

camh

Centre for Addiction and Mental Health

**CLINICAL PRACTICUM TRAINING
PROGRAM IN PSYCHOLOGY**

<https://www.camh.ca/en/science-and-research/clinical-divisions/psychology-division>

2024-2025

**Director-of-Training: Dr. Longena Ng, Ph.D., C.Psych.
Psychology Division Chief: Dr. Sean Kidd, Ph.D., C.Psych.**

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OVERVIEW OF CAMH

Working for Better Understanding, Prevention and Care

CAMH is the largest mental health and addiction facility in Canada and is recognized for its excellence. It was founded in early 1998 through the merger of the Addiction Research Foundation, Clark Institute of Psychiatry, Donwood Institute, and Queen Street Mental Health Centre. Since the merger, CAMH has focused on a seamless integration of addiction and mental health services in a functional and flexible environment. CAMH is affiliated with the University of Toronto and is a Pan American Health Organization / World Health Organization Collaborating Centre. Through accessible treatment, community services, research, education and prevention, CAMH works to improve the quality of life for people who are struggling with mental illness or addiction and to support their family and friends.

“For me it was the courage, and I guess the courage comes from saying ‘hey, let’s make a change.’ And the courage to continue to do that. It’s so great now ... it is so good for me now. I love my life.”

Susan E. Gapka, Courage to Come Back Award Recipient

Care

“One of the things about working with people who suffer from mental illness or people who struggle with addictions is that, to the public, this may seem like a discouraging environment – a place that’s not filled with hope. But for those of us who work clinically, just the opposite is true. I find a great deal of professional fulfillment in this environment because many, many people get better.”

Dr. David Goldbloom, former Physician-in-Chief

CAMH is committed to providing comprehensive, well-coordinated, accessible care for people with addictions and severe mental illness. We have created a continuum of clinical programs, support and rehabilitation to meet the diverse needs of people who are at risk and at different stages of their lives and illnesses. Our services include assessment, brief early interventions, inpatient programs, continuing care, and family support. We also address the larger issues relating to the four major factors affecting health: housing, employment, social support and income support. Our client-centered philosophy of care recognizes that the client has individual social, physical, emotional, spiritual and psychological needs.

Mental Health & Addictions

CAMH provides a wide range of inpatient, outpatient, and community-based treatment programs including: Child, Youth, and Emerging Adult; Borderline Personality; Forensics; Mood and Anxiety; Gender Identity; Work, Stress & Health; Addictions; and others.

Prevention

"Prevention involves a host of things. It's not just about preventing substance abuse or mental health problems. It's about supporting health and well-being and having environments that really are healthy environments."

Akwatu Khenti, former Director of Education and Training Services

CAMH is committed to working with communities throughout Ontario to create environments that support health and prevent illness. CAMH consultants work with individuals, local service providers and community groups to apply initiatives in the community and design evidence-based systems and approaches. Consultation, support, and training focuses on preventing problems, promoting health and planning, and delivering treatment. By providing information to the general public, we empower people with the knowledge to reduce the likelihood, recurrence and/or intensity of addiction or mental health problems for themselves or others.

Understanding

"Only through education can we hope to improve the understanding of mental health and addiction problems and thus foster support for people who struggle with these challenges."

Dr. Paul Garfinkel, former President and CEO

One of CAMH's goals is to be a leader in creating, applying and disseminating knowledge. Each year, the Centre receives many research grants, fellowships and awards, resulting in the publication of hundreds of scientific articles and studies. Our research guides our public policy priorities and is transformed into practical resource materials and training programs, which inform the practice of professionals and help educate the general public. Advancing our understanding of mental illness and addiction is key to future improvements in prevention and clinical care. Working with communities, we aim to foster understanding and reduce the stigma associated with these illnesses.

OVERVIEW OF THE APPLICATION PROCEDURE

Clinical placements are available across a large number of specialty clinics, to be described below. All placements are for a minimum duration of **500 hours** and are offered either on a part-time or full-time basis. Traditionally, placements are either 2-3 days per week from September to May, or 4-5 days a week from May to August. Other combinations are possible and at the student and supervisor's discretion.

The deadline for applications is **THURSDAY FEBRUARY 1st, 2024** for Spring-Summer 2024 and Fall-Winter 2024-2025 placements. Applications submitted after this deadline will be reviewed after the Common Notification Day pending the availability of practicum spots (no exception and no phone calls or emails about exceptions please).

Applications are to include:

- 1) The completed application form (on the last 2 pages of this brochure)
- 2) A one-page statement of training goals and objectives
- 3) An up-to-date curriculum vitae
- 4) Undergraduate and graduate transcripts (can be unofficial)
- 5) Two letters of reference (ideally from an academic professor and a clinical supervisor) sent as a word or PDF attachment. Please advise referees **NOT** to send reference letters in the body of an email.

If you are from a CPA and/or APA accredited university program (or if your program is in the process of accreditation), please assemble all materials (except reference letters) prior to submission, and **email** them to Dr. Longena Ng at Psychology.PracticumApplications@camh.ca. Please ask referees to **email reference letters** with the name of the applicant in the subject line.

Students from non-accredited programs are asked to apply to potential supervisors directly (please review below which rotations are accepting non-accredited students).

Once your completed application is received, your submission will be reviewed. If deemed appropriate, your application will be sent to potential supervisors who may contact you for an interview. Most interviews take place within 6 weeks of the application deadline.

CAMH participates in **Common Notification Day** with other GTA sites. You will be notified that day if we are offering you a placement. **If your university does not have an affiliation agreement with CAMH, this will need to be obtained before your placement can begin.**

OVERVIEW OF CLINICAL ROTATIONS

— CHILD and YOUTH TRACK —

The CHILD, YOUTH, and EMERGING ADULT Program (CYEAP) is newly organized, incorporating the former Child Psychiatry Program and the Youth Addictions Service, both long-standing services at the Centre for Addiction and Mental Health.

Assessment and psychological testing includes objective tests, observational techniques, psychoeducational assessment, and structured diagnostic interviews. Such training includes development of integrated psychological report writing and the process of providing clinically sensitive feedback to parents and children. Therapeutic approaches rely on empirically-validated and best-practice models of intervention. These include individual psychotherapy, group therapy, family therapy, and parent counseling in various modalities (e.g., cognitive-behavioral, behavioral, solution-focused and strength-focused, and core conflictual relationship theme therapy). Services within the CYEAP often work within a multidisciplinary team of psychologists, psychiatrists, social workers, nurses, and child and youth workers. Thus, practicum students are able to enhance their understanding of the roles of multiple disciplines and develop skills in working together constructively.

Practicum students will receive intensive training in clinical assessment and diagnosis, psychological testing, consultation, and therapeutic intervention; however, these vary by rotation. Such training includes experience in clinical interviewing of children, youth, and their families, and diagnostic formulation, which includes a strong focus on the use of the DSM-5. The program also serves a diverse and multicultural population, giving the practicum student an awareness of their own personal and professional strengths, limitations, and areas of growth as a clinician, while developing the knowledge, sensitivity, and skills needed to work with diverse populations.

Training staff have a variety of theoretical interests, including attachment theory, the interface between developmental psychology and psychopathology, and evolutionary psychology.

Youth Justice Assessment Clinic

Supervisor: Julia Vinik, Ph.D., C.Psych.
Teresa Grimbos, Ph.D., C.Psych.
Tracey A. Skilling, Ph.D., C.Psych.

** accepts applicants from non-accredited programs for both Fall/Winter and Summer placements*

The Youth Justice Assessment Clinic provides comprehensive assessment-only services to youth aged 12 and older. These youth are actively involved in the youth justice system or have other legal issues and are referred to the clinic because of their complex needs. Psychodiagnostic, psychoeducational, and risk/need assessments related to antisocial behaviour are completed with the youth, and recommendations offered to the courts, families, and other involved agencies on how best to meet the needs identified. Comprehensive treatment plans are developed as part of the assessment process, and treatment referrals to community agencies are recommended. Practicum students will have the

rare opportunity to conduct comprehensive psychodiagnostic and psychoeducational assessments for third parties within a youth justice context. Students will complete these assessments utilizing structured and semi-structured interviews, well-validated cognitive and academic assessment measures, as well as self-report psychometrics. Students will also provide feedback to clients, families and referral agents, when possible. Assessments are often completed as a multidisciplinary team and students will have opportunities to work closely with professionals from other disciplines, including psychiatry and social work. The service delivery model in our clinic is hybrid, involving both virtual and in-person clinical work.

Students will also have the opportunity to observe court proceedings as well as visit youth detention facilities. Students may also have the opportunity to be involved in clinical research projects underway in the Clinic.

Experience with forensic assessments is not required. However, training and some experience with cognitive and academic testing are required. Both fall/winter and summer practicum placements are available.

Better Behaviours Service

Supervisor: Brendan Andrade, Ph.D., C.Psych.

The Better Behaviours Service (BBS) provides therapeutic services for children, youth and their families who have challenges with disruptive behaviour, aggression, emotional difficulties, social skills difficulties, inattention and non-compliance at home and/or at school. Through semi-structured assessment, factors contributing to behavioural difficulties are identified. Individual, family and group-based treatments are offered to help children build skills, reduce emotional and behavioural difficulties and help caregivers develop more effective parenting strategies to reduce family conflict.

This is a clinical-research practicum. Students will be involved in assessment, detailed clinical formulation, intervention and consultation in the context of one or more clinical-research projects operating within the BBS. Students complete brief assessments and participate in delivery of structured group, individual and parent-child treatment. Training and supervision of implementation of Cognitive-Behavioural treatment and other evidence-informed approaches will be provided. Students will also have the opportunity to use existing clinical-research data to complete an applied research study, with the goal of manuscript submission.

Note: This is an intervention practicum. Only students who have completed an assessment practicum will be considered for this rotation.

Psychological Assessment Team for Children and Youth Service

Supervisors: Liora Keshet, M.A., C.Psych.Assoc.
Pushpinder Saini, M.A., C.Psych.Assoc.

** only available for Fall-Winter Practicum*

Psychometry service offers students opportunities for conducting comprehensive psychological assessments for children and youth (age 4-17) who are referred internally within the Child, Youth and Family Program. Assessments are typically requested for psycho-educational, socio-emotional, and psycho-diagnostic considerations.

Practicum students will gain experience with regard to clinical and diagnostic interviewing, administering and interpreting standardized psychological assessment measures and tests, integrating clinical information with psychological test data, and provision of written and verbal feedback to clients, families, and referring agents.

Assessment tools include cognitive measurement, academic testing, assessment of learning, memory, and language, as well as socio-emotional, personality, and projective measures. Practicum students are trained via individual supervision and group supervision.

Mood and Anxiety Service

* not available for 2024-2025

The Mood and Anxiety Service provides outpatient assessment and treatment to children, youth, and their parents, focused on primary presenting concerns involving anxiety and/or depression. Common clinical presentations include low mood, social anxiety, and generalized anxiety, as well as co-occurring concerns such as parent-child/adolescent relational difficulties, learning disabilities, ADHD, and externalizing behaviour. Students will be part of an inter-professional team, consisting of a psychologist, psychiatrists, social workers, an occupational therapist, and a nurse. Treatment is primarily cognitive behavioural (CBT), with other approaches integrated as appropriate based on case formulation and application of evidence-based practices. Practicum students will participate in delivering group and individual intervention for children, adolescents, and parents. Individual treatment will include assessments for treatment planning, and the development of a clinical formulation and a related treatment plan. In addition, students have the opportunity to be involved in clinical research projects currently happening in the clinic.

Note: This is a Fall-Winter intervention practicum. Only Ph.D. students who have completed an assessment practicum will be considered for this rotation.

— ADULT TRACK —

ACUTE CARE PROGRAM

Addictions and Concurrent Disorders

Supervisors: Julianne Vandervoort, Psy.D., C.Psych.
Julie Irving, Ph.D., C.Psych.

** Fall/Winter 2024-2025 placements are available. This is an onsite placement available to Ph.D. and Psy.D. level candidates with familiarity with cognitive behavioural therapy.*

The Addictions and Concurrent Disorders rotation offers assessment and intervention experience with clients presenting with substance use disorders, often in the context of co-occurring mental health concerns. This rotation is based in the Concurrent Outpatient Medical & Psychosocial Addiction Support Service (COMPASS) within the CAMH Acute Care program. Students will gain experience working in a specialty psychiatric hospital alongside a multi-disciplinary team (psychologists, physicians, nurses, pharmacists, occupational therapists, social workers) under the supervision of a licensed psychologist.

Potential experiences include assessment and intervention opportunities in a multi-disciplinary addiction medicine clinic (which primarily serves clients with alcohol, cannabis, or opioid dependence) and co-facilitating group treatments for specific populations (e.g., cannabis use disorder; concurrent alcohol use disorder and mood disorder). Efforts are made to tailor clinic placements to students' skills and areas of interests.

This rotation includes primarily intervention experiences. Intervention approaches emphasize a biopsychosocial approach (i.e., behavioral and pharmacological interventions). Psychosocial interventions are guided by cognitive-behavioral (e.g., relapse prevention) and motivational enhancement principles and incorporate a harm reduction philosophy. Group treatment is the primary modality for psychosocial interventions. Students will receive weekly individual supervision, in addition to team meetings specific to individual clinics. Students will also have opportunities to attend a wide range of training and didactic seminars at CAMH.

Because this placement emphasizes a scientist-practitioner model, the ideal candidates for this rotation are those with strong motivation for pursuing both clinical and research experiences in the area of addiction and concurrent disorders.

BORDERLINE PERSONALITY DISORDER CLINIC

Supervisors: Michelle Leybman, Ph.D., C.Psych
Shelley McMMain, Ph.D., C.Psych.
Molly Robertson, Ph.D., C.Psych.

** This placement is available to Ph.D. and Psy.D. level candidates with clinical or research experience in dialectical behaviour therapy and/or BPD. The placement is available as a part-time placement for Fall/Winter (summer-only placements are not currently available). This will be a hybrid placement with an expectation of at least one day per week on site. The location of the clinic is 60 White Squirrel Way.*

The Borderline Personality Disorder (BPD) Clinic is an outpatient program serving multi-disordered individuals with borderline personality disorder between the ages of 18 and 65. The BPD Clinic offers specialized training in the delivery of Dialectical Behaviour Therapy (DBT) and DBT adapted for the treatment of complex trauma. The standard DBT modes of therapy offered in the Clinic include weekly individual, group skills training, after-hours telephone consultation and therapist consultation. Trainees may also have the opportunity to participate in adaptations of standard DBT (e.g., prolonged exposure, DBT-PTSD). In this rotation, trainees will primarily gain experience in delivering DBT individual and group skills training. Trainees may be involved in conducting diagnostic and suicide risk assessments, and will be expected to participate in phone coaching offered to clients between sessions. Trainees are expected to attend a weekly consultation team meeting on Thursdays for all BPD Clinic staff and trainees. Trainees are expected to become familiar with the relevant research on BPD and DBT. The BPD Clinic is an active clinical, research, and training centre.

Ideal candidates for this rotation will have prior training or experience assessing and or conducting psychotherapy with individuals with personality disorders, trauma, or other complex mental illness. Previous training or experience working within a DBT model is an asset.

Integrated Day Treatment (IDT)

Supervisor: Judith Levy-Ajzenkopf, Ph.D., C.Psych.

** Psychology trainees at the Doctoral level are welcome to apply; familiarity with DBT is preferred. Preference will be given to applications for Spring Summer 2024. Fall Winter (2024-2025) availability as well. All placements will be hybrid with the expectation that clinician is onsite at least 1 day a week.*

The Integrated Day Treatment (IDT) is an intensive day-based service focused on improving access to care for clients (18 years and older) who would benefit from intensive programming for mood and anxiety, trauma and addictions. Trainees would engage in the DBT arm of the IDT program. Clients have a primary diagnosis of mood or anxiety disorder and may also experience secondary comorbid conditions including personality disorders, substance use disorders and trauma related conditions.

There are 3 DBT intensity levels that span 6 to 12 weeks. Hi Intensity DBT is twice a week in addition to individual therapy and psychiatric consultation. This 12-session curriculum can be completed in 6 weeks with the option to extend to 12 weeks if clinician and client feel there is clinical utility. Medium Intensity DBT is run for 12 weeks, one group a week and one individual therapy session a week. Low Intensity DBT is run for 12 weeks with just group therapy. We have collected data on all 3 streams and have empirical support for the effectiveness of this protocol.

Mood and Anxiety Ambulatory Services (MAAS)

Supervisor: Judith Laposa, Ph.D., C.Psych.

