



# 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, behaviour analysts, 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*: This seminar series aims to promote evidence-based practice by teaching participants to evaluate the clinical utility of diagnostic tests, studies, and treatments, conduct program evaluations, formulate clinically relevant questions, efficiently search for and critically appraise evidence, and ultimately develop and discuss a clinical question by applying seminar principles.
- *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](http://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 5 to 8 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 or executive function-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/executive function 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 interventions for two of three clinical services described below.

*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 discusses healthy lifestyle factors and evidence-based memory strategies, and provides psychosocial support to participants. The program runs for 7 sessions, with 6 weekly sessions and a 1-month follow up session.

*Goal Management Training®* is designed to help individuals with impairments in executive functioning improve their organization and ability to achieve goals. The program runs for 9 weekly sessions (2 hour

duration). In addition, there are two optional weekly-sessions after the core program where individuals can focus on applying GMT intervention strategies to a participant's individual goals.

### 3. Combined Emphasis in Neuropsychological Assessment and Cognitive Intervention

Students in this practicum placement will engage in both neuropsychological assessment and cognitive intervention activities. The specific offerings may vary annually, depending on site resources and supervisor availability, and may include a combination of the activities described above. Student learning outcomes typically include learning related to the administration of specialized cognitive intervention protocols and neuropsychological assessment, such as case conceptualization, test administration, scoring and interpretation, providing feedback, and report writing. This practicum aims to provide comprehensive training that equips students with the skills necessary for proficient practice across the full spectrum of neuropsychological activities, from assessment through to treatment.

### 4. 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 Ontario.

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, (e) 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](mailto: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](mailto:psychpracticum@baycrest.org)

**In the Practicum Application Form and in your letter of interest, students are encouraged to indicate all opportunities they are interested in pursuing.** 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](mailto:psychpracticum@baycrest.org) | Web: [www.baycrest.org/neuropsychology](http://www.baycrest.org/neuropsychology)

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Baycrest is fully affiliated with  
the University of Toronto



UNIVERSITY OF  
TORONTO



## **Azrieli Brain Medicine Clinic Neuropsychology Practicum**

### **Overview of the Clinic**

The Azrieli Brain Medicine Clinic at Sunnybrook Health Sciences Centre offers a unique practicum experience for students interested in interdisciplinary brain health care. Located within the state-of-the-art Garry Hurvitz Brain Sciences Centre, the clinic provides comprehensive care for patients with complex brain disorders.

The Azrieli Brain Medicine Clinic serves as a "one-stop shop" for diagnosing, managing, and treating complex brain disorders. By integrating multiple brain-related specialties—including neurology, psychiatry, geriatrics, neurosurgery, and physical medicine and rehabilitation—the clinic ensures holistic patient care. This interdisciplinary approach addresses the interconnected nature of brain health, aiming to improve patient outcomes and quality of life.



### **Practicum Details**

Practicum students will gain hands-on experience conducting comprehensive neuropsychological assessments for a diverse range of patients with conditions such as dementia, functional neurological disorders, autoimmune diseases, traumatic brain injuries, vascular issues, anxiety-depressive disorders, and more. Trainees will also participate in interdisciplinary case rounds, working alongside a multidisciplinary team that includes a staff neurologist, staff psychiatrist, GP psychotherapist, social worker, and residents and fellows from various specialties. These discussions adopt a neuro-bio-psycho-social framework to explore patients' conditions in depth. Additionally, trainees will have the opportunity to engage in ongoing

psychotherapy groups for patients with functional cognitive disorders, allowing them to develop critical knowledge and skills to serve this often misunderstood and underserved patient population.

This practicum offers a unique chance to collaborate closely with medical specialists, hone complex differential diagnostic skills, and integrate principles of clinical psychology and neuropsychology. Trainees will deepen their knowledge of the intricate interplay between psychological factors and cognition, preparing them for advanced clinical practice in neuropsychology.

