

A Conversation for Expanding Administrative Leadership Training Opportunities through Intentional Leveraging of Psychologist Competencies

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Learning Objectives

1. Participants will be able to describe training options designed to introduce psychology leadership competencies to psychology trainees and build the skills to prepare early career staff for leadership roles
2. Participants will be able to describe how key competencies of leadership in VA align with Psychology profession-wide competencies
3. Participants will be able to discuss benefits of leadership/administration rotations to trainees and VA leaders/supervisors

Agenda

- This presentation seeks to broaden the discussion of instituting training in leadership at the doctoral internship and postdoctoral level and offer guidance for programs interested in starting their own rotations.
- This session will provide a description of leadership training models at a VISN and VAMC and propose next steps to develop leadership rotations at the psychology intern and postdoctoral level.
- Currently, there are only a few VA leadership psychology training rotations.
- When looking towards the future of VA, it is vital that we focus on leadership development, growing our servant leaders, and expanding high reliability organization practices.

Psychologists as Leaders

- Why leadership training is essential
 - Infusing Diversity practices in the training as with all we do
 - A doctoral degree does not make one a leader and competencies not inherent in trainee programs
- What do trainees want to know more about leadership?
 - Using technical skills
 - Expanding definitions of what it can mean to be a psychologist



Origin Story: Administrative Minor by Dr. Lowman

- To address gaps in leadership development, in my role as VISN 5 Chief Mental Health Officer, I developed a Psychology Internship training rotation focused on mental health leadership in 2016.
 - Developed in collaboration with stakeholders such as the VISN5 Psychology Internship Training Directors, Behavioral Health Leadership Training Program and National Center of Organizational Development (NCOD).
 - In collaboration with the VA Central Office Psychology Training Council (VAPTC) a work group was established to develop a model curriculum and a toolkit that will be disseminated to all facilities who are interested in developing a similar training experience.
- We will be providing an overview of these tools in the following discussion.

Kansas City VA Administrative Minor

Origin story: How KCVA came to have an Admin Minor (inspired by Dr. Lowman)

- Postdoctoral 6-month rotation expanded to Predoctoral Psychology Interns
- Attention paid to DEI as leaders
- Assessments of person-factors as Servant Leaders
- Essential readings
 - Uniform Mental Health Services Handbook
 - Restoring Trust in VA Healthcare
- Administrative project
 - Time limited
 - Crossing clinics or workgroups
 - Presented to the discipline



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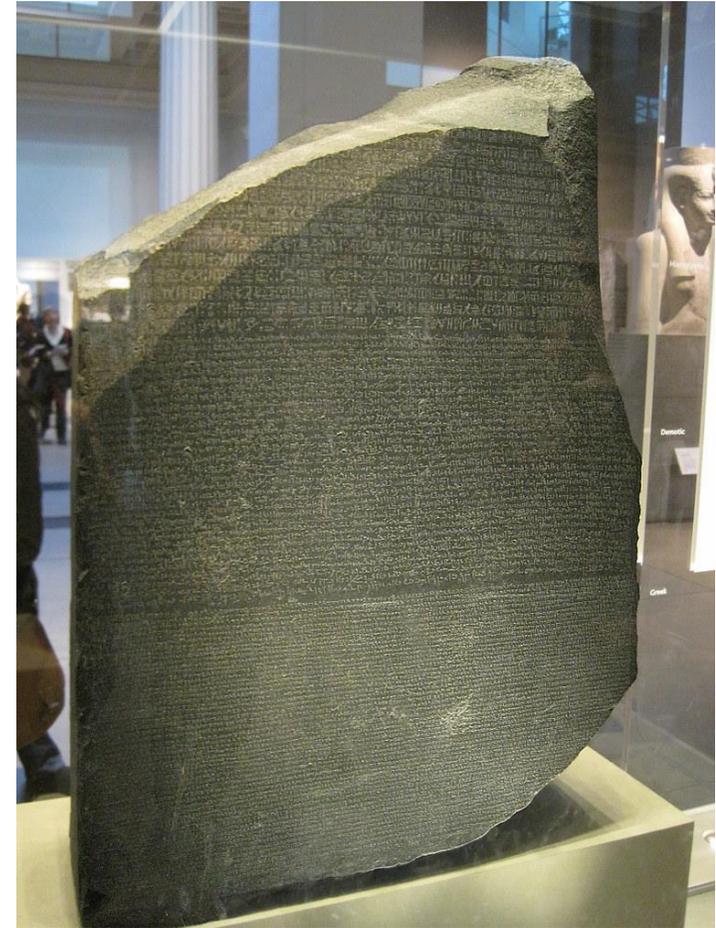


Kansas City VA Administrative Minor

- Leadership competencies *in practice*
 - Trainee corporate and prior clinical training experiences
 - Supervisor journey shared (including failures)
 - Understanding the Org Chart and decision-making structures
 - Weekly Own the Moment or Safety Stories and ethical quandaries tailored to the developmental needs of the trainee group
- Setting expectations: Building VA psychology leaders from orientation to recurring annual appraisals
 - How has VA mission changed over time? (and leading people during transitions)
 - When is the right time to seek administrative roles
 - How to get selected and to get noticed?