** Placements for 2024-2025 fall/winter and summer 2024 is dependent on the residency match*

The Mood and Anxiety Ambulatory Services is a clinical and research unit staffed by individuals from a wide range of disciplines including psychology, psychiatry, social work, nursing, and occupational therapy. Our service is a high demand out-patient treatment service that offers specialized training in empirically supported treatments, namely in short-term cognitive behavioural therapy for depression, GAD, OCD, social anxiety disorder, panic disorder, and agoraphobia. Clients receive treatment lasting for 13-16 weeks.

A main focus of the practicum rotation involves collaborating with clinical practicum students in order to further develop their ability to provide a comprehensive diagnostic assessment, while considering optimal treatment suitability (e.g., considering the client's level of functioning, treatment modality, treatment format, acute phase treatment vs. relapse prevention treatment). Practicum students will gain proficiency in the administration of the Structured Clinical Interview for the DSM-5 (SCID-5) and they will also learn to administer the treatment suitability interview for determination of suitability for short-term cognitive-behavioural treatment.

Practicum students have the opportunity to co-lead CBT treatment groups and/or offer individual CBT for depression, panic disorder, agoraphobia, generalized anxiety disorder, social anxiety disorder, and obsessive-compulsive disorder during the rotation. Supervision includes direct individual supervision. Practicum students may have additional opportunities to work with other disorders that interface with mood, obsessive compulsive related, and anxiety disorders, as opportunities arise.

Practicum students will develop clinical decision making skills, learn how to effectively communicate/collaborate with other health professionals, and train in empirically supported treatments. Practicum students are valued members of the treatment team, and they become familiar with the relevant clinical and research literature. Related training goals involve understanding the role of cognitive vulnerability factors in the psychological treatment of the disorder.

In addition to offering clinical services, the Mood and Anxiety Ambulatory Services is an active research centre. Depending on the practicum student's interests and experience, opportunities to participate in clinical research projects may be available as time permits.

The placement will likely be hybrid of in person and virtual, and is for PhD level practicum placements.

Work, Stress and Health (WSH)

Supervisors: Niki Fitzgerald, Ph.D., C. Psych.

** Both Summer 2024 and Fall/Winter 2024-2025 placements are available. Placements will likely be hybrid with a combination of virtual and in person.*

The Work, Stress and Health Program (WSH) is a large multidisciplinary outpatient clinic that provides comprehensive independent assessment and group treatment. The WSH program sees a wide range of diagnostic presentations, but the majority of those assessed suffer PTSD. Common comorbidities include mood disorders, anxiety disorders, and substance use disorders. WSH clients are of diverse ethno racial and cultural backgrounds.

Summer placements will be 3 to 4 days per week and provides students with the opportunity to conduct comprehensive psychodiagnostic assessments for third parties within a civil-legal context. These assessments involve an evaluation of Axis I psychopathology utilizing semi-structured interviews (e.g. SCID, CAPS) and response style (i.e., MMPI-3). Each week, students will conduct one full assessment (including interviewing and reporting writing) with the supervising psychologist as well as conduct and write up the CAPS and MMPI interpretations for at least two other psychology resident led assessments. The assessment service functions within a multidisciplinary team approach and students work closely with the professionals from other mental health disciplines (e.g. psychiatry) in the provision of services.

Fall/Winter placements will be 2 days a week and will provide students with the opportunity to co-lead a Cognitive Processing Therapy group with a psychologist. Group clients are those who have been assessed at WSH and referred internally. The CPT group is 16 weeks at 2 hours per week and all treatment is conducted virtually. Clients also receive an hour with an Occupational Therapist per week to focus on behavioural activation. Students will participate in team meetings with the psychologist and the OT prior to and after the group. Opportunities for biweekly assessments may be available.

Students will receive both individual and group supervision. Psychology trainees at the Doctoral level are welcome to apply, with preference to those with experience in semi-structured interviews, self-report psychometrics, and trauma.

CLINICAL RESEARCH

Supervisor: Lena C. Quilty, Ph.D., C.Psych.

** Part-time Fall/Winter 2024-2024 placements are available. Practicum placements are in person, with a primary focus on assessment; some therapy, supervision, and research experience is also possible.*

This rotation is conducted in-person in the Mood and Addiction Research Laboratory at the 1025 Queen Street site. The Mood and Addiction Research Laboratory is a dynamic, integrated clinical, research and training setting, conducting a variety of basic clinical research and treatment outcome studies each year. The laboratory provides specialized training in the provision of psychological services as part of applied research protocols, including psychodiagnostic and cognitive assessment, as well as manualized individual psychotherapy. The laboratory conducts several treatment trials every year, frequently involving pharmacotherapy and psychotherapy, such as manualized cognitive behavioural therapy, motivational enhancement, and behavioural activation, for depression and/or substance use disorders. Computer-based cognitive interventions are also frequently a focus of investigation. The laboratory also provides consultation and training to other mental health professionals. Practicum students may be involved in assessment and/or therapy, as determined by student training, experience and interests, as well as current research initiatives and opportunities.

Assessment practicum students receive in-depth training, supervision and experience in psychodiagnostic assessment, such as the *Structured Clinical Interview for DSM-5 (SCID-5)*. Students also receive training in structured interview, self-report, and performance-based measures of psychopathology, bias and cognition, and in writing integrated reports. Supervision is provided on an individual basis. Training and supervision experience may be available for advanced students. Therapy practicum students receive in-depth training, supervision and experience in the provision of cognitive behavioural therapy or behavioural activation. Supervision is provided on an individual basis. Practicum students will develop specific skills in empirically validated instruments and techniques, as well as general skills in clinical interviewing and decision making and effective communication with other health professionals. Opportunities to participate in research projects are available, based on trainee interest and availability. Practicum placements are primarily in-person.

COMPLEX CARE AND RECOVERY PROGRAM

Cognitive Behaviour Therapy Service of the Complex Care and Recovery Program

Supervisors: Michael Grossman, Ph.D., C.Psych.
Melissa Milanovic, Ph.D., C.Psych.

** Available for Fall/Winter 2024-2025 with placements involving a hybrid of in-person and remote work. Summer only placements are not currently available. Preference for Ph.D. level applicants with familiarity in CBT, although previous training in psychosis is not required.*

The primary focus of our service is to facilitate recovery from psychotic disorders by aiding clients in their efforts to gain or regain the valued roles, skills, and supports needed to have fulfilling lives in the community. We offer individual psychotherapy (typically 6 - 9 months in duration) for outpatient clients experiencing psychosis and related comorbidities. We also offer brief individual therapy through the Partial Hospitalization (day hospital) Program and Inpatient Services. There are also numerous opportunities for group therapy with inpatient, day hospital and outpatient populations. Students will receive both individual and group supervision.

Training opportunities in intervention include specialized training in the application of CBT techniques to psychosis (targeting positive symptoms such as delusions and hallucinations, as well as negative symptoms and comorbid symptoms of mood and anxiety) in both individual and group therapy formats. Clients often also suffer from cognitive deficits, low self-esteem and self-stigma related to having a serious and chronic mental illness, all of which may also be addressed in therapy. Therapy will typically integrate elements of metacognitive, DBT, compassion-focused and mindfulness-based approaches. Our portfolio of group therapy interventions includes CBT for psychosis, as well as compassion-focused therapy, DBT skills and CBT treatments for social anxiety and other comorbid disorders of high prevalence amongst individuals with psychosis.

Neuropsychological Assessments & Cognitive Intervention for the Geriatric Mental Health Services

Supervisors: Nina Dopsloff, Neuropsychologist, Dipl. Psych., C. Psych
Sara Pishdadian, Ph.D., C. Psych. (Supervised Practice)

** Available for 2024-2025 Fall/Winter Practicum. This placement is largely in-person. Preference for Ph.D. level applicants with prior neuropsychology testing experience.*

Neuropsychological assessment referrals come from CAMH's General Geriatrics Clinic, Memory Clinic and Neuropsychiatry Clinic. In this service, practicum students will gain experience in clinical interviewing, administering and interpreting neuropsychological assessment measures, writing comprehensive assessment reports, and providing feedback to clients, family members, and service providers.

Neuropsychological assessments in this service address referral questions related to differential diagnostic work-ups for neurodegenerative disorders (e.g., mild vs major neurocognitive disorders; neurocognitive vs psychiatric disorder) and establish a detailed cognitive profile to inform treatment

planning. There will also be opportunities to observe or co-facilitate cognitive rehabilitation groups, depending on trainee interest and skill level. Weekly individual supervision meetings will be held with students and there are opportunities to attend a range of clinical rounds and interdisciplinary team meetings.

ADULT NEURODEVELOPMENTAL SERVICES (ANS)

Supervisors: Yona Lunsky, PhD, C. Psych
 Alex Porthukaran, PhD, C. Psych (Supervised Practice)
 Andjelka Palikucin, MA, C. Psych

** Available for 2024-2025 hybrid Fall/Winter Practicum and we may offer a Summer practicum.*

The ANS at CAMH works with people (16+) who have a confirmed diagnosis of intellectual disability and/or Autism with mental health concerns.

The role of psychology within Adult Neurodevelopmental Services includes both assessment and therapy. The student would be involved primarily in conducting group and individual therapy, with some opportunity to conduct assessments if required. Our psychodiagnostic assessments are focused on the diagnosis of autism, as well as co-occurring mental health conditions. The groups offered in the program include Cognitive Behavioural Therapy (CBT) groups for autistic adults without ID, with symptoms of anxiety and depression, and group based interventions for parents of adolescents and adults with disabilities (ACT and mindfulness groups). Practicum students will have the opportunity to co-lead the group with staff from psychology and an allied health staff (e.g., occupational therapist, social worker, etc.). Individual therapy clients are often people with intellectual disability or autistic adults referred for a variety of presenting concerns including more severe anxiety or depression, OCD, trauma, anger issues, concerns specific to autism, etc. The primary treatment modality is CBT, but the student will gain exposure to skills from other modalities including ACT and possibly mindfulness-based approaches. The practicum student will work closely with an interdisciplinary team including psychiatrists, social workers, occupational therapists, behavior therapists and others. A successful candidate will have exposure to CBT work through their course work and individual therapy experiences. Although this is primarily an intervention practicum, there are also opportunities to be involved in assessments (including autism assessments using the ADOS).

Supervision includes weekly individual and group supervision, in addition to direct weekly clinical rounds with the larger ANS team.

FORENSIC PSYCHIATRY DIVISION

The **Forensic Psychiatry Division** was one of the first forensic centres established in Canada and continues to be at the forefront of research and treatment innovations. The **Forensic Psychiatry Division** specializes in the assessment and treatment of individuals who have ongoing involvement with the legal system. There are two forensic rotations available, (1) the Forensic Consultation and Assessment Team (FORCAT), and (2) the Sexual Behaviours Clinic.

Forensic Consultation and Assessment Team (FORCAT)

Supervisor: Emily Cripps, Ph.D., C.Psych.

** Not available for 2024-2025 placements*

FORCAT is part of the CAMH Forensic Division of the Complex Care and Recovery Program. Staff at FORCAT are involved in providing specialized forensic assessments and intervention to patients found Not Criminally Responsible on Account of Mental Disorder who are before the Ontario Review Board. Students will have opportunities for group facilitation and individual psychotherapy. Students will be exposed to a range of assessment techniques and measures as well as specific interventions targeting risk, will gain experience in forensic report writing, and will become familiar with standards of forensic practice. Students will have the opportunity to work on in-patient units as well with outpatient clients who are quite diverse ranging from those with extensive criminal histories, intellectual challenges and women to individuals who are of Aboriginal descent or cultural or visible minorities. Additionally, students may have opportunities for providing consultations on risk management to clinical teams across the hospital. Supervision is provided on an individual basis as well as in team meetings and case conferences. The ideal candidate for the Adult Forensic rotation is one with a strong interest in assessment and treatment of clients within a forensic setting and some prior experience with assessment and/or therapy. A FORCAT practicum placement would likely be in person, but could also involve a hybrid of in person and virtual work.

Sexual Behaviours Clinic (SBC)

Supervisors: Ainslie Heasman, Ph.D., C.Psych
Sandra Oziel, Ph.D., C.Psych

** Summer and Fall/Winter placements are accepted. Applicants for a Summer rotation should have more training and experience in forensic environments.*

The Sexual Behaviours Clinic (SBC) is part of the CAMH Forensic Division of the Complex Care & Recovery Program. The SBC outpatient unit specializes in the assessment and treatment of individuals with sexual behaviour problems. Most individuals have engaged in sexual offences and have involvement with the legal system which results in their referral to the SBC, while others have self-identified concerns over sexual behaviour and/or interests that could result in legal involvement if acted upon. An increasing number of non-justice involved individuals with pedophilia and/or hebephilia present to the clinic for treatment through the Talking for Change program.

Students typically engage in risk, sexological and diagnostic assessments of individuals in an outpatient context, and may also have the opportunity to assess individuals on an inpatient unit for sexual behaviour concerns. While psychological testing is not routinely conducted in these assessments, there is an opportunity for students to incorporate assessment tools on occasion, or assist in a more structured psychological assessment of clients referred by another SBC discipline. Students will learn to become proficient in the scoring of the Static-99R, Stable-2007 and developing case formulations in the context of assessment and treatment. Treatment groups for sexual behaviour problems are provided to outpatient groups and students can participate in co-facilitation. There is an opportunity for individual therapy cases as well, addressing the same presenting sexual behaviour problems. Students will become familiar with the psycholegal standards involved in forensic assessment and how to work with key stakeholders in the system (i.e. probation).

There may be opportunities to assist in the Talking for Change program (<https://TalkingForChange.ca>) through provision of anonymous helpline services and/or assessment and psychotherapy with Dr. Heasman. This program is for non-justice involved individuals with a sexual interest in children and/or who are concerned about their risk to offend sexually with children, online or offline.

Supervision is provided on an individual basis, as well as in team meetings and weekly case conferences. Students will also have the opportunity to participate in various departmental and hospital wide seminars.

**** Applicants should clearly indicate in their letter whether they are interested in a practicum with Talking for Change specifically and/or the larger SBC service only.**

CLINICAL PRACTICUM FACULTY SUPERVISORS

Brendan Andrade, Ph.D., C.Psych., Dalhousie University, 2006. Clinical Interests: assessment and treatment of children and adolescents with disruptive behaviour and associated mental health concerns. Individual, family, and group based cognitive-behavioural intervention. Research Interests: social-cognitive and familial contributions to childhood disruptive and aggressive behaviour, ADHD, peer relationships, and clinic- and community-based prevention and intervention programs for disruptive children.

Michael Grossman, Ph.D., C.Psych., Queen's University, 2018. Clinical and Research Interests: assessment and treatment of individuals with schizophrenia spectrum disorders, with an emphasis on mechanisms of change in Cognitive Behavioural Therapy for psychosis.

Niki Fitzgerald, Ph.D., C. Psych., University of Windsor, 2006. Clinical Interests: assessment and treatment of depression and anxiety-spectrum disorders with a particular interest in PTSD. Research Interests: the role of psychosocial factors on the presentation of depressive, anxiety, and pain disorders.

Teresa Grimbos, Ph.D., C.Psych. University of Toronto, 2014. Research and Clinical Interests: development and treatment of psychopathology in children and adolescents in the context of parent-child dynamics and parent mental health issues; risk factors associated with sexual offending and sexual re-offending in adolescents.

Ainslie Heasman, Ph.D., C.Psych., California School of Professional Psychology, 2005. Clinical Interests: sexological and diagnostic assessment and treatment of adults with atypical sexual interests, sexual behaviour problems, assessment of violence and sexual risk. Individual and group treatment for atypical sexual interests and/or sexually problematic behaviours employing cognitive-behavioural strategies and the Good Lives Model. Research Interests: mandatory reporting, secondary prevention of child sexual abuse.

Yarissa Herman, D.Psych., C.Psych. University of Western Australia, 2010. Clinical and research interests: psychosocial interventions for people with psychosis, with a particular emphasis on motivational interviewing and concurrent disorders.

Liora Keshet, M.A., C.Psych. Assoc., Hebrew University of Jerusalem, 1995. Clinical Interests: assessment and consultation of developmental and learning disabilities in children and adolescents.

Sean Kidd, Ph.D., C.Psych., Clinical Interests: complex trauma, mindfulness, and emotion-focused therapy. Research Interests: examining mechanisms of resilience among marginalized persons and the effectiveness of psychiatric rehabilitation interventions.

Judith M. Laposa, Ph.D., C.Psych., University of British Columbia, 2005. Clinical Interests: assessment; individual and group cognitive therapy for anxiety disorders. Research Interests: measurement and

evaluation of cognitive models of anxiety disorders, and mechanisms in treatment response to cognitive behaviour therapy, with particular interests in PTSD, social phobia, and obsessive-compulsive disorder.