Opportunities in this placement include:

- **In-Depth Assessments:** Conduct comprehensive neuropsychological diagnostic assessments that integrate performance validity measures, mood and personality factors, and cognitive test results to provide a holistic understanding of patients' conditions.
- **Group Therapy-Based Interventions:** Co-facilitate therapy groups and contribute to clinical research focused on developing evidence-based treatment protocols for complex neurocognitive conditions, such as persistent symptoms following mild traumatic brain injury and functional cognitive disorder.
- **Therapeutic Feedback Sessions:** Enhance your skills in delivering empathic, client-centred feedback from assessments. Learn strategies to foster diagnostic acceptance, promote client motivation for change, and build rapport.
- **Individual Consult Sessions:** Provide focused consultations to address specific clinical questions or patient concerns. This may include counselling on accepting a diagnosis, improving sleep, understanding somatization, or reviewing cognitive findings from prior assessments.
- **Interdisciplinary Collaboration:** Work closely with specialists across multiple disciplines to develop comprehensive case conceptualizations and treatment plans. This includes performing full systems reviews and gaining experience interpreting neuroimaging findings.
- **Access to Specialized Rounds:** Participate in weekly and monthly rounds, including the University of Toronto Department of Psychiatry City-Wide Grand Rounds, University of Toronto Grand Neurology Rounds, and International Behavioural Neurology Rounds, to deepen your knowledge and gain exposure to cutting-edge developments in the field.

## Supervision and Training

You will receive hands-on supervision through a combination of weekly scheduled meetings with the clinic's Clinical Neuropsychologist and ad-hoc support as needed.

## Application Process

To apply for the practicum, please submit the following by **February 1, 2025**:

- A current resume or CV
- A cover letter detailing your interest in brain medicine and relevant experience
- Two professional or academic references

Please send your application materials to Dr. Sabrina Lemire-Rodger ([sabrina.lemirerodger@sunnybrook.ca](mailto:sabrina.lemirerodger@sunnybrook.ca)).

We follow the GTA practicum match day protocols.

### Contact Information



**Azrieli Brain Medicine Clinic**  
Sunnybrook Health Sciences Centre  
2075 Bayview Avenue  
Toronto, ON M4N 3M5  
Phone: (416) 480-6100 ext. 3448  
Website: [sunnybrook.ca](http://sunnybrook.ca)



# 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>

**2025-2026**

**Director-of-Training: Drs. Melissa Button and Melissa Milanovic, 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 **FEBRUARY 1<sup>st</sup>, 2025** for Spring-Summer 2025 and Fall-Winter 2025-2026 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.

**Students 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 Drs. Melissa Button and Melissa Milanovic at [Psychology.PracticumApplications@camh.ca](mailto:Psychology.PracticumApplications@camh.ca). Please ask referees to **email reference letters** with the name of the applicant in the subject line.

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

**\*\* If CAMH does not currently have an affiliation agreement with your academic program, we cannot guarantee that an agreement will be pursued or completed. We advise you discuss this with your potential CAMH supervisors before proceeding with an application. If you are unsure if CAMH has an agreement with your program, please speak to your program. CAMH will not be responding to those inquiries.**

Once your completed application is received, your submission will be reviewed. Only students who are accepted for an interview will be notified. Most interviews will take place within 8 weeks of the application deadline.

CAMH participates in **Common Notification Day (March 26, 2025)** 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.  
Tracey A. Skilling, Ph.D., C.Psych.

*\* accepts applicants from Accredited and 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.  
Pushpinder Saini, M.A., C.Psych.

*\* only available for Fall-Winter Practicum*

The Psychological Assessment Service for Children and Youth 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**

Supervisor: Carly Albaum, Ph.D., C.Psych.

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. *Available for Fall/Winter 2025-2026 with placements primarily in person, with possibility of hybrid. Familiarity with CBT is an asset, though not required.*

## Youth Concurrent Disorders

Supervisor: Kiefer Cowie, Psy.D., C.Psych.