Looking through the accreditation lens

- Leadership/Administration competencies
- Standards of Accreditation
 - Implementing Regulations
 - Profession Wide Competencies
- Leadership as a protein (not a carb)
- Rosetta stone to translate/crosswalk leadership experiences to recognized PWCs
- Connecting what we do with who we are as a profession



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Looking through the accreditation lens

- Actual or simulated experiences?
- Do each of the PWCs have a doppelganger in leadership/administration?
- Do all training experiences need a connection to the PWCs?
- Items are derived directly from APA CoA Implementing Regulation (IR) C-8 I. Profession-Wide Competencies, as required by APA CoA's Standards of Accreditation (SoA).



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Assessment example

Assessment

- Learn about measures that answers a given leadership question (regarding performance at the individual, group, or facility level), which would allow for the opportunity to interpret data in order to formulate useful change recommendations.
- Select or develop measures for assessing organizational health (e.g., AES data, MBC, needs assessments)
- Administer quality improvement instruments
- Interpret, analyze and synthesize data collected through formal and informal assessment activities; provide feedback to stakeholders
- Review data provided in issue briefs, White House Hotline action items and other veteran complaints utilized to oversee the quality of care provided
- Read and discuss the Uniform Mental Health Services Handbook, and related policies that drive patient care standards.
- Review MH Metrics for their training site on the Mental Health Management Systems Dashboard (MHMS), Strategic Analytics for Improvement and Learning (SAIL); and become aware of how it is collected and analyzed.
- Review, discuss and give examples of the key mental health performance measures and their relevance to assessment of patient care at intern's training site

1. **Assessment:**

- a. Demonstrates an understanding of the Uniform Mental Health Services Handbook, and related policies that drive patient care standards.
- b. Demonstrates understanding of key mental health performance measures and their relevance to assessment of patient care.
- c. Demonstrates understanding of mental health quality improvement data and an ability to utilize mental health quality improvement data found on the Mental Health Management Systems Dashboard (MHMS), Strategic Analytics for Improvement and Learning (SAIL). Demonstrates understanding of how it is collected and analyzed.
- d. Interprets and analyzes data provided in issue briefs, White House Hotline actions and other veteran complaints utilized to oversee the quality of care provided.
- e. Collects, integrates, and utilizes relevant data using multiple sources and methods appropriate for the identified goals and questions of the assessment as well as relevant diversity characteristics of the service recipient*
- f. Integrates observations, historical data, medical records, and other data into assessment formulation
- g. Communicate orally and in written documents (e.g., executive briefing, summary reports, etc.) the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences.
- h. Selects and applies assessment methods that draw from the best available literature and that reflect the science of measurement, psychometrics, and the practice of organization development to answer the given leadership question (regarding performance at the individual, group, or facility level), interprets data correctly, and formulates useful change recommendations.
- i. Formulates appropriate and tailored recommendations based on assessment data
- j. Selects and administers appropriate measures for assessing organizational health (e.g., AES data, 360 reviews, surveys, needs assessments performance appraisals)



Diversity, Equity and Inclusion (DEI) example

Individual and cultural diversity

- ❑ Conducts professional interviews with allied health professionals to understand the training and professional competencies of other professions
- ❑ Design measures or data collection strategies to understanding the cultural and population diversity of the region or VISN.
- ❑ Learns how service delivery and outreach efforts intersect with diversity factors (e.g., gender identity, sexual orientation, language, etc.) in ways that either enhance or undermine Veteran's access to care
- ❑ Identify gender and cultural bias in the workplace and developing strategies to address impact of these.
- ❑ Identify ways in which performance evaluation of leadership competencies and recruitment for leadership positions may benefit certain groups and reinforce a lack of diversity
- ❑ Develop strategies for addressing recruitment and retention of diverse applicants for both staff and trainees
- ❑ Evaluate bias reduction methods for selection committees
- ❑ Design data management system for tracking hiring practices for measurement of outcomes related to diversity of applicants, diversity of selections, promotion by diversity factors, and retention by diversity factors.
- ❑ Participate in a hospital-wide or service-wide Diversity Committee.