Judith Levy-Ajzenkopf, Ph.D., C.Psych., Concordia University, 2006. Clinical Interests: assessment, individual and group therapy for personality disorders. Research Interests: Program development and evaluation.

Longena Ng, Ph.D., C.Psych., York University, 2010. Clinical and Research Interests: Psychological assessment and cognitive behavioural treatment of PTSD, anxiety disorders, and depression. Program development and evaluation.

Sandra Oziel, Ph.D., C.Psych, Ryerson University, 2016. Clinical Interests: Risk assessments for violent and sexual offending, empathy in sexual offending, and cognitive and behavioural strategies for managing deviant sexual interests. Research Interests: Program evaluation and the use of protective factors in risk assessment.

Sara Pishdadian, Ph.D., C.Psych (Supervised Practice), York University, 2023. Clinical and Research Interests: neuropsychological assessment in psychosis spectrum and neurodegenerative illness, cognitive-behavioural therapy for individuals with psychosis spectrum illness, and cognitive rehabilitation interventions.

Lena C. Quilty, Ph.D. University of Waterloo, Clinical and research interests: include psychological assessment and treatment of mood and anxiety disorders. Research interests include the role of personality and cognition as mediators and moderators of treatment outcome in depression, the hierarchical structure of personality and psychopathology, and the psychometric evaluation of measures of psychopathology and other individual difference variables.

Pushpinder Saini, M.A., C.Psych. Assoc., Delhi University, New Delhi, India, 1998. Clinical Interests: Clinical Psychology and Clinical Neuropsychology- evaluation and assessment of neurological basis of behavioral, social, emotional difficulties affecting learning in children and adolescents.

Tracey A. Skilling, Ph.D., C.Psych. Queen's University, 2000. Research and Clinical Interests: causes and correlates of serious antisocial behaviour in children and adolescents; treatment program development and evaluation.

Julianne Vandervoort, Psy.D., C.Psych. Université du Québec en Outaouais, 2015. Clinical and research interests: psychological assessment and cognitive behavioural treatment of depression, anxiety, and substance use disorders in adults.

Julia Vinik, Ph.D., C.Psych. University of Toronto, 2014. Clinical and Research Interests: justice involved youth, sexual offending, trauma-informed care, parenting and socialization, value acquisition.

Centre for Addiction and Mental Health
2024-2025 Psychology Practicum Application Form

(Applications are due on or before **February 1, 2024**)

Name: _____

Address	
Telephone	
Date of Birth	
E-Mail Address	

Educational Background

University	Dates of Attendance	Major	Degree Granted or Expected Completion Year

Director of Clinical Training: _____

Address	
Telephone	
E-Mail Address	

Fall-Winter Practicum

Spring-Summer Practicum

Rankings:

Based on the aforementioned descriptions provided, please rank order of the following rotations you would be interested in participating in (e.g., 1= 1st choice [most preferred rotation], 2= 2nd choice, 3= 3rd choice, etc.).

Please note that there are:

- (1) Child and Youth Track
- and
- (2) Adult Track

It is possible, but unusual for candidates to have in-depth training in both child and adult work. If you have both, you may rank across Child and Adult tracks. Otherwise, you should rank within one track only.

You do not have to rank as many as 3 services (only rank those in which you are interested), but please **do not rank more than 3 choices in total.**

CHILD and YOUTH TRACK

Better Behaviours Service

Mood and Anxiety Service – n/a

Psychological Assessment Team for Children and Youth

Youth Justice Assessment Clinic

ADULT TRACK

Addictions and Concurrent Disorders

Adult Neurodevelopmental Service

Borderline Personality Disorder Clinic

Clinical Research

Complex Care and Recovery Program - Cognitive Behaviour Therapy Service

Complex Care and Recovery Program – Neuropsychology Assessments & Cognitive Intervention for the Geriatric Mental Health Services

Forensic Division - Adult Inpatient Service – n/a

Forensic Division - Consultation and Assessment Team – n/a

Forensic Division - Sexual Behaviours Clinic

Integrated Day Treatment Program

Mood and Anxiety Ambulatory Services

Work, Stress, and Health Program



Practicum Placements in Psychology

Baycrest Hospital

The Neuropsychology and Cognitive Health Program at Baycrest offers practicum placements for students currently enrolled in accredited graduate clinical psychology training programs. We offer placements in three areas of emphasis, including Neuropsychological Assessment, Cognitive Intervention, and Behavioural Intervention.



About Baycrest

Baycrest is a global leader in geriatric healthcare, residential living, research, innovation, and education, with a special focus on brain health and aging. As an academic health sciences centre fully affiliated with the University of Toronto, Baycrest provides an exemplary care experience for aging clients combined with an extensive clinical training program for students and one of the world's leading research institutes in cognitive neuroscience.

Baycrest is located at 3560 Bathurst Street in Toronto near the intersection of Bathurst street and Wilson street. It is easily accessible by public transit.

Care. Baycrest serves approximately 1200 seniors per day. It is home to a globally recognized and innovative continuum of healthcare, wellness, and prevention programs and services. Services include outpatient clinics, a hospital, long-term care home, and residential and community-based programs designed especially for people in their 50s, 60s, 70s, 80s and beyond.

Research & Innovation. Baycrest is a leader in cognitive neuroscience and memory research, with the goal of transforming the journey of aging. The Rotman Research Institute is a preeminent international centre for the study of aging and human brain function. The Kunin-Lunenfeld Centre for Applied Research & Evaluation (KL-CARE) provides resources and expertise to support clinical, evaluative and translational research at Baycrest. The Centre for Aging and Brain Health Innovation (CABHI) is a solution accelerator focused on driving innovation in the aging and brain health sector. At the Kimel Family Centre for Brain Health and Wellness, Baycrest experts focus on integrating research with wellness programs and lifestyle interventions, with the ultimate goal of reducing dementia risk.

Education. Fully affiliated with the University of Toronto, Baycrest has an extensive clinical training program in geriatric care. We have trained thousands of students and practitioners from over 50 universities and colleges to deliver high quality care alongside leading experts who are focused on the diseases of aging and care of older adults. Each year we provide students with practical on-site training in almost every healthcare discipline.

About Neuropsychology and Cognitive Health

The Neuropsychology and Cognitive Health program provides clinical services, education and training, and clinical research related to the assessment and treatment of memory and other cognitive abilities in older adults. Our program provides neuropsychological assessment, intervention, and consultation across Baycrest services and to external organizations. Our team includes neuropsychologists, social workers, administrative staff, as well as many volunteers and trainees. The mission of our program is to provide excellence and leadership in clinical neuropsychological services.



Our services are closely integrated with research and education. Our faculty are scientist-practitioners who contribute to the development and dissemination of clinical knowledge via clinical research, program evaluation, and the development of innovation. There is a strong emphasis on training future psychologists through practicum placements and our Predoctoral Internship Program in Clinical Neuropsychology, which is accredited by the Canadian Psychological Association.

During the academic year, we offer formal didactics including:

- *Psychology Research Rounds*: Current clinical research findings are presented by staff in the Neuropsychology and Cognitive Health program, other Baycrest departments, and affiliated organizations.
- *Neuropsychology Seminars*: Presentations focus on core topics in the practice of clinical neuropsychology, including major disorders, assessment and diagnosis, neuroimaging, consultation and intervention, program evaluation, supervision, ethics, and professional practice.
- *Evidence-Based Practice in Psychology Series*: Presentations focus on using literature reviews and discussions to increase participants' ability to find and critically appraise evidence-based clinical resources and research.
- *Diversity, Equity, and Inclusion Journal Club*: Discussion of selected articles increase awareness of diversity, equity, and inclusion within the context of neuropsychological practice.
- Additional Baycrest-wide learning opportunities are available to students, including Behavioural Neurology Rounds, Geriatric Medicine Rounds, Behavioural Supports Ontario Rounds, Geriatric Mental Health Education Network Rounds, Rotman Research Rounds, and Psychiatry Grand Rounds.

For more information about the Neuropsychology and Cognitive Health program, including our clinical services, learning opportunities, and our staff, visit www.baycrest.org/neuropsychology.

Practicum Placement Opportunities

Neuropsychology and Cognitive Health offers practicum placements for students currently enrolled in accredited graduate clinical psychology training programs. Affiliation agreements are required between Baycrest Hospital and the student's university.

Placements are available during the summer term (May 1 to August 31) and the academic year (September 1 to April 30). Exact start and end dates are flexible, depending on the needs of the student and the availability of the supervisor. We offer both full-time placements (35 hours per week) and part-time placements (typically 14 to 21 hours per week). The number of practicum placements during any particular term is dependent on the availability of supervisors, and typically ranges from 4 to 7 per year.

We offer practicum placements in three areas of emphasis. All placements apply a developmental training model. Specific activities and expectations are tailored to the emerging competencies of the

trainee. It is possible to combine elements of more than one emphasis, for example, a primarily neuropsychological assessment practicum with exposure to cognitive intervention, a primarily cognitive intervention practicum with exposure to neuropsychological assessment, or a primary behavioural intervention practicum with exposure to cognitive intervention or neuropsychological assessment. These arrangements are typically made after the practicum placement has begun, to allow trainees time to orient to their roles and available opportunities.

Current practicum placement opportunities include:

1. Emphasis in Neuropsychological Assessment

Students in this practicum placement participate in neuropsychological assessment with persons presenting with a range of memory and thinking problems. Referrals come from a variety of specialist services within Baycrest (e.g., Geriatric Assessment Clinics, Ambulatory and Inpatient Mental Health services, Sam and Ida Ross Memory Clinic). Referral questions typically include delineation of cognitive strengths and weaknesses, assistance with differential diagnosis, and suitability for available intervention programs. Case conceptualizations typically include an opinion about the presence and nature of any underlying neurodegenerative illness, relevant medical, psychiatric, psychosocial, and cultural/linguistic factors, and functional implications and recommendations.

The complete assessment process involves reviewing the medical history of the client, determining appropriate tests/measures to be completed, interviewing the client and family, administering and scoring tests, formulating diagnoses and recommendations, preparing a written report, and providing verbal and written feedback to the client and family. For all clinical activities, experiences are tailored to the trainee's developmental readiness and goals. This typically includes some combination of observing the supervisor with clients, being directly observed by the supervisor, and working with clients without direct supervision. Exposure to interprofessional team meetings is available.

2. Emphasis in Cognitive Intervention

Students in this practicum placement engage in memory-related intervention activities ranging from mild cognitive impairment (MCI) to severe memory impairment (amnesia) secondary to neurologic dysfunction. Students will learn to implement individualized and group memory interventions and to coordinate case management.



The types of clients receiving these services include those with MCI, traumatic brain injury, dementia, encephalitis, cardiovascular accidents, and other neurologic disorders. This practicum experience combines cognitive intervention for two clinical services.

Memory-Link evaluates and treats clients with moderate to severe memory impairment and their families and provides training in internal memory strategies and external memory aids, including using smartphone technology.

Learning the Ropes for Living with MCI[®] provides education and training to promote brain health, well-being, and everyday memory ability in older adults with MCI and their families. The program runs for 7 sessions, with 6 weekly sessions and a 1-month follow up session.

3. Emphasis in Behavioural Intervention

Students in this practicum placement will gain experience in managing behavioural symptoms of dementia using non-pharmacological intervention strategies for individuals in long term care, acute care, or home settings across the greater Toronto area. Students may also acquire exposure to neuropsychological assessment to rule out normal pressure hydrocephalus.

Students will participate in and learn to (a) conduct functional behavioural assessments where factors that contribute to behaviours are identified, (b) collaborate in developing individualized behaviour care plans, (c) facilitate interviews, feedbacks and follow-up sessions with health care teams and/or family caregivers, (d) attend weekly interdisciplinary rounds, (f) co-facilitate psychotherapy sessions with health care teams and/or family caregivers experiencing burn out. Prior clinical training in behaviour management is not a pre-requisite for completing this placement.

Practicum Application Process

Students interested in applying for a practicum placement should send the following materials by e-mail to Dr. Keera Fishman at psychpracticum@baycrest.org:

- A completed Practicum Application Form, found here: <https://forms.office.com/r/BBEjNNrLLR>
- A letter of interest describing their training experiences and goals
- A current CV
- Most recent graduate transcript (unofficial copies are acceptable)
- Two letters of reference, to be sent directly from referees to psychpracticum@baycrest.org

Completed applications will be forwarded to practicum supervisors. Interested supervisors will typically contact selected applicants within two weeks of the practicum application deadline. Please note that not all placements may be available at a given time. The type and number of placements is dependent on the availability of supervisors. Additionally, applicants may be contacted by more than one interested supervisor. There is full transparency within our department about this, and we welcome candidates to interview broadly to determine the best fit.

We use the common deadline and notification procedures for Greater Toronto Area Practicum Training Programs. The application deadline for both summer and fall/winter placements is in February, and the notification day is in March. If your program is outside of the greater Toronto area and has a different notification deadline, please provide details in your application form and your letter of interest.

Our Commitment to Accessibility

We are committed to providing a learning environment that welcomes and supports everyone. Please let us know if you have any questions, concerns, or require any accommodations to participate fully in our program.

Contact Us

Phone: 416-785-2500 x2445 | Email: psychpracticum@baycrest.org | Web: www.baycrest.org/neuropsychology



3560 Bathurst Street
Toronto, Ontario
M6A 2E1

Baycrest is fully affiliated with
the University of Toronto



UNIVERSITY OF
TORONTO

2024-2025



Hamilton
Health
Sciences

Practicum Training in Clinical, Health, and Neuropsychology

Contact the Psychology Practicum Coordinator
for further information:

Dr. Felicia Chang, C.Psych.

Ron Joyce Children's Health Centre, 3rd Floor
237 Barton St E.

Hamilton, Ontario

L8L 2X2

Tel: (905) 521-2100 Ext. 77349

Email: psychpracticum@hhsc.ca

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The Setting

Hamilton Health Sciences is located in Hamilton, Ontario, Canada. Home to more than a half million residents, Hamilton is situated at the western tip of Lake Ontario midway between Niagara Falls and Toronto, and is **easily accessible by Go Transit from the GTA**. It is the site of McMaster University, known internationally for its innovative medical school and research programs and the home of evidence-based practice.

Hamilton Health Sciences is comprised of five hospitals and four specialized centres, serving more than 2.2 million residents in Central South and Central West Ontario. Each of the facilities offers specialized services that together make HHS one of the most comprehensive health care systems in Canada.

Psychology staff at Hamilton Health Sciences, which includes over thirty registered psychologists, are integral members of teams and services. Psychology staff have backgrounds ranging from clinical psychology, school psychology, applied behavioural analysis, rehabilitation, health psychology, and neuropsychology. Many psychologists at HHS also have cross appointments with McMaster University in the Department of Psychiatry and Behavioural Neurosciences in the Faculty of Health Sciences. The affiliation with McMaster University provides students with an invaluable opportunity to learn from and interact with students, clinicians, and faculty in medicine, pediatrics, psychiatry, social work, and other allied health disciplines (e.g., speech/language pathology, occupational therapy) and allows patients to benefit from innovative treatments/research and staff and students to actively participate in research and teaching endeavours.

The specific sites/programs that offer placements vary year-to-year. Please see page 10 of this Brochure to know what is offered for the 2024-2025 year.

Potential Practicum Sites

Each of the hospitals and centres comprising HHS offer specialized services. This year, practicum placements will be offered at the following sites:

- Ron Joyce Children's Health Centre (RJCHC)
- McMaster University Medical Centre (MUMC)
- Juravinski Cancer Centre (JCC)
- Regional Rehabilitation Centre (RCC)

Students spend most (if not all) of their time at the location their clinic is in, with opportunities to train elsewhere if desired and appropriate. Workstations are provided for on-site work and are often shared given practicum students are part-time. Private rooms are provided for any on-site work with clients, including access to video or audio recording and live-supervision. via one-way mirrors. Some virtual/remote work may be available for intervention-based practicum placements.

Dr. Felicia Chang, C. Psych
Practicum Coordinator
237 Barton St. E.
Hamilton, Ontario L8L 2X2

HHS Mission: *To provide excellent health care for the people and communities we serve and to advance health care through education and research.*

HHS Vision: *Best Care for All.*

Our Programs

HHS programs provide a supervised opportunity for the integrated application of the theoretical, clinical, professional, and ethical knowledge and skills acquired during graduate training. Students are expected to develop core competencies based on their learning goals in the assessment, consultation, and treatment of populations with a range of psychiatric, developmental, learning, medical, neurological, behavioural, and emotional difficulties, using evidence-based approaches. Supervision in the acquisition and refinement of assessment, formulation, and therapeutic skills is available via several therapeutic modalities, including behaviour therapy (BT), cognitive behaviour therapy (CBT), dialectical behaviour therapy (DBT), acceptance and commitment therapy (ACT), motivational interviewing (MI), emotion focused family therapy (EFFT), and family systems. Training is offered in individual and group therapy, and parent and professional psychoeducation formats. Supervision for each treatment modality is negotiated with the assistance of the practicum student's primary supervisor.