*\*Available for Fall/Winter 2025-2026. This is an onsite placement. Available for an advanced doctoral-level applicant with familiarity in CBT. Previous training in an inpatient setting is not required.*

The Youth Concurrent Disorders practicum offers opportunities for delivering assessment and intervention services to both inpatient and outpatient youth presenting with concurrent disorders (moderate to severe substance use disorders and co-occurring psychiatric concerns). Inpatient services are provided within the Concurrent Youth Unit (CYU), a voluntary inpatient hospitalization unit for adolescents aged 13 to 18 with concurrent disorders. Outpatient services are provided through the Youth Addiction and Concurrent Disorder Service (YACDS) to youth (ages 14 to 24) with concurrent disorders. Students will be part of an inter-professional team, consisting of a psychologist, psychiatrists, social workers, occupational therapists, and nurses.

Potential experiences include delivering interventions (individual and co-facilitating groups), conducting assessments, and participating in multi-disciplinary meetings. Intervention emphasizes a biopsychosocial approach, integrates CBT, Motivational Interviewing, and DBT-skills, and incorporates a harm reduction philosophy. Students will receive weekly individual supervision, participate in team meetings, and have the opportunity to attend CAMH-wide educational seminars.

— ADULT TRACK —

**ACUTE CARE PROGRAM**

**Addictions and Concurrent Disorders**

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

*\* Fall/Winter 2025-2026 placements are available. This is a virtual 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 McMain, Ph.D., C.Psych.  
Molly Robertson, Ph.D., C.Psych.

*\* This placement is available to doctoral 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 2025. Fall Winter (2025-2026) 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)/ Ontario Structured Psychotherapy Program**

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

*\* Placements for 2025-2026 fall/winter 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 2025 and Fall/Winter 2025-2026 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 one 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 and/or be involved in the third party assessments described above.. 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.

\*\*\*Please note, due to a new WSIB contract, training opportunities available may differ from those described above. Interested applicants are encouraged to inquire about such changes in January and/or consult the brochure, which will be updated to reflect any material changes. \*\*\*



## CLINICAL RESEARCH

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

*\* Part-time Fall/Winter 2025-2026 placements are available. Practicum placements are in person, with a primary focus on assessment; some therapy, supervision, and research experience are 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 multiple 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)* and *Diagnostic Assessment Research Tool (DART)*. Students also receive training in structured interview, self-report, and performance-based measures of psychopathology 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 2025-2026 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.

### **Concurrent Disorders in Psychosis (CDp) Service of the Complex Care and Recovery Program**

Supervisor: Yarissa Herman, D.Psych., C.Psych

*\* Available for Fall/Winter 2025-2026 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 substance use disorders and/or psychosis.*

The CDp service offers intervention and consultation for individuals with a current or past substance use difficulty who also have a psychotic spectrum illness, treating the two concurrently. Therapy occurs in inpatient, outpatient, and day hospital settings, and includes individual and group modalities.

The opportunities in CDp intervention include training in both Motivational Interviewing and Structured Relapse Prevention, which often utilizes Cognitive Behavioural Therapy, Acceptance and Commitment Therapy, and other evidence-based modalities. Practicum students conduct intake assessments and engage in both group and individual therapy.

## **Therapeutic Neighbourhood**

Supervisor: Melissa Button, Ph. D. C. Psych.

*\* Available for a Fall/Winter 2025-2026 practicum and may offer a Summer 2025 practicum. Preference for a Ph.D. level applicant with familiarity in CBT, although previous training in psychosis and/or in an inpatient setting is not required. Practicum placements are in person with a primary focus on group treatment.*

The Therapeutic Neighbourhood (TN) is a centralized inpatient service that provides group programming for individuals with a wide range of presenting difficulties (e.g., psychosis, mood difficulties, anxiety, substance use, etc.). Our therapeutic groups are derived from Cognitive Behavioural Therapy (CBT), Compassion Focused Therapy (CFT), Dialectical Behaviour Therapy (DBT), Acceptance and Commitment Based Therapy (ACT), and Motivational Interviewing (MI) approaches, and we emphasize a humanistic and client-centered stance. There are opportunities to gain in-depth experience in facilitating these group treatments, as well as individual therapy that is based on a comprehensive case formulation. We also conduct orientation appointments for all referrals to the TN, which are based on MI principles.

