

BLIND REHABILITATION ROTATION GOALS AND TRAINING OBJECTIVES:

1. Acquire Skills Necessary to Function as a Member of an Interdisciplinary Rehabilitation Team
 - a. Develop a familiarity with models for the provision of psychological consultation in medical and rehabilitation settings.
 - b. Provide independent consultation to members of the professional staff directly working with a patient. This may be done on an emergency or routine basis.
 - c. Participate in weekly staffings. Present findings and recommendations based on the results of psychological assessment. Develop objective, data driven treatment plans.
 - d. Understand and consider the dynamics of the varying influences on the treatment program.
 - e. Establish their own professional identity as part of a rehabilitation treatment team.
 - f. Become familiar with the role of the psychologist in rehabilitation settings.
 - g. Become familiar with the professional roles and philosophies of other rehabilitation team members.
 - i. attend 1 IDT meeting per week
 - ii. serve as psychology team member for Veterans followed on ward during IDT
 - iii. Conduct 10 evaluations per referrals from treatment team
 - iv. make recommendations and provide treatment per consults
 - v. attend 1 staffing meeting per week
 - vi. present at least 1 current related topic for discussion with IDT on training day
2. Acquire skill in interviewing and assessing Blind Rehabilitation residents
 - a. Review medical records, interview, and assess a minimum of 20 new patients during the rotation.
 - b. Assess the psychological functioning of each patient. This will include possible DSM IV diagnoses, overall adjustment to blindness, and the quality of social support system.
 - c. Conduct mental status screening during each assessment. Utilize other neuropsychological/cognitive screening devices as warranted.
 - d. Produce a written product for each assessment that is done in language which is technically correct and suited for medical/rehabilitation professionals.
3. Acquire experience in formal assessment of blind rehabilitation residents
 - a. conduct evaluations, including at least 6 cognitive evaluations and 3 personality evaluations.
 - b. develop competency with appropriate methods for assessment of cognitive, emotional and behavioral disturbances in blind Veterans
 - c. Provide assessment feedback to each patient and to appropriate family members.
4. Acquire skill in providing treatment to blind rehabilitation residents
 - a. follow a caseload of at least 4 residents per week, providing brief psychotherapy until treatment goals have been met.
 - b. conduct pre/post assessments of residents treated
 - c. develop interventions and treatment goals that are specific for each patient.
 - d. learn interventions that will enhance the blind Veteran's self esteem and comfort with their identity as a person with Visual Impairment (VI).
 - e. co-facilitate/facilitate psychoeducational groups with blind Veterans 2 times per week.
4. Acquire Knowledge with Regard to Blindness and Rehabilitation Psychology
 - a. Participate in the patient role in at least 10 hours of blind rehabilitation classes.
 - b. Complete assigned readings in rehabilitation psychology and the psychology of blindness
 - c. Complete assigned readings in related non-psychology areas, including blind rehabilitation and optometry/ophthalmology.

- d. Review the following sections of DSM-IV:
- Delirium, Dementia and Amnestic and Other Cognitive Disorders
 - Somatoform Disorders
 - Adjustment Disorders
 - Substance-Related Disorders
 - Mood Disorders
 - Anxiety Disorders
 - Schizophrenia and Other Psychotic Disorders Personality Disorders

NOTE: THESE ARE MINIMUM REQUIREMENTS FOR THIS ROTATION