Based on learning goals, students can be exposed to the work of psychologists on multidisciplinary inpatient and outpatient teams and have the opportunity to develop skills collaborating with health care professionals from other disciplines, as well as professionals from schools and community agencies. Students are expected to work with diverse populations (e.g., various cultural backgrounds).

Practicum students typically focus on either complex psychological assessment and/or psychological intervention. The variety of assessment and treatment experiences available to practicum students is substantial. This flexibility is an attractive attribute of the psychology practicum program at Hamilton Health Sciences. Of course, students are supported to select experiences that meet their learning goals and schedules.

Each site and the programs offered within the site are described on the following pages of this brochure.

- **Child and adolescent placements are on pages 4-6**
- **Adult placements are on pages 6-7**

As mentioned previously, you can go to page 10 of this brochure to determine which programs are accepting applicants this year.

Program Philosophy and Mission

In keeping with the mission of Hamilton Health Sciences, our program is committed to providing exceptional care through a scientist-practitioner approach and advancing health care through education and research by emphasizing the bidirectional relationship between science and practice. As such, the training of students emphasizes the review of research to inform clinical practice; the use of empirically-supported, evidence-based assessment and treatment approaches where indicated; integration of structured evaluations of emerging approaches to inform clinical care; and clinically-relevant research and individualized or tailored interventions, ultimately to best meet the needs of the clients served.

Our goal is to train the next generation of clinical child psychologists who are caring, compassionate, and collaborative. We support our students to develop their own professional identity through a developmental approach to training within a learner-centered environment. We promote the achievement of individual training goals within the context of developing the essential functional and foundational competencies that form the basis of clinical child psychology. Our program provides the opportunity to gain depth and breadth in a wide range of clinical activities, including experience in interdisciplinary teamwork, which is a critical component in providing quality client care. We value equity, diversity, and inclusion; recognize the impact of systemic barriers to accessing care; and actively seek to reduce these barriers.

Ron Joyce Children's Centre (RJCHC)

Child and Youth Mental Health Program (CYMH) Outpatient Service

The CYMH Outpatient Service provides outpatient assessment, consultation, and treatment for children and adolescents (ages 3 to 18) with comorbid problems of an internalizing and/or externalizing nature that interfere with functioning in the home, school, and/or community. Treatment services offered include individual therapy, family therapy, group therapy, parent skills training, medication consultation, and consultation with community agencies and schools.

Team members on the CYMH Outpatient Service include psychologists, psychiatrists, social workers, nurses, child and youth workers, and early childhood resource specialists. If possible, we ask that practicum students aim to participate on and provide consultation to the Outpatient Multidisciplinary Team (Monday meetings). Some CYMH Outpatient Service team members are also part of the DBT Consultation Team, which meets weekly.

Individual therapy modalities include CBT, DBT, ACT, and interpersonal therapy. Group therapy offerings typically involve Parenting Your Child with OCD, Bossing Back OCD (child and youth groups), Unified Protocol CBT, Parent-Led CBT for Anxiety, DBT Multifamily Skills Group, and Acceptance and Commitment Therapy.

The CYMH Outpatient Service offers an array of family-based interventions, including 2-day EFFT caregiver workshops and individual EFFT work with caregivers. Additionally, The Family Therapy Clinic allows families to work with an interdisciplinary team that adopts a co-therapist model and incorporates principles from Family Systems Therapy, Narrative Family Therapy, and Structural Family Therapy. Learners may have the opportunity to support families as a co-therapist and/or as part of the Reflection Team that observes family therapy sessions and offers reflections. Finally, Family Check-Up is a 3-session, ecological, family-based assessment that incorporates multi-method (interviewing, video interaction tasks, questionnaire data) and multi-rater information on risk and protective factors to understand influences on the developmental trajectory of the child. The FCU model is strengths-based, collaborative and uses principles of motivational interviewing to understand how parent well-being, child well-being and parenting/family environment are connected. The FCU has a strong evidence base from decades of research. It has been delivered in the USA for quite some time, and clinicians within the Child and Youth Mental Health Outpatient Service who typically provide parent training were initially trained and credentialed in this model in early 2018. We are the first Canadian mental health service to offer the FCU. After the FCU is completed with a family, goals are set in collaboration with the parents/caregivers, which may include the parent skills training intervention connected to the FCU called Every Day Parenting (EDP). The EDP program follows the same principles as the FCU. Both FCU and EDP are transdiagnostic (i.e., not restricted to certain diagnostic presentations). The EDP manual is made up of 12 distinct sessions that are meant to be tailored to the needs of the family.

Supervising Psychologists: *Dr. Felicia Chang, Dr. Jennifer Cometto, Dr. Emily Copps, Dr. Jessica Dalley, Dr. Brittany Jamieson, Dr. Danielle Pigon, Dr. Paulo Pires, Dr. Seamus O'Byrne, Dr. Tajinder Uppal-Dhariwal, Dr. Avraham Grunberger, Dr. Joanna Messenger*

Developmental Pediatrics and Rehabilitation (DPR) provides outpatient services to children with developmental, behavioural, physical, or communication needs and their families. DPR also provides alternative/augmentative communication services to children and adults with neurological, developmental and/or multiple disabilities. DPR is a diverse team of clinicians covering disciplines such as psychology, speech-language pathology, occupational therapy, physiotherapy, social work, behaviour therapy, early childhood education, and therapeutic recreation. A variety of services are offered through DPR that include group-based intervention, team and individual assessments, parent/caregiver workshops, parent/caregiver counselling, consultation, and individual intervention.

Supervising Psychologists: *Dr. Nidhi Luthra, Dr. Olivia Ng & Dr. Katherine Stover*

The Autism Spectrum Disorder Program, located at RJCHC, provides both government-funded and direct-purchase services for children and youth with Autism Spectrum Disorder, including consultation, Applied Behaviour Analysis (ABA), psychological assessments, groups, and parent/caregiver education and training. The multidisciplinary team is comprised of psychologists, psychometrists, behavioural clinicians, family service coordinators, and school support consultants. Opportunities for students include participating in interdisciplinary consultations, completing comprehensive psychodiagnostic assessments, co-facilitating parent and child groups, and providing individual cognitive-behavioural therapy.

Supervising Psychologists: *Dr. Caroline Roncadin, Dr. Irene Drmic & Dr. Rebecca Shine*



McMaster University Medical Centre (MUMC) Site—Child/Youth Programs

The **Pediatric Eating Disorders Program** provides services to children and adolescents up to the age of 18 who require multi-disciplinary assessment and treatment of an eating disorder (Anorexia Nervosa, Bulimia Nervosa, Avoidant/Restrictive Food Intake Disorder, Binge-Eating Disorder, etc.) and any comorbid conditions. While the majority of patients are seen on an outpatient basis, the program also offers inpatient treatment for medically unstable patients as well as an intensive day-hospital program. Services include medical management, refeeding, individual therapy, family therapy, group therapy, and nutritional counseling. Team members include psychologists, a psychiatrist, pediatricians, social workers, a registered dietician, registered nurses, and child life workers.

Supervising Psychologist: *Dr. Stephanie Deveau, Dr. Carolyn Roy*

The **Pediatric Chronic Pain Program (PCPP)**, located at MUMC, provides outpatient, interdisciplinary, family-centred care to children and youth who face chronic pain. There are many different types of chronic pain conditions in children and youth, including headaches, abdominal pain, musculoskeletal pain, and arthritis. The PCPP aims to provide youth and caregivers with skills to reduce the impact of pain on their daily life by utilizing an interdisciplinary functional rehabilitation approach. Some of the interventions in the clinic include psychoeducation, goal-setting, medication review, physiotherapy, activity pacing, parent groups, relaxation and mindfulness, cognitive behavioural therapy, acceptance and commitment therapy, emotion-focused family therapy, motivational interviewing, and consultation with school and community agencies. The team includes many health professionals (i.e., psychologists, social workers, an occupational therapist, a nurse practitioner, physiotherapists, child life specialists, pediatricians, a psychiatrist, a pharmacist, and an anesthesiologist) who work together to collaborate and coordinate care for youth with chronic pain. Opportunities for students include participation in interdisciplinary assessments, completion of comprehensive psychodiagnostic assessments, co-facilitating parent groups, and providing individual psychotherapy.

Supervising Psychologist: *Dr. Kathleen Lee & Dr. Rachel Jackson*

The **RBC Child and Youth Mental Health Inpatient Unit** is located at the MUMC Site. Student placements on the inpatient unit focus on providing assessment, treatment, and consultation. Students are exposed to severe mental illnesses, including psychosis, bipolar disorder, severe mood disorder, and personality disorders.

Supervising Psychologists: *Dr. Jennifer McTaggart & Dr. Ashley Legate*

The **Mental Health Assessment Unit (MAU)** is located in the MUMC Emergency Department. Student placements in the MAU focus on completing comprehensive risk assessments with children and youth who present to the Emergency Department with mental health crises. Students are exposed to severe mental illnesses, as well as youth with suicidal and homicidal ideation.

Direct Supervisor: *MA-level Social Worker in the MAU* **Supervising Psychologists:** *Dr. Jennifer McTaggart*

The **Psychiatry Consultation/Liaison Service** is available to the pediatric medical clinics at MUMC. Children and youth with chronic diseases, life-limiting illnesses and disabilities are three times more likely to suffer from a mental health concern. Caring for children and youth who have medical conditions with co-existing mental health concerns such as anxiety, depression, adjustment disorder, and learning disabilities is a common occurrence in pediatric medical settings and is becoming a daily aspect of pediatric inpatient medicine. There is a need to address the complex relationship between a child's medical illness and emotional well-being. Typical student activities in C/L may include: helping patients and their families adjust to their newly diagnosed illnesses and the impact on their lives; conducting diagnostic and/or complex risk assessments with patients with chronic health conditions; consulting to medical professionals on how best to manage patients with comorbid mental health presentations; training medical professionals in emotion-focused healthcare.

Direct Supervisor: *Laurie Horricks, NP-Peds* **Supervising Psychologist:** *Dr. Jennifer McTaggart*

HHS & Psychology Training Program Values

Respect: *We will treat every person with dignity and courtesy.*

Caring: *We will act with concern for the well being of every person.*

Innovation: *We will be creative and open to new ideas and opportunities.*

Accountability: *We will create value and accept responsibility for our activities.*

MUMC— Child/Youth Programs Continued

The **Children's Exercise and Nutrition Centre** is located at MUMC. Students gain experience in behavioural medicine while working with children and families presenting with comorbid psychological and physical health challenges associated with obesity and lipid metabolism disorders. Students will have exposure to psychological/behavioral assessments related to medical problems, consultations, brief interventions, the interplay between physical and psychological health, coordinated inter-professional teamwork, and gain an understanding of the multifactorial nature of obesity and lipid metabolism disorders. Students learn to provide psychological and behavioral interventions for prevention and/or treatment of medical issues related to obesity and to assist patients in coping with a myriad of conditions (e.g., maladaptive eating habits, sleep issues, motivation, unhealthy body image, impact of bullying, stress, and psychological distress). Brief interventions consist of motivational interviewing, cognitive, behavioral, and parenting strategies. The interprofessional team includes physicians, a psychologist, a nurse practitioner, registered dietitians, an exercise physiologist, an activity therapist, and various learners.

Supervising Psychologist: *Dr. Sheri Nsamenang*

The **Pediatric Neurology/Comprehensive Pediatric Epilepsy Program/Neurosurgery and Oncology Neuropsychological Services**, located at MUMC, provide clinical neuropsychological and psychological assessments to children and adolescents. Practicum students with Pediatric Neurology/Comprehensive Pediatric Epilepsy Program/Neurosurgery will be involved in outpatient (ambulatory) neuropsychological assessments of children and adolescents with epilepsy and other neurological conditions (e.g., stroke, MS, autoimmune disorders, AVM, genetic disorders, hydrocephalus), including interview, review of medical and academic documentation, direct testing, formulation, feedback, and report writing. A developmental model of supervision is used where students taking on increasingly more responsibility within the assessment, as their skills and confidence develops. Courses in child psychopathology and theories of neuropsychology (brain-behaviour relations) are required. Completed training in pediatric assessment and test administration is required, specifically students must be able to accurately administer the WISC-V, with competent administration of additional child/adolescent cognitive measures being a highly desired asset. Prior experience in psychological assessment of cognitive/academic issues in children and adolescents is required (e.g., psycho-educational assessments); this does not need to be past neuropsychological assessment practicum experience, although this would be considered an asset. Students do not have to come from a "neuropsychology" program to be considered.).

Supervising Psychologists: *Dr. Cheryl Alyman, Dr. Stephanie Lavoie, Dr. Nevena Simic, Dr. Abbi Graves*

MUMC— Adult Programs

The **Michael G. DeGroot Pain Clinic** at MUMC focuses on chronic pain from clinical, health, and rehabilitation psychology perspectives. Clients are adults (very early adulthood to seniors), who vary widely as to their socio-economic, educational, vocational, and ethnic backgrounds. The interdisciplinary, multi-modal program consists of an intensive 4-week, outpatient (day) or inpatient stay (**Intensive Program**). Students in this program will work (virtual or in-person) to provide groups on self-talk, grief and loss, relaxation/mindfulness, and see patients 1:1 as needed. Students will also conduct at least 1 of 4 weekly assessments for candidacy for admission to the program.

The clinic also provides a publically funded program (**OHIP Program**) that is a regional hub for the outpatient management of a range of persistent pain conditions in adults. The clinic uses a biopsychosocial approach that includes both medical and non-medical intervention to provide patient-centred care. Psychology plays an active role in the clinic, across treatment, assessment, consultation, research, and program development and evaluation. Learners work as part of an interprofessional team comprised of a range of health professions, including psychologists, social workers, occupational therapists, physiotherapists, pharmacists, dietitians, nurses, nurse practitioners, physicians, and physician assistants. Opportunities include individual and group treatment, consultation to the team, psychodiagnostic assessment, and presentations at case rounds. Learners will work with patients presenting with persistent pain problems and often comorbid mental health difficulties, including depression, anxiety, trauma, insomnia, and adjustment-related difficulties. Opportunities for program evaluation and research may also be available.

Supervising Psychologist: *Dr. Gregory Tippin & Dr. Abi Muere*

Juravinski Cancer Centre

The Juravinski Cancer Centre (JCC) is a regional referral centre for central-west Ontario. The JCC services patients and families who have been diagnosed with cancer in the Hamilton-Niagara-Haldimand-Brant region. JCC is where cancer treatments such as chemotherapy and radiation take place, as well ground-breaking cancer research.

The **Psychosocial Oncology Program (PSO)** at the Juravinski Cancer Centre is dedicated to supporting adult patients and their families cope with the psychological, emotional, social, spiritual, and functional impact of cancer. The program provides outpatient and inpatient care across the cancer continuum and for a variety of cancer disease sites, including breast, lung, head and neck, haematology, gastrointestinal, gynecological, genitourinary, central nervous system, skin, endocrine and sarcoma. Residents actively work as part of an interdisciplinary team consisting of psychologist, psychiatrists, nurses, social workers, dietitians, and oncologists. Psychology routinely participates in interdisciplinary consultations and presents at interdisciplinary rounds that review complex patient cases. Training opportunities may include providing psychodiagnostic assessments for treatment planning purposes, inpatient consultations, and short-term individual and group interventions. Psychological interventions target anxiety, mood, grief, end-of-life concerns, caregiver burden, body image, fatigue, insomnia, adherence and adjustment-related concerns. Learners may also co-lead psycho-education sessions to build staff, patient and caregiver capacity to address psychosocial needs that impact cancer care. Opportunities for program evaluation and research may also be available.

Supervising Psychologist: Dr. Karen Zhang

Regional Rehabilitation Centre

The Regional Rehabilitation Centre (**RRC**), located on the Hamilton General Hospital Campus, provides specialized rehabilitative care to help people who are recovering from brain injury, amputations, spinal cord injury, stroke, and hand and work-related injuries. The facility provides both inpatient and outpatient services and clinics, a large prosthetics and orthotics department, a therapeutic pool, and an outdoor therapeutic track.

The **Adult Rehabilitation Neuropsychology Practicum** is housed in the Regional Rehabilitation Centre (RRC), on the campus of Hamilton Health Science's General Hospital campus. Practicum students will divide their time between two programs in the RRC: The Acquired Brain Injury Program Neurobehavioural Rehabilitation Unit and the Stroke Rehabilitation Unit.