The TN team is multidisciplinary, consisting of nursing, psychology, recreation therapy, social work, peer support and occupational therapy, and we continuously collaborate with all of the inpatient units. As such, there are a multitude of opportunities to be involved with case consultation and collaborative care.

## **Neuropsychological Assessments & Cognitive Intervention for the Geriatric Mental Health Services**

Supervisors: Nina Dopsloff, Dipl. Psych., C. Psych

Sara Pishdadian, Ph.D., C. Psych.

*\* **Not** accepting applications for the 2025-2026 year.*

Neuropsychological assessment referrals come from CAMH's General Geriatrics Clinic, Memory Clinic and Neuropsychiatry Clinic, which provide services to both adults and seniors. In this service, practicum trainees 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; post-ECT cognitive changes) and establish a detailed cognitive profile to inform treatment planning. There will also be opportunities to observe or co-facilitate cognitive rehabilitation groups, (e.g., Learning the Ropes for MCI and Goal Management Training) depending on trainee interest and skill level. Weekly individual supervision meetings will be held with

practicum trainees and there are opportunities to attend a range of clinical rounds and interdisciplinary team meetings.

### **ADULT NEURODEVELOPMENTAL SERVICES (ANS)**

Supervisors: Alex Porthukaran, PhD, C. Psych  
Andjelka Palikucin, MA, C. Psych

*\* Available for 2025-2026 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 autistic adults or intellectual disability 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/or 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.

*\* Available for 2025-2026 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. Both programs offer hybrid (virtual and in-person) experiences.**

## CLINICAL PRACTICUM FACULTY SUPERVISORS

**Carly Albaum, Ph.D., C.Psych.**, York University, 2023. Clinical Interests: assessment and treatment of children and adolescents with neurodevelopmental conditions (i.e., autism, ADHD, specific learning disorders) and co-occurring mood and/or anxiety disorders. Individual, family, and group-based cognitive behavioural interventions. Research Interests: development and implementation of intervention programs for neurodivergent children and adolescents, with an emphasis on suicide prevention; neurodivergent-affirming care.

**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.

**Melissa Button, Ph.D., C. Psych.**, York University, 2018. Clinical and Research Interests: assessment and treatment of individuals living with severe mental illness, with an emphasis on Cognitive Behavioural Therapy, Motivational Interviewing, Compassion Focused Therapy, Acceptance and Commitment Based Therapy and Dialectical Behaviour Therapy.

**Kiefer Cowie, Psy.D., C.Psych.** The Wright Institute, 2023. Clinical and Research Interests: psychological assessment and interventions for individuals with concurrent disorders.

**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. Lapos, 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.

**Melissa Milanovic, Ph.D., C.Psych.**, Queen's University, 2021. Clinical and Research Interests: assessment and treatment of individuals experiencing complex mental health conditions, including psychosis spectrum, mood- and trauma-related disorders; as well as the intersection of treatment of emotion regulation challenges associated with these presentations.

**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.**, York University, 2023. Clinical and Research Interests: neuropsychological assessment in psychosis spectrum and neurodegenerative illness, cognitive-behavioural therapy for individuals with psychosis spectrum illness with cognitive and functional limitations, post-ECT cognitive changes, 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 Intrests: 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**  
2025-2026 Psychology Practicum Application Form

(Applications are due on or before **February 1, 2025**)