Individual and cultural diversity:

- a. Demonstrates awareness and knowledge of individual and cultural diversity across a range of professional roles in hospital administration, including the ability to apply a framework for working effectively with areas of individual and cultural differences not previously encountered.*
- b. Demonstrates an understanding of hospital administrative operations outside of mental health service line and demonstrates the ability to articulate how these operations support veteran mental health care.
- c. Demonstrates the ability to independently apply knowledge of diversity and multiculturalism in working effectively with the range of diverse individuals and groups.
- d. Demonstrates an understanding of how cultural and regional differences impact VA mental health care throughout the country.*
- e. Demonstrates an understanding of diversity at the level of VA culture and facility/system issues, to include barriers to care (for Veterans) and advancement (for staff); recognition of the power differential between leaders and staff, and ways in which local facility culture assists or creates barriers to inclusion and respect among both staff and Veterans.
- f. Demonstrates an understanding of how personal/cultural history, attitudes, and biases may affect interaction with staff members at various facilities throughout the region.*
- g. Demonstrates the ability to incorporate current theoretical and empirical knowledge related to diversity and multiculturalism in all professional activities including research, training, supervision/consultation, and service delivery activities (i.e., assessment and intervention)*



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*The authors recognize the contributions of Dr. Salky who participated as a trainee in the VISN 5 Leadership Rotation in 2019; completed postdoctoral training at the DC VAMC and is now employed as a staff psychologist. Based on what she has learned in the rotation, she became a member of AVAPL and is here to share her experiences.

Trainee Experience

On this rotation I have gained an understanding of how healthcare policy is implemented from a systems level perspective. This inside look into the processes by which congressional bills become policies, and how those policies are turned into actions directly benefitting Veterans, has given me a greater appreciation for the complexity of our system. **From this I have also gained an appreciation for the high standards VA is held to** and the thoughtful work that is done on every level of leadership. This unique perspective has inspired me to pursue a career in VA leadership, and I recently applied and was accepted for a post-doctoral fellowship at the DC VA.

This has opened my eyes to the broader picture of what we do, and can do, in VA, and has **changed my trajectory within VA** from being an obedient follower of policy, to an informed and involved VA psychologist. Going forward with this understanding, I will be able to engage with leadership and policy in a more effective and collaborative nature, ultimately benefiting my Veterans and the clinics in which I serve.

During the VISN rotation I learned a lot regarding the intricate structure of the Veterans Health Administration (VHA). **I will forever hold a new lens** to view how the VA works at higher levels of leadership and how policies and decisions are made utilizing multiple performance dash boards and knowledge of systems. This lens was partially developed through meeting and interacting with the different professions in leadership positions in at the VISN and seeing how each position contributes to the care of veterans. It was also helpful to ask each person how they got to their leadership position. Listening to the varied stories and trajectories helped me to navigate my own professional trajectory. I believe this experience made me a better clinician, government employee, and emerging leader in the field of psychology and healthcare.



Lessons Learned

- Leverage your connections as a leader
- Intentionality and approach
- Customizing for your training site and trainee needs

- **GET STARTED!!!**
- Professionalism and maintaining open doors



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We are what we repeatedly do. Excellence then is not an act, but a habit. - Aristotle



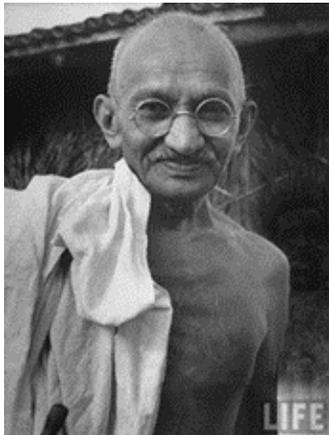
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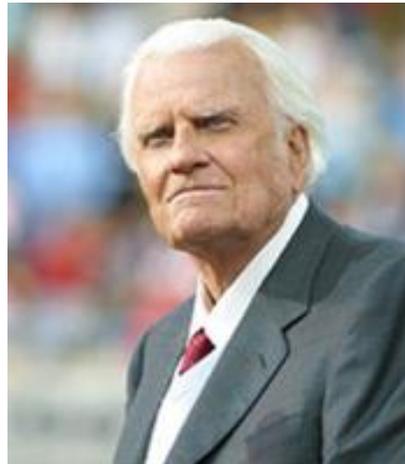
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until they know that you *care*”



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