The Acquired Brain Injury Program Neurobehavioural Rehabilitation Unit is an inpatient provincial program for adults with acquired brain injuries who also display challenging behavioral and/or mental health issues. The most common types of acquired brain injuries seen on this unit include traumatic brain injuries (secondary to motor vehicle accidents, falls, assaults, etc.), hypoxic/anoxic brain injuries (secondary to heart attacks, drug overdoses, etc.), encephalitis (secondary to infections such as HSV, etc.), and brain tumor resections. Patients' lengths of stay on the unit range from a few weeks to several months, during which time they receive transdisciplinary rehabilitation, in conjunction with a concurrent behaviour management program. *The Stroke Rehabilitation Unit* offers medical care and rehabilitative services to individuals who have sustained strokes or other cerebrovascular conditions. Patients cover the adult span, including older adults, and often have complex medical and/or psychosocial histories.

Supervising Psychologists: Dr. Justine Spencer, Dr. Kate Bartley

Educational Opportunities

In addition to direct clinical training, practicum students in the child/youth programs can participate in a wide variety of educational experiences during their placement, including seminars, rounds presentations, and professional courses.

- One-day training in Non-Violent Crisis Intervention (NVCI).
- Training on Suicide Risk Assessment and Management with Youth.
- Training on Violence Risk Assessment and Management with Youth.
- Training in DBT via a combination of online trainings and supervision.
- Psychology Residency Seminar Series: The HHS psychology residency programs have seminars most Wednesdays afternoons on a wide range of topics (e.g., diagnosis, assessment, treatment approaches). The seminars include a series on Ethics and Professional Practice to provide residents with an opportunity to discuss professional and jurisprudence issues and prepare for the post-doctoral registration process with the College of Psychologists of Ontario (or equivalent regulatory body). Practicum students are able to attend any topics of interest, provided their schedule allows for it.
- Rounds and seminars are held throughout the hospital system on a regular basis. Two examples that students may be interested in include the rounds of the Department of Psychiatry and Behavioural Neurosciences and Ron Joyce Children's Health Centre Rounds.

Supervision and Evaluation

Practicum students are assigned a supervisor (a registered psychologist) in each of the programs they train in. At the beginning of the practicum placement, the student and their supervisor set individualized written goals and objectives and identify appropriate additional supervisors, if necessary, to achieve those goals. It is the supervisor's responsibility to ensure that the required range of experience is provided, that the student's workload is manageable and appropriate to the goals and objectives negotiated, and that sufficient supervision is provided.

Formal review and evaluation of each practicum student's progress is scheduled at the midpoint and at the end of the practicum. Each of the student's supervisors complete an evaluation covering the preceding period, and rate progress towards the written goals and objectives (in domains related to knowledge base, procedural/program design skills, written and interpersonal skills, and ethical and professional practice). The practicum students rate the program and the quality of supervision as well. The results of the evaluations (ratings of goal attainment) are forwarded to the student's graduate program. Of course, any evaluations provided by a student's graduate program will be completed as requested.

Onboarding

As part of onboarding to Hamilton Health Sciences, practicum students must be cleared by Employee Health and obtain a Vulnerable Sector Screening by your local police department (within 60 days of the start date). Effective September 2021, all employees and learners at HHS are required to show proof of full vaccination against COVID-19 (or written proof of a medical reason).



Application Process

Applicants must be enrolled in a graduate program in clinical psychology/neuropsychology, that is **accredited by the Canadian Psychological Association**. Students should have completed graduate level coursework in psychological (and/or neuropsychological) assessment and have basic practical psychometric training. It is recommended that applicants have already obtained direct experience assessing and interviewing clients and their families.

Applicants are required to submit:

- ◆ 1 page cover letter with
 - A summary of clinical training thus far (e.g., coursework and practical work), and
 - Training goals and objectives (including HHS programs of interest)
- ◆ Up-to-date curriculum vitae
- ◆ Unofficial transcripts of graduate studies
- ◆ Minimum of 1 reference letter from a clinical supervisor

Dr. Felicia Chang, C.Psych.
Practicum Coordinator
Child and Youth Mental Health
Ron Joyce Children's Centre, 3rd Floor
237 Barton St. E.
Hamilton, Ontario L8L 2X2
(905) 521-2100 Ext. 77349
psychpracticum@hhsc.ca

Applicants should **clearly indicate**:

- Whether they are applying for a summer or fall/winter placement.
- The program to which they are applying

Completed applications are rated independently by the members of the training committee, ranked, and offered interviews.

Students may submit applications via email to psychpracticum@hhsc.ca To ensure the security of reference letters, please have referees email letters to Dr. Chang directly.

HHS participates in the GTA practicum process, which standardizes the application deadline and notification day procedures. Please refer to relevant documentation (or Graduate Training Programs) for more information.

Successful candidates are notified of the committee's decision as per the GTA Practicum Notification Day Guidelines. Please follow the Notification Day procedures as outlined. In accordance with federal privacy legislation (*Personal Information Protection and Electronics Documents Act*) only information that is required to process your application is collected. This information is secured and is shared only with those individuals involved in the evaluation of your practicum application.

*Hamilton Health Sciences is committed to
a patient/family-centered,
evidence-based approach to health care.*

Note: We conduct different types of assessments including **psychodiagnostic assessments** (i.e., interview and questionnaire based) as well as **neuropsych assessments** and **comprehensive assessments** (which include testing with measures like the WISC, WAIS, WIAT, etc) If you require testing experience, please ensure the position you are applying to offers neuropsych comprehensive assessments.

Pediatric Practicum Opportunities at Hamilton Health Sciences for 2024-2025

Program	Level	Term(s)	Days/Week	Focus	Supervisor
CYMH Outpatient Service - at Ron Joyce	MA or PhD	Summer 2024	3-4 days/week	Comprehensive assessment	TBD
Children's Exercise and Nutrition Centre	PhD	Summer 2024	3-4 days/week	Intervention and psychodiagnostic assessment	Dr. Sheri Nsamenang
CYMH Outpatient Service - at Ron Joyce	PhD	Fall + Winter	2 days/week	Intervention and psychodiagnostic assessment	TBD
Pediatric Chronic Pain Program - at MUMC	MA or PhD	Fall + Winter	2 days/week	Intervention and psychodiagnostic assessment	Dr. Rachel Jackson
Children's Exercise and Nutrition Centre	PhD	Fall + Winter	2 days/week	Intervention and psychodiagnostic assessment	Dr. Sheri Nsamenang

Adult Practicum Opportunities at Hamilton Health Sciences for 2024-2025

Program	Lev-	Term(s)	Days/Week	Focus	Supervisor(s)
Michael G DeGroot Pain Clinic—at MUMC	PhD	Fall + Winter (Sept - June)	2 days/week	Psychodiagnostic assessment, intervention (individual, group), consultation	Drs. Greg Tippin, Abigail Muere, and Laura Katz
Psychosocial Oncology - at JCC	PhD	Summer 2024 or Fall + Winter	2 days/week	Intervention	Dr. Karen Zhang
Adult Neuropsych - Acquired Brain Injury Program and Stroke Rehabilitation Unit	PhD	Fall + Winter	2 days/week	Neuropsychological Assessment	Dr. Justine Spencer and Dr. Kate Bartley
Adult Neuropsych - Acquired Brain Injury Program and Stroke Rehabilitation Unit	PhD	Summer 2024	3 days/week	Neuropsychological Assessment	Dr. Justine Spencer and Dr. Kate Bartley

Child Clinical Psychology Training Staff

Felicia Chang, Ph.D., C.Psych. (University of Windsor, 2019). Child and Youth Mental Health Outpatient Service.

Jennifer Cometto, Ph.D., C.Psych. (University of Windsor, 2013). Child and Youth Mental Health Outpatient Service.

Emily Copps, Ph.D., C.Psych. (Xavier University, 2019). Child and Youth Mental Health Outpatient Service.

Jessica Dalley, Ph.D., C.Psych. (University of Guelph, 2021). Child and Youth Mental Health Outpatient Service.

Stephanie Deveau, Ph.D., C.Psych. (University of Guelph, 2013). Pediatric Eating Disorders Program.

Irene Drmic, Ph.D., C.Psych. (York University, 2007). Autism Spectrum Disorder Service.

Avraham Grunberger, Psy.D., C.Psych. (Pace University, 2011). Child and Youth Mental Health Outpatient Service.

Eleni Hapidou, Ph.D., C.Psych. (McMaster University, 1989). Michael G. DeGroot Pain Clinic.

Brittany Jamieson, Ph.D., C. Psych. (Toronto Metropolitan University, 2021) Child and Youth Mental Health Outpatient Service.

Kathleen Lee, Ph.D., C.Psych. (University of Toronto, 2019). Pediatric Chronic Pain Program.

Katie Lok, Ph.D., C.Psych. (University of Toronto, 2014). Child and Youth Mental Health Outpatient Service.

Nidhi Luthra, Ph.D., C.Psych. (York University, 2018). Specialized Developmental and Behavioural Service.

Jennifer McTaggart, Ph.D., C.Psych. (University of Guelph, 2009). Child and Youth Mental Health Inpatient Service.

Olivia Ng, Ph.D., C.Psych. (University of Toronto, 2015). Specialized Developmental and Behavioural Service.

Sheri Nsamenang, Ph. D., C.Psych. (East Tennessee State University, 2014), Children's Exercise and Nutrition.

Seamus O'Byrne, D.Clin.Psy., C. Psych. (University of Essex, 2018). Child and Youth Mental Health Outpatient Service.

Danielle Pigon, Ph.D., C.Psych. (University of Toronto, 2017). Child and Youth Mental Health Outpatient Service.

Paulo Pires, Ph.D., C. Psych. (University of Toronto, 2005). Child and Youth Mental Health Outpatient Service.

Caroline Roncadin, Ph.D., C.Psych. (York University, 2002). Autism Spectrum Disorder Service.

Carolyn Roy, Ph.D., C.Psych. (University of Guelph, 2020). Pediatric Eating Disorders Program.

Rachel Jackson, Ph.D., C. Psych (Supervised Practice; University of Toronto, 2021). Pediatric Chronic Pain Program.

Rebecca Shine, Ph.D., C.Psych. (York University, 2021). Autism Program.

Katherine Stover, Ph.D., C.Psych. (Supervised Practice). (University of Toronto, 2022). Specialized Developmental and Behavioural Service.

Tajinder Uppal Dhariwal, Ph.D., C.Psych. (University of Toronto, 2017). Child and Youth Mental Health Outpatient Service.



Neuropsychology and Adult Clinical Psychology Training Staff

Cheryl Alyman, Ph.D., C.Psych. (University of Victoria, 1998). Psychologist in Pediatric Oncology Neuropsychology Services.

Kate Bartley, Psy.D, C. Psych, Supervised Practice (Florida Institute of Technology, 2022) Psychologist in Adult Acquired Brain Injury Program.

Esther Drenfeld, Ph.D., C.Psych. (University of Victoria, 2017). Psychologist in the Adult Acquired Brain Injury Program.

Jennifer Fogarty, Ph.D., C.Psych. (University of Waterloo, 2001). Psychologist in Adult Epilepsy Monitoring Unit.

Eleni Hapidou, Ph.D., C.Psych. (McMaster University, 1989). Psychologist in Michael G. DeGroot Pain Clinic.

Laura Katz, Ph.D., C.Psych. (Queen's University, 2016). Psychologist in Michael G. DeGroot Pain Clinic.

Stephanie Lavoie, Ph.D., C.Psych. (York University, 2016). Psychologist in Pediatric Neurology.

Tiffany O'Connor, Ph.D., C.Psych. (Simon Fraser University, 2021). Psychologist in Adult Acquired Brain Injury Program.

Emilie Sheppard, Ph.D., C.Psych. (University of Montreal, 2019). Psychologist in Adult Acquired Brain Injury Program.

Nevena Simic, Ph.D., C.Psych. (University of Toronto, 2012). Psychologist in Comprehensive Pediatric Epilepsy Program.

Justine Spencer, Ph.D., C.Psych. (McMaster University, 2015). Psychologist in Stroke Rehabilitation Program.

Joanna Sue, Ph.D., C.Psych. (Queen's University, 2014). Psychologist in Adult Acquired Brain Injury Program.

Gregory Tippin, Ph.D., C.Psych. (Lakehead University, 2016). Psychologist in Michael G. DeGroot Pain Clinic.

Ayse Unsal, Ph.D., C.Psych. (University of Waterloo, 1991). Psychologist with Adult Consultation Neuropsychology Service.

Diana Velikonja, Ph.D., C.Psych. (University of Waterloo, 1997). Psychologist with Adult Acquired Brain Injury Program.

Karen Zhang, Ph.D., C.Psych. (University of Western Ontario, 2017). Psychologist with Psychosocial Oncology Program.

Holland Bloorview Psychology Practicum Program

Assessment Practicum in Pediatric Neuropsychology

About Holland Bloorview

Holland Bloorview Kids Rehabilitation Hospital is Canada's largest children's rehabilitation hospital focused on improving the lives of children and youth with disabilities. We are a global leader in applied research, teaching and learning, and client and family centred care. Our vision is to create the most meaningful and healthy futures for all children, youth and families. Holland Bloorview is fully affiliated with the University of Toronto and home to the Bloorview Research Institute. Services at Holland Bloorview include inpatient hospital care for children, outpatient assessment clinics, therapy programs and community outreach programs. We have a school on the premises that provides educational programming during inpatient stays in the hospital, as well as a comprehensive program for young children with physical disabilities.



Holland Bloorview is centrally located in Toronto within a residential neighborhood that backs onto parks and recreational trails. It is accessible by public transit and includes many amenities to benefit clients, families, staff and the community, such as a family resource centre, a swimming pool, a fitness room for staff, a hotel for parents of clients, and a daycare for staff parents and the community.

We serve children and youth with many disabilities and diagnoses including acquired brain injury, concussion, Autism Spectrum Disorder (ASD), cerebral palsy, spina bifida, and genetic disorders. The focus within our clinical and research programs is on client and family centered care. Respect for diversity is also embedded within our core values and our facility is accessible for individuals with physical disabilities.

Specialization in Pediatric Neuropsychology

Holland Bloorview currently offers a child assessment practicum specializing in **pediatric neuropsychology** within the Brain Injury Rehabilitation Program. Psychology practicum students in this placement will gain experience in neuropsychological assessment with clients who have sustained moderate to severe acquired brain injuries. There will also be training opportunities through our Concussion Clinic, providing focused neuropsychological assessments and consultations for children and youth with persisting post-concussion symptoms. Students will participate on multi-disciplinary rehabilitation teams and they will learn about brain injury recovery over time and across different levels of severity.

In this placement, students will gain experience working on the outpatient Brain Injury Rehabilitation Team (BIRT), as well as our Concussion Team, with specific training in the administration, scoring and interpretation of neuropsychological tests. Additional training will be provided in conducting intake interviews and feedback sessions, formulating impressions and diagnoses, writing clinical reports and consulting with healthcare providers on multi-disciplinary teams. Some exposure to inpatient neuropsychological services will also be provided.

Training Model

Each practicum student will be assigned a primary clinical supervisor although case supervision will also be provided by other neuropsychologists on the team. Students will receive a minimum of 1-2 hours a week of individual supervision by a licensed clinical neuropsychologist. The practicum coordinator will also meet with students in regular meetings to track the progress of training goals during the practicum placement. To support opportunities for intern training in supervision (CPA Standard II.B.4), practicum students will receive additional supervision and mentorship by pre-doctoral psychology interns receiving metasupervision from supervising neuropsychologists for 1 hour each month.

Learning Opportunities

The goal of this practicum placement is to develop the breadth and depth of skills in pediatric neuropsychological assessment. Training will follow a mastery model in which students will be expected to assume increased clinical responsibility as the placement progresses. Practicum students will have additional learning opportunities by attending didactic seminars, Psychology Journal Club, clinical case rounds, and centre-wide forums presented by Holland Bloorview staff and external speakers, such as Grand Rounds and Bioethics presentations. The Teaching and Learning Institute also provides opportunities to enhance and develop learning initiatives for students throughout Holland Bloorview.

Applying to Our Program:

Practicum placements will run from September to the end of April. Applicants interested in applying to our assessment practicum in pediatric neuropsychology should email the following documents to Dr. Janine Hay at jhay@hollandbloorview.ca

- Current CV
- Letter of interest describing how your training experiences and goals would be a good fit for our program
- Two letters of reference (to be emailed separately)
- Name and contact information for Director of Clinical Training and references

To learn more about the neuropsychology practicum program at Holland Bloorview, please contact Dr. Janine Hay, Practicum Coordinator.