**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= 1<sup>st</sup> choice [most preferred rotation], 2= 2<sup>nd</sup> choice, 3= 3<sup>rd</sup> 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  
Youth Concurrent Disorders  
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  
CCR - Cognitive Behaviour Therapy Service  
CCR – Concurrent Disorders in Psychosis Service  
CCR – Neuropsychology Assessments & Cognitive Intervention for the Geriatric Mental Health Services – n/a  
CCR – Therapeutic Neighbourhood  
Forensic Division - Adult Inpatient Service – n/a  
Forensic Division - Consultation and Assessment Team  
Forensic Division - Sexual Behaviours Clinic  
Integrated Day Treatment Program  
Mood and Anxiety Ambulatory Services/ Ontario Structured Psychotherapy Program  
Work, Stress, and Health Program

2025-2026



Hamilton  
Health  
Sciences

# Practicum Training in Clinical, Health, and Neuropsychology

Contact the Psychology Practicum Coordinator  
for further information:

Dr. Séamus O'Byrne, C Psych.

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

Hamilton, Ontario

L8L 2X2

Tel: (905) 521-2100 Ext. 77348

Email: [psychpracticum@hhsc.ca](mailto: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 2025-2026 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. Séamus O'Byrne, 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 Pignon, Dr. Paulo Pires, Dr. Séamus 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*

### Extensive Needs Program

Extensive Needs Service (ENS) provides vital wrap-around services for children and youth with urgent and extensive needs in Hamilton and the surrounding region who have co-occurring medical, physical and developmental complexities and/or social vulnerabilities. ENS is comprised of the following disciplines: psychology, social work, behaviour therapy, occupational therapy, service consultation/navigation, and registered dietitians. Practicum students may provide individual and group intervention in addition to comprehensive and psychodiagnostic assessments. In addition, practicum students will gain exposure to Family Check-Up, a brief, strength-based intervention that improves parenting and family management practices.

**Supervising Psychologist:** *Dr. Sheri Nsamenang*

### *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.*

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*

## 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 Psychologist:**s 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.

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## 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.

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## 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. Séamus O'Byrne, C.Psych.  
Practicum Coordinator  
Child and Youth Mental Health  
Ron Joyce Children's Centre, 3<sup>rd</sup> 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](mailto: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 2025-2026

Program	Level	Term(s)	Days/Week	Focus	Supervisor
CYMH Outpatient Service - at Ron Joyce	MA or PhD	Summer 2025	3-4 days/week	Comprehensive assessment	TBD
Extensive Needs Program	PhD	Fall + Winter	2 days week	Intervention	Dr. Sheri Nsamenang
CYMH Outpatient Service - at Ron Joyce	PhD	Fall + Winter	2 days/week	Intervention and psychodiagnostic assessment	TBD
Children's Exercise and Nutrition Centre	PhD	Fall + Winter	2 days/week	Intervention	Dr. Sheri Nsamenang and Dr. Beverly Walpole

## Adult Practicum Opportunities at Hamilton Health Sciences for 2025-2026

Program	Lev-	Term(s)	Days/Week	Focus	Supervisor(s)
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



## 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.

Séamus 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.

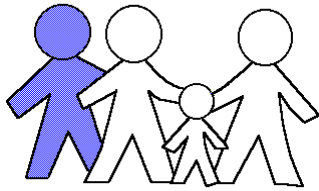
Joanna Sue, Ph.D., C.Psych. (Queen's University, 2014). Psychologist in Adult Acquired Brain Injury Program.

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.



## **DR. ANGELA FOUNTAIN, C. Psych. & ASSOCIATES**

1037 Howden Road East., Oshawa, Ontario L1H 0L7  
Phone: (905) 655-5813 Email: [Office@drfountain.ca](mailto:Office@drfountain.ca)  
Web Site: [www.drfountain.ca](http://www.drfountain.ca)

### **CLINICAL PRACTICUM TRAINING INFORMATION**

**CONTACT:** Dr. Patricia Zimmerman, Ph.D., C.Psych.

**EMAIL:** [pzimmerman@drfountain.ca](mailto:pzimmerman@drfountain.ca)

**PHONE:** 905-655-5813

**ADDRESS:** 1037 Howden Road East, Oshawa,  
Ontario, L1H 0L7



**TYPE OF PRACTICUM OFFERED:** Psychology Intervention Practicum focusing on intervention for children, youth, and families. We expect to have positions for 1-2 students for the Fall of 2025.

