster and sustain DEI content as a regular component of the APAHC conference and strive to include URMs on conference planning committee as well as early career and mid-career Boot Camp planning committees so that their needs and perspectives are included.

**AAMC CFAS Representative**

Identify aligned DEI initiatives across CFAS and APAHC, communicate DEI issues pertinent to psychologist faculty in AHCs to CFAS, and galvanize supportive collaborative efforts.
Greetings APAHC colleagues from your CFAS reps who are hunkered down in the new virtual landscape. In this edition of CFAS Corner, we bring you some of the highlights of happenings in the AAMC that are paralleling, no doubt, much of what is going on within your communities and institutions, especially related to COVID-19. The AAMC’s *The Way Forward on COVID-19: A Road Map to Reset the Nation’s Approach to the Pandemic* provides a timely overview with specific recommendations for gearing up the country’s immediate and longer term responses to the pandemic. It is worth the read to get a national perspective.

There is much to be done to constrain the trajectory and stanch the diverse impacts of the virus. Critical work is being undertaken addressing testing, development of vaccines and therapeutics, expanding understanding of the virus’s mechanisms, comorbidities, and impact, as well as addressing public policies and education, distribution of PPE and other resources, and health inequities. These agendas are broad and tap into many of the resources of AHCs and teaching hospitals.

Of particular interest to psychologists are the behavioral and psychosocial factors associated with pandemic. This includes mental health comorbidities, understanding the impact of the disease on the brain and its functions, addressing the wellness of health personnel, as well as best practices for effectively promoting adherence to mitigation, such as mask wearing. The AAMC recently compiled scientific information on mask usage from the Centers for Disease Control and Prevention, state and local governments, and public health experts to promote a more scientific approach to mask wearing to lower the transmission of the coronavirus in *The Way Forward on COVID-19: Consensus Guidance on Face Coverings*, which deserves your attention. It can be downloaded for broader dissemination through your institutions.

The AAMC is also concerned with preserving and guiding the research enterprise during this COVID-19 era. The research activities within AHCs are central to their mission of promoting discovery and dissemination of new knowledge. Research labs are cautiously re-opening, as institutions race to develop safe environments for investigation and pivot to establish research priorities aligned with confronting the virus.

During this era, just as the APA has reallocated its energies and processes the AAMC has been revamping its activities. Its normal schedule of national conferences has been suspended with the exception of the annual fall convention that will be held virtually. CFAS is instituting monthly webinars that will be a combination of more topical lectures and open discussion / listening sessions to continue member engagement and serve as a conduit for information sharing in lieu of our usual in-person meetings. We will keep you apprised and continue forwarding information that may be of interest. Please do the same if there are issues you would like us to highlight.
COVID-19 Impact on Psychology Recruitment
Strategies in Academic Medical Centers

Yelena Chernyak, PhD
Ann Lagges, PhD
Indiana University School of Medicine
Department of Psychiatry

The COVID pandemic has led to an urgent need for Health Service Psychology (HSP) training programs to transition not only current training activities, but recruitment for the 2021-2022 training year to a virtual format. The APPIC Board of Directors Recruitment and Selection Guidance statement (2020, March 31) outlined 4 guiding principles relevant to recruitment during the pandemic: safety, equity, ethics, and science on which they based their recommendation to programs to engage in exclusive use of remote or virtual interview and recruitment formats for the 2021-2022 recruitment cycle. Virtual formats are strongly encouraged even for local candidates or any others requesting in-person visits to ensure safe and equitable practices. Virtual modalities are encouraged not only for interviews, but also for other recruitment activities such as open houses, tours, and selection committee meetings.

Adapting Public Materials

Advertisements and program descriptions in public materials will become more important than ever as it may be the exclusive source of information regarding the program that applicants will have access to. Many details they would ordinarily have obtained in person such as size and condition of facilities as well as the location and layout of medical center will be limited. If possible, photos or videos of the training facilities as well as the surrounding area would help candidates develop a richer understanding of the site. Brief recorded interviews with current interns and faculty members may also be helpful.

The APPIC BOD also encouraged public materials to reflect any changes due to COVID such as potential disruptions, safety precautions, quarantine requirements. Applicants may need to know whether they are designated as ‘essential’ employees and what expectations result from this status for their training. Transparency about the training sites practices and plans for continued pandemic response is critical so trainees can make informed decisions. This may be particularly important if applicants have medical considerations for themselves or loved ones. They may find this information critical in their decision making about training positions, without the unethical burden of having to ask and thus possibly self-disclose private medical information.

Adapting to Virtual Interviews

Group information sessions with question and answer time as well as individual interviews can easily be conducted over any of the many video-conferencing platforms. The greater challenge will be finding ways to replicate less formal interaction time such as social hours or activities such as having lunch with current interns or fellows. Programs may wish to consider some creative ways to utilize video conferencing applications to permit applicants to move more flexibly among meetings with different supervisors and/or interns/fellows.

Continues on next page
Options for doing this could involve having individual or small groups of interns/fellows and/or supervisors in their own virtual meeting rooms and provide links to each of these to all applicants so they can move on their own among virtual “meetings” as desired. Another option would be to have a moderator in a general session move applicants among different breakout rooms on request. In all cases, it will likely be most useful to the applicants if they are the ones guiding the “moving” among virtual spaces rather than having this directed by the program.

Additional Recruitment Considerations

The funding climate in many institutions may be impacted by COVID-19 and thus stipends and benefits for incoming trainees, if relevant, must be ensured prior to advertisement and recruitment efforts begin for the 2021-2022 training year. Incoming psychology interns and post-doctoral residents have position agreements with the institution that are a binding professional commitment barring extreme and rare circumstances, which COVID-19 effects may create. Mutual resolution in these unprecedented circumstances is encouraged. Many situations will be unique, and consultation may be beneficial or necessary, which is available by contacting the APPIC Postdoctoral Workgroup, APPIC Informal Problem Consultation, or the APA Commission on Accreditation.

Delays in trainees completing the current program in the 2019-2020 cycle due to illness or program interruptions can impact the availability or start times for training programs in the 2020-2021, thus further complicating recruitment timelines for 2021-2022. Programs should proactively plan for how they would handle significant interruption in training with current trainees to maximize likelihood of program completion on time. If this is not possible, consultation with funding source and human resources may be necessary to explore the possibility or delaying a planned start date for the 2020-2021 and/or 2021-2022 training year vs. hosting overlapping cohorts with impact on trainee onboarding, orientation, supervision, stipend, benefits, space, and case load considered.

Resources

APPIC Postdoctoral Committee
 Consultation from the APPIC Board of Directors.

APA Commission on Accreditation


Association of Psychology Postdoctoral and Internship Centers. (2020). Virtual Interviewing Guide


APPIC COVID-19 Resources for the Training Community FAQs on issues affecting graduate students, postdocs, interns and faculty with supervision and training responsibilities

Congratulations and welcome to new board members and the new editorial team!

Sasha Zagoloff, PhD—Treasurer
Leila Islam, PhD—Member-at-Large

New editorial team

Ashley Junghans-Rutelonis, PhD—Editor
Yelena Chernyak, PhD Andrea Garroway, PhD

Their terms will begin January 2021

Let APAHC members know what you’re doing!

We are seeking submissions of approximately 1,000 words for upcoming installments of Grand Rounds.

E-mail your proposals to the editor at apahc.association@gmail.com