E-mail: jhay@hollandbloorview.ca

Phone: 416-425-6220 ext. 6342 or toll free: 1-800-363-2440

Please review our website at: www.hollandbloorview.ca





CLINICAL PSYCHOLOGY PRACTICUM
Updated Oct 2023

Accredited by:
Canadian Psychological Association
Accreditation Canada



Practicum Placements i

Clinical Psychology

INTRODUCTION

Who Are We?

ROCK is a nonprofit child and youth mental health agency that has served Halton for more than 40 years. We provide an inter-professional approach to the assessment and treatment of children, youth and families. ROCK is also the Lead Agency for children's mental health services in the Halton Region. Our mission is to work together to promote and achieve optimal mental health in kids and families. That is, our goal is to help families live healthier lives through early assessment and diagnosis, effective and innovative treatment, and prevention and early intervention for those having, or at risk of developing, challenges related to mental health. In addition, ROCK strives to promote positive child development through programs and services that strengthen the ability of families and the community to raise and nurture children. ROCK provides an interdisciplinary approach to the assessment and treatment of individuals ages 0 through 17 and their families who are experiencing difficulty. ROCK is also involved in multiple partnership programs that provide services for Transitional Aged Youth up to the age of 25 years. We are committed to providing services that are inclusive, client and family-centered, professional, high quality, and accessible.

ROCK is accredited with Exemplary Standing by Accreditation Canada. Our catchment area includes all of Halton Region; thus, ROCK provides services targeting a broad spectrum of presenting difficulties spanning the full range of child development. ROCK is the largest children's mental health service provider in Halton Region, serving over 8,000 clients and families yearly and offering over 30 different programs and services. In general, clients and their families who come or are referred to ROCK are experiencing developmental, emotional, relational, behavioural and/or social difficulties.

Where Are We?

Sites and Services

Located in the Greater Toronto Area, between Peel and Hamilton-Wentworth Regions, Halton Region is one of Canada's most dynamic areas, covering over 232,000 acres of land, including a 25-km frontage on Lake Ontario. The local communities of Burlington, Halton Hills, Milton, and Oakville comprise Halton Region.

ROCK has multiple sites in which services are delivered across the Halton Region. There are 3 full clinical office sites; one each in Burlington, Oakville, and Milton. ROCK currently has two Live

in Treatment facilities, one for youth aged 12 to 15 (Aberdeen House) and one for youth age 15-18 (Community Youth Program-CYP). ROCK also operates 4 prevention and early intervention sites that house Ontario Early Years Centre programs. ROCK additionally offers services and supports out of 2 Youth Centers located in Acton and Georgetown. The access point for services is by calling ROCK's centralized Access Line (289-266-0036).

Land Acknowledgement

ROCK is located on the Treaty Lands and Territory of the Mississauga's of the Credit. Acknowledging the lands that we gather on is part of the overall plan that we collectively embrace to meet obligations under the Truth and Reconciliation Commission's calls to action. Halton Region, as we know it today, is rich in history and modern traditions of many First Nations and the Metis. From the Anishinaabe to the Haudenosaunee and the Metis. As settlers, we are grateful for the opportunity to meet here and we thank all of the generations of people who have taken care of this land for thousands of years.

For further information about Halton Region and the cities of Burlington, Halton Hills, Milton and Oakville, please visit the following websites:

General Information:	www.halton.ca
Attractions:	www.halton.ca/The-Region/Explore-and-Enjoy-Halton
Transportation:	www.oakvilletransit.ca www.milton.ca/en/living-in-milton/transit.aspx www.burlington.ca/en/transit/transit.aspx www.gotransit.com

PSYCHOLOGY AT ROCK

In line with the agency's philosophy and mission, the psychology staff at ROCK are committed to client- and family-centred care. As scientist-practitioners on multidisciplinary teams, our psychology staff provide assessment, treatment, and consultation services to clients from infancy to 17 years. The ROCK psychology staff is composed of clinical psychologists, psychometrists, and residents (see page 6 & 7 for a description of psychology staff members).

The Clinical Psychology Residency program is accredited by the Canadian Psychological Association (CPA), currently from the 2017/2018 academic year through the 2023 academic year. In June of 2023 we participated in a re-accreditation Site Visit and expect to hear from the accreditation panel following their Fall 2023 meeting. Further information on Accreditation can be obtained from the CPA Accreditation Office at 141 Laurier Avenue West, Suite 702, Ottawa, Ontario K1P 5J3. ROCK is a member of APPIC and participates in the APPIC Match.

****Response to Covid19 Pandemic**

ROCK was able to quickly transition to providing virtual services and supports in response to the

Covid19 Pandemic. At this time, Psychology Services are being provided using a hybrid model, by utilizing a combination of both virtual and in-person sessions. Staff and students are able to move fluidly between working from home and in-office, depending on the needs and wishes of the client and the current environment.

OVERVIEW

As a community mental health agency, clinicians at ROCK see a broad range of presenting issues, including internalizing, externalizing, and comorbid conditions. Students will have the opportunity to gain experience with both assessment and treatment, across a broad range of presenting issues and modalities (i.e., family, group, individual), and utilizing various theoretical orientations. All services at ROCK are client-centered and generally seek to involve parents/caregivers, where possible.

Assessment

Assessments occur with children ages 2 through 18 who have been referred due to concerns about development (e.g., receptive/expressive language delays, cognitive delays, autism spectrum disorder), behaviour and social-emotional functioning/ mental health. Clients accepted for assessment are generally presenting with complex profiles, often involving a history of trauma and or attachment disruption, and must have a mental health query. Assessments involve individual, parent and collateral interviews, natural environment observation (e.g., school, daycare, home), administration, scoring, and interpretation of a variety of psychological measures (including standardized tests as well as projective measures), and more specialized diagnostic tools (e.g., Autism Diagnostic Observation Schedule, Second Edition). Comprehensive psychological reports, including treatment recommendations, are provided and shared with parents and other collaterals as appropriate.

Treatment

Opportunities exist for therapeutic intervention across multiple modalities, including individual, family, and group, and across various models (e.g., CBT, DBT, narrative, brief, attachment-focused, solution-focused, and strength-focused therapies). Services are offered within the context of a multidisciplinary team of psychologists, social workers, occupational therapists, crisis counsellors, and child and youth workers. Thus, students will gain exposure to the roles and methods of multiple disciplines and develop constructive working relationships across disciplines.

Early Years Treatment

Within the Early Years Team a number of different possibilities exist for therapeutic intervention across multiple modalities, including parent-child dyads, family, and group, and across various models (e.g., cognitive-behavioural, attachment-based psychotherapy, Circle of Security (COS)). For example, Parent-Child/Parent-Infant therapy aims to develop and enhance the parent-child relationship through videotaped, play-based interaction and feedback. Families accessing this service generally present with attachment disruptions (e.g., post-partum depression; periods of caregiver absence; parental mental/physical illness; adoption, etc.) reflected in problems with

sleeping, eating, separation, jealousy or anger beyond the child's developmental stage. Family Therapy aims to strengthen interactions and communication within the family as well as promoting an understanding of children's behaviour as communication. There are also a number of parenting groups for families coping with children exhibiting difficult behavior.

Brief Services Provision (Single Session, Brief Therapy & Psychology Consultation)

Residents completing the Brief Services Rotation will provide support to clients within ROCK's Walk-In Counselling Clinic, which allows families to access single session therapeutic intervention. Models for single session counselling include narrative, emotion-focused therapy, brief, solution-focused, and strength-focused therapies. Residents completing this rotation will also provide Brief Therapy (3-4 sessions) and Psychology Consultation (to staff from other disciplines within ROCK as well as to clients seeking psychology services).

Autism Spectrum Disorder Assessment

Although most straight forward autism queries are referred out for assessment through developmental pediatricians or the Ontario Autism Program, Psychology Services at ROCK see many clients where the diagnostic picture is more complex, and there is a need to tease apart potential ASD symptoms from mental health concerns, trauma and/or attachment related challenges. Methods that are used to assess for ASD may include detailed developmental history, Autism Diagnostic Inventory – Revised, and Autism Diagnostic Observation Schedule, Second Edition.

Fetal Alcohol Spectrum Disorder Assessment

The FASD Assessment and Diagnostic Team is a multi-disciplinary team that provides assessment to individuals age 2 to 24 that have known prenatal alcohol exposure. This multi-disciplinary team is a community collaboration of professionals including Medical Physicians, Psychology, Occupational Therapy, Speech and Language Pathologists, Social Work, Child and Youth Workers and Transitional Age Youth Workers.

Group Therapy

Many therapy groups run at ROCK, including the Children's Anxiety group, the Trauma Group, Emotion Focused Family Therapy Group (EFFT), Dialectical Behavior Therapy (DBT) Skills Group, Circle of Security (COS) and the ROCK OUT 2SLGBTQ+ Youth Group. Students would have opportunities to co-facilitate groups.

EDUCATIONAL OPPORTUNITIES/ DIDACTIC SEMINARS

Multidisciplinary Team Meetings

Students will attend Multidisciplinary Team meetings for the purpose of case discussions/reviews. Students present their own cases as well as provide input to team members from a psychological perspective.

Psychology Team Consultation Meetings

Students may attend weekly Psychology Team meetings for the purpose of case consultation. Students both present their own cases as well as contribute to the clinical discussion related to cases presented by other members of the Psychology Team.

Psychology Team Administrative Meetings

Students may attend monthly Psychology Team meetings to stay up to date on administrative information/communications, review team goals, and identify any new material, structural or educational supports that may be needed to support their role.

Psychology Lunch and Learns

Psychology Staff and students gather once every other month to participate in learning opportunities targeted specifically to the Psychology Team. This can include presentations by psychology staff, students, and residents as well as external presenters.

Clinical Rounds

Students may attend Clinical Rounds held on a monthly basis. This 90-minute seminar focuses on professional, clinical and ethical issues related to diagnosis, assessment and treatment of children, adolescents and families as well as on relevant applied research. Discussions/presentations will rotate being led by psychology staff, Residents/students, other internal staff (e.g., social workers, crisis workers, occupational therapists etc.), and external speakers (e.g., community professionals, university researchers).

SUPERVISION

Practicum students can expect a minimum of 2 hours of supervision per week by an experienced, doctoral-level, registered psychologist. Supervision may consist of direct observation of clinical service provision (e.g., in the room or behind one-way mirror), review of audio or video recordings and/or clinical case discussion. Although styles of supervision may vary, students can expect to learn from modeling, observation, directed readings, feedback, ethical training, and professional guidance. Supervision is individually tailored to meet the developmental learning needs and training goals of each student.

PSYCHOLOGY STAFF

Dr. Sarah Tuck (Neuropsychologist, FASD Team Clinician & Residency Director)

Ph.D., 2012, York University, Clinical Developmental Psychology

Activities include program planning and facilitation for residency program, provision of support to supervisors, supervision of students, psychological assessment and consultation, FASD Team member.

Dr. Terry Diamond (Clinical Psychologist, Psychology Lead)

Ph.D., 2005, York University, Clinical Developmental Psychology

Activities include providing support to the Residency Director, clinical leadership, supervision of students, psychological assessment, intervention and consultation.

Dr. Natalie Bailey (Clinical Psychologist, FASD Team Clinician)

Psy.D., 2014, Pace University, School & Clinical Psychology

Clinical activities include psychological assessment and consultation, individual, family and group therapy. Involved in Residency Program as a Primary and/or Rotation Supervisor.

Dr. Andrea Markovic (Clinical Psychologist)

Ph.D., 2016, State University of New York at Buffalo, Clinical Psychology

Clinical activities include psychological assessment and consultation, individual, family, and group therapy. Involved in Residency Program as a Primary and/or Rotation Supervisor.

Dr. Marina Dupasquier (Clinical Psychologist)

Ph.D., 2018, McGill University, School/Applied Child Psychology

Clinical activities include psychological assessment and consultation, individual, family, and group therapy. Involved in Residency Program as a Primary and/or Rotation Supervisor.

Dr. Ashley Brunsek (Clinical Psychologist)

Ph.D., 2021, OISE University of Toronto, School and Clinical Child Psychology

Clinical activities include psychological assessment and consultation, individual, family, and group therapy. Involved in Residency Program as a Primary and/or Rotation Supervisor.

Dr. Krysta McDonald, (Clinical Psychologist-Supervised Practice)

Ph.D., 2022, OISE University of Toronto, School and Clinical Child Psychology

Clinical activities include psychological assessment and consultation, individual, family, and group therapy. Supports residents with day to day activities and questions.

Mr. Brandon Campbell (Psychometrist)

B.A., B.Ed, 1999, University of the Witwatersrand (South Africa)

Clinical activities include: psychological assessment and consultation. Involved in supporting residents with day to day activities/questions.

Practicum Application Deadline:

We follow the deadlines determined by the GTA Practicum Sites group. This date is typically February 1st, with interviews occurring February-March. Notification date will comply with the GTA Practicum Match Day.

Application procedure (i.e. documents needed, number of references, etc.)

Applications are comprised of a cover letter stating training goals, CV, unofficial or official graduate transcripts, and 2 reference letters. Applications can be forwarded by email to psychpracticum@rockonline.ca

DIVERSITY AND NON-DISCRIMINATION POLICY

At ROCK, an equitable, diverse, and inclusive, workplace community is one where all clients, families, employees, agents of ROCK and partners, no matter of their race, age, gender, sexual orientation, ethnicity, culture, heritage, traditions, family of origin, religion, differing abilities, level of education, political view, skill set, experience and competency, feel valued, heard and respected.

We are committed to a non-discriminatory approach and provide equal opportunity for employment and advancement in all of our departments and programs. We are committed to modeling equity, diversity and inclusion in our community and in the mental health sector and to continuously strive to provide an environment that is diverse, inclusive and equitable.

To provide informed, authentic leadership for cultural diversity and inclusion, ROCK strives to:

- Lead with respect and dignity to see equity, diversity and inclusion as connected to our mission and integral to the well-being of our employees and agents of ROCK
- Dismantle inequities within our policies, systems, programs & services by exploring potential underlying, unquestioned assumptions that interfere with inclusiveness
- Advocate for and support strategic thinking about how systemic inequities impact our services and programs, and how best to address that in a way that is consistent with our mission
- Commit time and resources to expand our knowledge and understanding of equity, diversity and inclusion

ROCK is committed to employment equity, welcomes diversity, and encourages applications from all qualified individuals.

Applicants who have specific questions about accessibility and/or accommodations are encouraged to contact Dr. Terry Diamond Ph.D., C. Psych. (terryd@rockonline.ca) early in the application process so that their needs may be fully addressed.

PROGRAMS AND SERVICES AT ROCK

Psychology Interdisciplinary Consultation

Psychology staff provide consultation to staff from other disciplines for the purposes of interpreting assessment results, providing information about a specific diagnosis or presenting concern, guiding treatment direction, and/or determining whether direct psychological services would be appropriate/beneficial.

Psychology Client Consultation

Psychology Staff meet with clients directly for the purpose of interpreting assessment results, providing information about a specific diagnosis or presenting concern, providing intervention recommendations, and/or determining whether further psychological assessment services would be appropriate/beneficial.

Psychological Assessment

Psychological assessments are considered for children and adolescents when there is a concern about development, learning, cognitive and/or social-emotional functioning. The assessment process may consist of interviews with parents and other professionals, observations of the child, individual testing, and feedback to parent(s), school/daycare, and other professionals.

FASD Consultation and Support

FASD Consultants provide consultation, coaching, education, training and service coordination to families, caregivers & professionals who are supporting individuals (up to age 21) with suspected or diagnosed FASD.

FASD Multi-Disciplinary Assessment

FASD assessment services are also available for children and youth age 2 to 25. The Assessment Team provides multi-disciplinary assessments, recommendations, and assistance with referrals to appropriate community programs. Assessment services are offered in partnership with the Halton FASD Collaborative.

Single Session Therapy

Single Session Therapy Service provides quick access to therapeutic intervention as it enables family members to see a therapist more immediately. The intake process for further services may be initiated following the single session if warranted.

Brief Therapy

Therapists and families/individuals work together for 3-4 sessions to understand problems, explore their knowledge and abilities, and together develop insights, leading to an overall improvement in their relationships, their sense of themselves, and their ability to manage problems and difficulties now and in the future. Brief therapy may also be used to further assess the need for more intensive services and supports.

Family Therapy

Family therapy helps families, or individuals within a family, understand and improve the way family members interact/communicate with each other. Family therapy examines the family as a

system and emphasizes family relationships as an important factor in the psychological health of each family member and the family system as a whole. Problems are seen as arising from systemic interactions within the family rather than placed on a single individual.

Individual Therapy

In individual therapy, the therapist works with the child or youth to explore problems and solutions. Caregivers may be involved in the treatment process to varying degrees depending on the age and developmental stage of the child/youth, the presenting concerns, and/or the youth's desire to include the caregiver. Various models are utilized depending on the presenting problem and best fit for the client (e.g., cognitive-behavioural, narrative, psychodynamic, brief, solution-focused, and strength-focused therapies).

Trauma Treatment Program

This service is for children who have experienced a traumatic event such as abuse, separation from their caregiver, illness, abandonment, family break-up, inconsistent access visits, violence, loss, the death of a friend or family member, or any event that has had an impact on the child. Experiencing trauma can affect the child's emotions, behaviour, and consequently their relationships within the family.

Trauma Assessment

Assessment specifically focused on the impact of trauma on the client and family system. This may include use of the Neurosequential Model of Therapeutics (NMT) Metric (Bruce Perry) to inform intervention.

Crisis Response Program

This program provides immediate outreach for children and youth, their caregivers, and community members. The Crisis Response telephone number connects individuals to our 24-hour answering service, which then connects individuals in crisis with a crisis counsellor.

Intensive Child and Family Service

ROCK's Intensive Counselling Service (ICS) program provides a range of intervention and support services to high-need children/ youth (aged 6-18) and their families. Families will typically receive two to four in-home sessions per week with a member of the ICS team, for three to six months. Families are expected to participate in setting goals, strategies and treatment for themselves and their child. However, the ICS team will work with the family to actively problem-solve around barriers to treatment or engagement. Primary program therapeutic interventions include but not limited to: Emotion Focused Family Therapy (EFFT) and Dialectical Behavior Therapy (DBT).

Live-in Treatment Services

Aberdeen is a Live in Treatment facility for youth between 12 and 15 years of age. This intensive family-based treatment program is for children/youth struggling with significant mental health challenges. The *Community Youth Program* (CYP) provides housing and support for adolescents age 15-18 who are unable to live with a family and unprepared for independent living. Focus is

on stabilization, individualized treatment and transition to community and/or adult mental health services.

Early Years Therapy

This therapeutic service aims to develop and enhance the parent-child relationship, as primary caregivers play the most significant role in supporting development. Within this relationship, a child learns to feel secure, use language, regulate emotions and interact socially. Common indicators for referral to this program include problems with sleeping, eating, separation, attachment, jealousy, or anger beyond the child's developmental stage. Videotaped play sessions help parents read children's cues and respond sensitively, understand the child's behaviour as communication, and strengthen the relationship.

Autism Services

ROCK's Autism and Behavioural Services teams provide the following essential services for families:

- Foundational Family Services, including workshops and drop-ins, to all families registered with the Ontario Autism Program (OAP);
- Urgent Response Services to those youth who are experiencing a new or worsening behaviour;
- Caregiver Mediated Early Years, Project ImPACT, for those families who have a young child registered with OAP; and
- Entry to School for those children registered with the OAP and transitioning into school for the first time.

CLINICAL GROUPS

NOTE: Please note that the subset of groups that are offered may vary considerably in any given year.

Circle of Security (COS) Therapy Group

Circle of Security is a relationship-based parenting program that empowers caregivers by helping them understand the specific messages their children are communicating and provides a road map to respond in ways that will enhance the security of the attachment relationship with their child. Through the use of video and reflective dialogue parents are introduced to the Circle of Security model, allowing them to explore their child's behaviors and the parent-child relationship in a new way that opens up avenues for reflection and change.

Intro to Cognitive Behavior Therapy (CBT) Group

This five-session group provides an introduction to Cognitive Behavioural Therapy (CBT) skills for youth between the ages of 12-16. Youth learn basic CBT skills.

ADHD Caregiver Group: Parenting Your Child with ADHD

This is a 4-part series designed to help caregivers understand ADHD and the impact ADHD has on children under 12 in their home, school and community environments. Caregivers learn about the different types of ADHD, what it means for their child and their family. Caregivers also learn how to understand ADHD symptoms vs. behaviour problems. The focus is on helping caregivers to understand this complex disorder and how they can support their child.

Children's Anxiety Groups

Children and adolescents learn to identify, measure, and cope with anxiety and learn social skills, while parents learn about anxiety and how to parent anxious children. Separate groups are offered depending on the age of the children (e.g., group for school age, teens).

ROCK Teen and Parent Anxiety Group

This group is aimed at helping teens to learning skills to manage anxious feelings, to reduce worry, to feel more confident, and to become able to do things they find hard to do. Teens will learn how to identify thoughts, feelings, and behaviours; learn how to think realistically; learn to face challenging situations; and learn skills for problem solving and building assertiveness. A caregiver attends each group to support their teen as well as to learn strategies to apply to their own anxieties.

DBT Skills Group

DBT is an intervention for youth with multiple problems, particularly those who present with suicidality or self-harm. The goal of DBT is to help youth identify thoughts, beliefs, and assumptions that make life harder and help them to learn different ways of thinking that will make life more bearable. DBT uses a cognitive-behavioural approach that emphasizes psychosocial aspects of treatment. DBT has two main components: Individual weekly therapy sessions that focus on problem-solving behavior and reinforces adaptive behaviors and skills learned in group. In weekly 2-hour skills group sessions (22 weeks), five different modules are taught to youth and parents/caregivers to target specific behaviors and teach healthy skill sets.

Trauma Group

Psychoeducation group designed to provide caregivers with an increased understanding of how the experience of trauma(s) can impact children and their families; parenting tools and strategies are discussed.

Brave Pathfinders

This group is for children who have experienced a loss that is ambiguous. This group is for children who have experienced a significant decrease in caregiver support due to any of the following: deployment, returning to a home country, injury or prolonged illness causing decrease capacity to care, divorce, separation, estrangement, caregiver incarceration or absence due to mental health or addictions issues in caregiver.

Advanced Caregiving

A psycho-educational, prevention and early intervention clinical group developed to support caregivers in learning advanced skills for supporting their loved one with their mental health. Introduce mental health recovery principles, Emotion Coaching, Validation and Behaviour Coaching skills.

Emotion-Focused Family Therapy (EFFT) Caregiver Group

The goal of EFFT is to support caregivers to increase their role in promoting the health and well-being of their child or teenager. Caregivers learn about validation, Emotion Coaching, Behaviour Coaching and Caregiver Blocks.

Watch, Wait, and Wonder Caregiver Group

The focus of this group is on strengthening the attachment relationship between caregiver and child, in order to improve the child's self-regulating abilities and sense of efficacy and enhance the caregiver's sensitivity and attunement.

PREVENTION SERVICES and PARTNERSHIP PROGRAMS

Here and Queer

Facilitators in this program aim to create and hold an affirming, supporting space for 2SLGBTQIA+ youth to practice learning about themselves, their boundaries, making friends, navigating conflicts and building resilience with an emphasis on mindfulness, healthy coping mechanisms and emotional regulation.

Families in TRANSition (FIT)

Broadly speaking, the primary goal of this intervention is to give families the tools they need to help trans, non-binary, and gender questioning youth feel fully supported in their homes.

Embrace & Empower

The Embrace & Empower program, in partnership with Spectrum, focuses on exploring the historical and social influences that can impact queer and/or trans youth, their body image, body perception, identity and relationship with food.

Roots

Roots Community Services and ROCK are collaborating to provide therapeutic support, consultation and treatment to Black, African and Caribbean children, youth and their families. This service will provide a safe space, a culturally-relevant intervention to young people who are facing systemic barriers impacting their mental health, education or family relationships.

AFFIRM

Project AFFIRM seeks to integrate identity affirmation with cognitive-behavioural interventions. This combined intervention is presented in the form of eight sessions targeted at LBTTQQ2SA* youth and adults and geared towards reducing risky sexual behaviour and depression.

Our Community Cares (OCC)

This program works within the community to empower people and to help build skills in adults and children who are at risk for mental health problems.

Caroline Families First

This program is a collaboration between the Caroline Family Health Team in Burlington, local pediatricians, Parents for Children's Mental Health and ROCK. Developed as a new model of care in response to our fragmented mental health system, this program is designed to improve how services work together for children and youth with significant mental health challenges and their families.

EarlyON Child and Family Centre

ROCK EarlyON provides a welcoming and inclusive space for all children ages birth to six years and their families to participate in programs on-site, virtually, and outdoors. These free high-quality programs encourage children's social, emotional and developmental milestones and opportunities for growth. Parenting services also provide parenting supports that will guide a fulsome understanding of infant and child's developmental and mental health needs.

Halton Families for Families

The goal of Halton Families for Families is to connect, support and engage with Halton families who are impacted by a child/youth's mental health struggles. The initiative is uniquely led by families, which ensures their voices are valued, heard and woven into the fabric of all activities and events, to improve the quality of life for families. We offer a wide range of workshops, wellness sessions and socials for caregivers and families impacted by their child's mental health.

Halton Coordinated Service Planning (CSP)

CSP is intended for families of children and youth with multiple and/or complex needs who may be experiencing challenges in areas such as navigating the system, coordinating multiple services, coping with or adapting to their child's needs, concerned about the health and well-being of other family members, and/or have limited social/community supports.

Halton FASD Collaborative

A collaboration of organizations in Halton that provides FASD Assessment and Diagnostic Services, as well as FASD Consultation and Education for caregivers and professionals. Support programs such as Camp Unity and Reach For It are also provided.

Danielle's Place

Danielle's Place offers a range of groups for female-identifying and non-binary youth ages 8-16. These groups support individuals who have been identified as being at risk of an eating disorder diagnosis and may be struggling with low self-esteem, body image concerns, dieting behaviors, over-exercise, negative self-talk, etc.

CENTRE FOR STUDENT DEVELOPMENT AND COUNSELLING



ABOUT TMU

Set in the heart of downtown Toronto, Toronto Metropolitan University is home to 48,000 full-time undergraduate students and 2,500 graduate students, with a culturally diverse student population from 146 countries. The Centre for Student Development and Counselling provides direct service to over 2,200 students annually through individual therapy, group therapy, and psycho-educational workshops. Practicing from an anti-oppressive framework and a culturally sensitive/intersectional identity lens is one of our guiding principles.

Many of our staff are former trainees and serve as a valuable resource for our students as mentors for their professional development path.

ABOUT OUR PLACEMENT

- Microskills curriculum with weekly workshops to learn theory and practice in 5 evidence-based treatment modalities, with an emphasis on practice.
- Multidisciplinary team of psychologists, social workers, psychotherapists, psychiatrists, physicians, registered nurse and dietician
- Orientation Week: Carefully planned onboarding process and seminar training at the start of placement.
- Community with other interns from various disciplines for connection and peer support
- Caseload Flexibility that matches your interests and training goals with respect to presenting issues and level of complexity

TRAINING STREAMS

EMOTION FOCUSED THERAPY

Emotion-Focused Therapy (EFT) focuses on helping individuals access, explore, understand, regulate, and transform painful and avoided emotions underlying symptoms as a means to foster healing.

PSYCHODYNAMIC EXPERIENTIAL

Accelerated Experiential Dynamic Psychotherapy (AEDP) is an evidence-based attachment-oriented psychotherapeutic approach that places a strong emphasis on the transformation of emotional experiences through the use of the therapeutic relationship as a corrective experience for attachment trauma.

COGNITIVE BEHAVIOURAL THERAPIES (CBT AND ACT)

Cognitive Behavioral Therapy (CBT) seeks to modify negative thought patterns and behavioral responses to improve emotional well-being. Acceptance and Commitment Therapy (ACT) emphasizes embracing thoughts, emotions, and value-aligned actions as a means to improve the individual's self-acceptance and cognitive flexibility.

HOW TO APPLY

Email csdcpracticum@torontomu.ca after December 1st to automatically receive the link for the application Google form/. Through this form you can easily upload your materials and select a preferred training stream.



Student Training Opportunities in Psychology 2024-2025

University Health Network (UHN)

Princess Margaret Cancer Center

Toronto General Hospital

Toronto Western Hospital

Toronto Rehab

Student Practicum Training Opportunities in Psychology 2024-2025 University Health Network (UHN)

**(Princess Margaret Cancer Center, Toronto General Hospital, Toronto Western Hospital &
Toronto Rehab)**

Clinical and research opportunities (unfunded) are available to Psychology graduate students and fellows interested in gaining experience with diverse patient populations on an individual, couple, or group basis. Please note that UHN does not have CPA or APA accreditation for Psychology practicum training at this time. A list of potential placement settings is provided below. Please contact the respective psychologist directly to learn more about their placement options, or for information about available practicum spots or the semester during which practica are available, if not indicated. Please note that all practicum supervisors are members of the College of Psychologists of Ontario (CPO) and as such, adhere to practice standards set out by the CPO.

***INFORMATION IS SUBJECT TO CHANGE SHOULD RESTRICTIONS ARISE
RELATED TO COVID-19.**

PRINCESS MARGARET CANCER CENTER - DEPARTMENT OF SUPPORTIVE CARE:

CLINICAL HEALTH PSYCHOLOGY:

Population: adult survivors of childhood cancer;

Clinical Assessments: psychosocial functioning; distress screening

Clinical Intervention: individual psychotherapy

Research: impact of late effects of cancer and cancer treatment on psychosocial development; transition from pediatric to adult health care; quality of life

Contact: Norma D'agostino, Ph.D. C.Psych. Norma.D'agostino@uhn.ca

Population: urologic cancers: prostate, testicular, kidney, bladder cancer patients

Clinical Assessments: health psychological assessment

Clinical Intervention: individual psychotherapy; couple therapy; sex therapy

Research: health-related quality of life and survivorship in cancer patients

Contact: Andrew Matthew, Ph.D. C.Psych. Andrew.Matthew@uhn.ca

Dr. Matthew and Dr. D'agostino co-supervise all students. Number of practicum spots for Fall-Winter 2024-25 = 2

YOUNG ADULTS WITH CANCER:

Population: Younger adults with cancer (<45 years), outpatients

Assessment: Clinical intake assessment conducted with new patients. Note that this practicum is primarily focused on intervention.

Intervention: cognitive-behavioural, acceptance and commitment, and supportive approaches, primarily individual with some group work (i.e., co-leading/leading patient support groups)

Research: Psychosocial aspects of living with cancer as a young adult; program development (fear of cancer recurrence, [in]fertility distress). Students may have opportunities to get involved in research, but this is not guaranteed and would occur outside of clinical placement hours.

Contact: Aliza Panjwani, Ph.D. CPsych. Aliza.panjwani@uhn.ca.

Number of spots for 2024-2025 practicum: 1; taking Ph.D., level students only

NEUROPSYCHOLOGY

Population: brain tumor patients; adult survivors of childhood cancer; young adult cancer survivors.

Clinical Assessments: neuropsychological assessment

Clinical Intervention: education; recommendations/strategies

Research: neurocognitive outcomes in cancer survivors; late effects of cancer treatment on neurocognitive function; circadian rhythms and cancer

Contact: Kim Edelstein, Ph.D. C.Psych. kim.edelstein@uhn.ca

Number of practicum spots for Fall-Winter 2024-25 = 1; taking Ph.D. level students only

Population: adult cancer survivors

Research: neurocognitive outcomes of cancer survivors, psychoeducational and cognitive rehabilitation

Contact: Lori Bernstein, Ph.D. C.Psych. lori.bernstein@uhn.ca

Number of practicum spots for Fall-Winter 2024-25 = 0; taking on research students only

TORONTO GENERAL HOSPITAL:

CARDIOLOGY

Population: adult patients with cardiovascular conditions

Clinical Assessments: psychophysiologic tests (e.g. vagal-heart rate modulation and baroreflex sensitivity) during reactivity/recovery from mild-to-moderate psychological and physical stressors; cognitive-emotional adjustment to cardiovascular disease; quality of life; and lifestyle behaviors

Clinical Intervention: individual, group and e-health in the context of the health psychology/behavioral cardiology clinical service. Treatment modalities include cognitive-behavioral therapy, motivational interviewing, and biofeedback.

Research: (i) Efficacy of Behavioral Neurocardiac Training with vagal-heart rate biofeedback for patients with hypertension or chronic heart failure; (ii) cardiovascular reactivity/recovery following physical or psychological tasks; (iii) e-counseling to augment risk reduction for cardiovascular disease.

Contact: Robert Nolan, Ph.D. C.Psych. rnolan@uhnres.utoronto.ca

Number of practicum spots for Fall-Winter 2024-25 = 0; not taking student this coming year

ANESTHESIA & PAIN MANAGEMENT

TRANSITIONAL PAIN SERVICE AND EHLERS-DANLOS SYNDROME CLINIC

This rotation offers a unique opportunity to train in **two** specialized health-psychology clinics: The Transitional Pain Service and the Ehlers-Danlos Syndrome Clinic. Time spent in each clinic will be determined in collaboration with the student, based on availability, clinic needs, and students' training goals.

Transitional Pain Service :

Population: Outpatient adults suffering from acute and chronic pain at Toronto General Hospital's Transitional Pain Service, specializing in post-surgical pain.

Clinical Assessments: A brief assessment is completed prior to psychological intervention.

Clinical Intervention: Acceptance and commitment therapy, mindfulness and clinical hypnosis for pain management, psychoeducation. Intervention is delivered individually.

Research: Impact of novel pre- and post-surgical behavioural interventions on pain, distress, disability, and use of opioid medication

Ehlers-Danlos Syndrome Clinic

Population: Toronto General Hospital has one of the few clinics in the world specializing in treating people with Ehlers-Danlos Syndrome (EDS), a rare connective tissue disorder. EDS leads to joint dislocations, chronic pain, fatigue, gastrointestinal symptoms, and more. People living with EDS report a high prevalence of depression, anxiety, and emotion dysregulation. *Clinical Assessments:* Each patient seen by psychology undergoes an intake assessment, with an emphasis on biopsychosocial conceptualization.

Clinical intervention: Acceptance and commitment therapy; dialectical behaviour therapy skills group. Opportunities to engage in gut-focused clinical hypnosis for GI distress. Treatment is primarily group-based but there are also opportunities for individual intervention.

Research: Psychosocial features of EDS/HSD; Health-related quality of life in EDS/HSD; Impact of behavioural interventions on quality of life and symptom management

Contact: Max Slepian, Ph.D., C.Psych. maxwell.slepian@uhn.ca

Alternate Contact: Molly McCarthy, Ph.D., C.Psych. molly.mccarthy@uhn.ca

Number of practicum spots for Fall-Winter 2024-25 = 2

Number of practicum spots for Summer 2024 = 1

EATING DISORDER PROGRAM, CENTRE FOR MENTAL HEALTH

Population: Adults with Anorexia Nervosa, Bulimia Nervosa, Other Specified Feeding and Eating Disorder (OSFED), and Avoidant/Restrictive Food Intake Disorder (ARFID), as well as comorbidities including Anxiety Disorders, Mood Disorders, Substance Use Disorders, Posttraumatic Stress Disorder, and Personality Disorders. This is an intervention and assessment practicum.

Clinical Intervention: Our program currently provides a full range of treatment intensities for adults with eating disorders. Our program provides cognitive behaviour therapy (CBT)-based treatments, and includes inpatient, intensive outpatient, and individual therapy services. Our services focus on evidence-based treatment and trauma-informed care. The practicum provides opportunities for training in individual and group CBT, and there may be opportunities for group DBT.

Clinical Assessments: The practicum provides opportunities for training in structured clinical interviewing and diagnostic assessment.

Research: Our program conducts research on the etiology and maintenance of eating disorders, treatment efficacy and effectiveness, prediction of relapse, relapse prevention. Research opportunities may be available as part of the practicum, but are not guaranteed.

Psychologists:

Rachel Liebman, Ph.D., C.Psych. rachel.liebman@uhn.ca (currently on leave)

Danielle MacDonald, Ph.D., C.Psych. danielle.macdonald@uhn.ca

Michelle Mahan, Ph.D., C.Psych. michelle.mahan@uhn.ca

Shauna Solomon-Krakus, Ph.D., C.Psych. (supervised practice)

shauna.solomonkrakus@uhn.ca

Sarah Royal, Ph.D., C.Psych. sarah.royal@uhn.ca

Kathryn Trottier, Ph.D., C.Psych. kathryn.trottier@uhn.ca

Contact: danielle.macdonald@uhn.ca

Number of practicum spots for Summer 2024 = 1 (preference given for PhD-level students); for Fall-Winter 2024-25 = 1 (note: indicated number of spots are tentative and to be confirmed)

(please note that the practicum will be conducted on-site)

TORONTO WESTERN HOSPITAL:

BARIATRIC SURGERY PROGRAM

The practicum includes the following opportunities:

Assessments (required): semi-structured psychodiagnostic and psychosocial assessments are the focus of this placement.

Interdisciplinary collaboration (required): assessment and intervention involve collaborating with an interdisciplinary team and includes weekly team rounds.

Intervention (optional): (1) Groups: students can observe a variety of patient groups including an educational webinar, Dialectical Behaviour Therapy (DBT) skills group, mindfulness group and a body image group. (2) Individual psychotherapy: students can provide individual treatment to 1-3 patients each week, with a focus on problematic eating behaviour.

Research (optional): The Bariatric Program conducts research on psychological predictors of post-surgery outcomes, the effectiveness of psychological interventions, and other topics related to bariatric care. Students may have opportunities to be involved in research, but this is not guaranteed and would be undertaken outside of the clinical placement.

Psychologists:

Sarah Royal, Ph.D., C. Psych., sarah.royal@uhn.ca

Susan Wnuk, Ph.D. C. Psych., susan.wnuk@uhn.ca

Number of practicum spots: Summer 2024 = 2; Fall/Winter 2024-25 = 2

(Please note that currently this practicum can be completed partially or completely remotely)

NEUROPSYCHOLOGY CLINIC, KREMBIL BRAIN INSTITUTE

Population: neurology/neurosurgery outpatients, primarily in epilepsy and Parkinson's disease but includes other neurological disorders affecting cognition

Clinical Assessments: neuropsychological assessments

Clinical Interventions: recommendations; assessment of suitability for surgery

Research: impact of neurological disorders and neurosurgical/neurostimulation treatment on memory, language and executive functions; functional and structural neuroimaging in neurocognitive disorders; multiculturalism and neuropsychological assessment.

<https://www.twhneuropsych.com/joinourteam>

Psychologists:

Melanie Cohn, Ph.D. C.Psych. melanie.cohn@uhn.ca

David Gold, Ph.D. C.Psych. david.gold@uhn.ca

Marta Statucka, Ph.D., C.Psych. marta.statucka@uhn.ca

Email inquiries should be addressed to marta.statucka@uhn.ca

Number of practicum spots for Summer 2024 = 0; Number of practicum spots for Fall-Winter 2024-25 = 2-3; taking Ph.D. level students only

TORONTO REHAB:

The Telerehab Centre for Acquired Brain Injury and Spinal Cord Rehab sites are part of the Brain and Spinal Cord program at Toronto Rehab. It is a joint placement with students completing 1-2 days per week at each rotation. Applications are reviewed by all psychologists from University and Lyndhurst Sites. This placement occurs on-site. Ph.D. level students only

Email inquiries about this placement can be directed to: Dr. Martha McKay for Spinal Cord and Brenda Colella for TeleRehab Centre

Number of practicum spots for Summer 2024 = 1; Number of practicum spots for Fall-Winter 2024-25 = 1-2

TELEREHAB CENTRE FOR ACQUIRED BRAIN INJURY – UNIVERSITY SITE

Population: adults with wide range of acquired brain injuries, and various neurological disorders – outpatients only (at least 6 months post-injury/chronic stage)

Clinical Assessments: clinical psychological and neuropsychological assessments (in-person)

Clinical Interventions: A number of online, group psychoeducational programs and interventions for cognition and mental health are offered including Goal Management Training, cognitive behavioural therapy based interventions, mindfulness skills training, relaxation skills training and concussion education and symptom management. In addition, the Telerehab centre has a number of research programs focused on treatment outcomes for those in chronic phases of brain injury or other neurological disorders.

Psychologists:

Brenda Colella, M.A., C.Psych.Assoc. brenda.colella@uhn.ca

Liesel-Ann Meusel, Ph.D., C.Psych liesel-ann.meusel@uhh.ca

Robin Green, Ph.D., C.Psych robin.green@uhn.ca

Lesley Ruttan, Ph.D., C.Psych. lesley.ruttan@uhn.ca

SPINAL CORD REHAB, LYNDHURST SITE

Population: adults with spinal cord injury with wide range of concomitant injuries, neurological disorders, various diagnoses. Individuals may present with adjustment, mood, anxiety, trauma, substance use disorders, cognitive, as well as other mental health concerns. Our program focuses on inpatient services, but may include outpatient services as well.

Clinical Assessments: clinical psychological and neuropsychological assessments,

Clinical Interventions: cognitive behavioural intervention; emotion focused therapy; supportive counseling, cognitive remediation, individual and group interventions. Clinical interventions are focused on providing support for adjustment to life altering injury and addressing various symptom presentations.

Psychologists:

Martha McKay, Ph.D., C.Psych. martha.mckay@uhn.ca

Christie Yao, Ph.D., C.Psych. christie.yao2@uhn.ca

APPLICATION PROCEDURE:

To apply for a practicum position in any program, students must electronically submit:

- (1) [UHN Psychology Practicum Checklist](#)
- (2) cover letter (only 1 cover letter is required even if applying to multiple clinics)
- (3) curriculum vitae
- (4) copies of unofficial undergraduate and graduate transcripts
- (5) a listing of Psychological and/or Neuropsychological tests that the student has administered, scored, interpreted and written reports for, and
- (6) two letters of recommendation

Please submit items (1) – (4) as a single PDF to marta.statucka@uhn.ca with “**Psychology Practicum Application**” as the subject header.

In the body of the email, list the clinic that you are applying to (maximum 3).

Letters of recommendations should be emailed to the same address with **your name** in the subject header followed by “**Psychology Reference Letter.**” Please follow these instructions to ensure timely processing of your application.

The deadline for receipt of all application materials is early **February 1, 2024**.
Notification date for applicants is **March 20, 2024**.

If you have questions about the application process or are unable to submit information electronically, please contact marta.statucka@uhn.ca.

***NOTE:**

Health clearance needs to be completed prior to all placements. Supervisor will send information prior to placement about the online student registration system which details the required information. Please note that health clearance is the responsibility of the school/student and won't be done at UHN.

NOTE: UHN Psychology abides by, and expects all applicants and Directors of Clinical Training (DCTs) to abide by, the GTA Clinical Practicum Group rules as follows:

Practicum Notification Day Procedure (Updated Nov 2016)

Responsibility of Site Supervisors

1. Send rejection notifications by electronic mail to all candidates whom you will definitively not be making an offer to at 8:45 am. A copy of this notice must be sent to the applicant's Director of Clinical Training (DCT).
2. Send offer by electronic mail to your first choice(s) candidate(s) at 9:00 a.m. A copy of the offer must be sent to the applicant's Director of Clinical Training (DCT).
3. Do NOT leave your computer.
4. As soon as you hear back from your first choice: (a) if the candidate accepts, then notify all other candidates that the position has been filled; (b) if the candidate declines, then notify your second choice of the offer; (c) if the second choice accepts, then notify the remaining candidates that the position has been filled; (d) if the second-choice candidate declines, then notify your third choice of the offer; (e) and so on and so forth.
5. You are welcome to follow-up with applicants via telephone but all offers and acceptances must be done electronically.

Responsibility of Applicants

1. Turn your computer on at 8:40 a.m. (rejection notifications will go out at 8:45 a.m.).
2. Do NOT leave your computer.
3. You have the right to wait to hear from your 1st choice before making any other decisions.
4. Immediately acknowledge receipt of your offers.
5. Once you hear from your 1st choice, accept the offer immediately.
6. If you do not get your 1st choice, you have the right to wait to hear from your 2nd choice before making any other decisions, etc.
7. Ensure your DCT is kept in the loop by making sure they are cc'd on all your communications.

Responsibility of Directors of Clinical Training

1. Make sure the applicants understand the procedure.
2. Starting at 8:45 a.m., stay in contact with your students by electronic mail to make sure that they are understanding the process as it unfolds live.
3. As soon as students have confirmed acceptance of offers, be sure to update the GTA Practicum Notification Day spreadsheet, so that other DCT's are aware of what spots have been filled.



Get your life back.

Practicum Placements in Psychology and Neuropsychology

West Park Healthcare Centre offers practicum placements for students currently enrolled in accredited graduate psychology training programs. Students may choose from two placements, either the Neuropsychological or the Psychological stream or both.

About West Park

West Park Healthcare Centre helps patients get their lives back by providing specialized rehabilitative and complex care after a life-altering illness or injury such as lung disease, amputation, stroke, traumatic brain injury, traumatic musculoskeletal injuries, and neurodegenerative diseases.

West Park is building a new hospital and transforming its 27-acre site into an integrated campus of care, enabling the hospital to evolve its rehabilitative programs to meet Ontario's future healthcare needs.

West Park is located at 82 Buttonwood Avenue in Toronto near Jane Street and Weston Road. It is close to Hwy 401 and accessible by public transit.

Practicum Placement Opportunities

West Park Psychology Services offers practicum placement for students currently enrolled in accredited graduate psychology training programs. Placements are available during the academic year (September 1st to April 30th). Exact start and end dates are flexible, depending on the needs of the student and the availability of the supervisor. We offer both full-time and part-time placements.

Neuropsychology Services

Students will be introduced to a neuropsychological assessment for the purpose of developing a differential diagnosis and to provide functional information to assist in patients' treatment and rehabilitation.

Students will learn to: a) conduct chart reviews and interview patients and family members to obtain relevant background information; b) administer a battery of standardized tests; c) score the tests; d) summarize and report the results; e) prepare clinical reports; and f) participate in feedback sessions with patients and their family members.

There will also be an opportunity to learn and provide cognitive remediation with selected patients.

Students will have the opportunity to work with both inpatients and outpatients and interact with the patients' multidisciplinary teams.

Psychology Services

Students will learn and administer targeted assessments and provide therapy to patients and patient's families to assist them in managing the impact of their recently acquired condition or chronic disease on their psychological functioning. The focus of the work is on acceptance and adjustment to their current health status.

Students will have the opportunity to work with inpatients, outpatients, and with patients' multidisciplinary team.

Practicum Application Process

Students interested in applying for a practicum placement should send the following materials by email to Dr. Sharon Jankey, Clinical Psychologist, at sjankey@westpark.org:

- A completed practicum application form (available from Dr. Jankey at sharon.jankey@westpark.org)
- A letter of interest describing their training experiences and goals
- A current CV
- Most recent graduate transcript (unofficial copies are acceptable)
- Two letters of reference, to be sent directly from referees to Dr. Jankey

Completed applications will be forwarded to practicum supervisors who will contact selected applicants for an interview. Please note that not all placements may be available at a given time. The type and number of placements is dependent on the availability of supervisors.

Contact us

Phone: (416) 243-3600 ext 4419
Email: sharon.jankey@westpark.org
Website: <https://www.westpark.org/>



The Young Minds Psychology Team brings years of experience helping children and teens facing a range of difficulties.

- Anxiety/phobias
- Attention-deficit/hyperactivity disorder
- Autism spectrum disorder
- Behaviour problems
- Depression/low mood
- Eating disorders
- Emerging personality disorders
- Emotion regulation difficulties
- Family conflict
- Obsessive-compulsive disorder
- School avoidance
- Social/relationship difficulties
- Trauma



Our offices are open for in-person psychology services. No referral necessary.



We understand that at times it is hard to come to our offices or you may live outside of the GTA. That's why we keep our virtual doors open and offer online sessions to fit with your schedule.

Contact us to learn more about how our team can help today.

Supporting Children, Teens, and Families

5915 Leslie Street, Suite 201
North York, M2H 1J8
(near the intersection of Leslie and Finch)
Phone: 647 557-1829



contact@youngmindspychology.ca
www.youngmindspychology.ca



young minds

PSYCHOLOGY

Psychology with Family in Mind



Young Minds Psychology offers a safe, welcoming, and comfortable environment to meet all of your child's mental health needs.

Our Team of experienced registered psychologists and clinicians work closely together to support children, teens, parents, and families struggling with mental health difficulties.

Drs. Amanda Dyson and Kristin Thornback opened Young Minds Psychology in North York to help children and families.

They believe that parent involvement is central to children's mental health.



Dr. Amanda Dyson



Dr. Kristin Thornback

We specialize in helping:

CHILDREN, TEENS, AND TRANSITIONAL AGED YOUTH

We work closely with your child and family to meet your specific needs. We believe in collaboration with our families and develop an assessment and therapy plan together, using evidence-based approaches.

Sometimes a child or teen simply needs someone to talk things through with, or they may be struggling with more complex mental health issues. We help your child understand themselves more clearly and make the changes they want.

PARENTS

We provide parenting and co-parenting support to help parents understand each other and their child's mental health needs.

Central to our work is our belief that a healthy parent-child relationship is the key to positive mental health. We explore how parents can respond to and support their child in ways to promote change, emotional well-being, and family harmony.



FAMILIES

We offer support for the whole family. We guide members to find better ways of communicating their emotional needs and improving their relationships.

Our Team offers comprehensive services to meet all of your child's mental health needs.

ASSESSMENT

Mental Health and Psycho-educational

GROUPS

Children, Youth, and Parent

THERAPY

Individual, Parent-Child, Parent, and Family

CONSULTATION

School, Parent, and Family