### **PRACTICE INFORMATION:**

We are a group private practice in psychology that is located in north Oshawa, serving clients primarily in the Durham region. We are a friendly, creative and lively multidisciplinary team of around 20 clinical staff and students from a variety of disciplines (i.e., psychology, social work, registered psychotherapists, child and youth work) as well as a full administration team, barn staff, and volunteers. We offer mental health services (assessment and



treatment) designed to fit the needs of families, children (infants to adolescents) and adults with a range of presenting problems. We take an integrative approach to clinical work in order to develop individualized treatment programs to meet our clients' specific needs. Our treatment plans can range from brief solution focused interventions to longer-term more traditional treatment programs. We are particularly well known for our children's treatment programs, which include play therapy, group therapy programs, and fun therapeutic day programs throughout the summer months. Unique to Dr. Angela Fountain & Associates is our clinical setting. We are located on a therapeutic farm which includes farming, horseback riding, equine and other animal activities, day camp and recreational facilities and programs.

Unique to Dr. Angela Fountain & Associates is our clinical setting. We are located on a therapeutic farm with a full range of indoor and outdoor psychological treatment amenities, allowing us to offer all the traditional child and youth community-based clinic services and more. From our indoor consultation offices and play therapy rooms to our adjoining equine therapy stables, small animal handling facilities, recreation and swim areas, to adventures in our forest and farm meadows, practicing psychology moves to a new level of wellness that more traditional settings cannot



offer. We provide training and support in our unique equine and animal assisted therapies along with all the traditional training and support a psychology student needs.

Across all our clinical services, we strive to provide a competitive and comprehensive range of psychological and mental health services for children, youth, adults and their families that are grounded in theory and evidence-based practice, creative, user friendly, and that flexibly respond to clients' needs and interests. In our warm, inviting farm country setting, we seek to enhance each client's dignity, individuality and potential for independence and inter-personal relationships with family and community. The mission statement of our practice is, *"To instill love, value, and purpose into our clients, staff, students and volunteers by helping them discover their highest potential."*

Dr. Angela Fountain & Associates was originally founded in 1994, in response to the limited psychological assessment and treatment services for children/youth and their families in the Durham Region. Dr. Fountain has built a solid professional reputation in the area and has maintained an increasing stream of client referrals from the Durham community since starting the practice. We receive referrals from a broad range of sources: paediatric and family medicine practitioners; family lawyers and the Court; child welfare professionals; local children's agencies (such as hospitals, Infant Development, Resources for Exceptional Children, Kerry's Place Autism Services, Grandview Treatment Center); Learning Disabilities Association; local schools; parents; as well as word of mouth. Given the breadth of referrals, we provide services to both the general mental health population in the region as well as harder to serve, more complex client challenges.

What distinguishes Dr. Angela Fountain & Associates from other service providers is our creative approach to clinical services, while upholding high standards of care in order to deliver child and family-friendly services that are intrinsically motivating to our clients. Dr. Angela Fountain & Associates is proud to be recognized for our unique approach to clinical services, having won the Ontario Psychological Association's "2017 Award of Merit" for Innovative Contributions to Children's Mental Health and the 2015 Business Excellence Award from the Oshawa Chamber of Commerce. We are also the first of a kind to integrate a regulated health professional clinic and an accredited Ontario Camp Association facility as a secondary industry to a fully functioning family operated farm.

For additional information about our practice, clinical staff and services offered, please refer to our website: [www.drffountain.ca](http://www.drffountain.ca).

### **TRAINING:**

Students will have an opportunity to develop psychological intervention skills to address a range of presenting problems (i.e., anxiety, OCD, depression, ADHD, challenges related to ASD, learning problems, emotion and behaviour dysregulation, parenting and family relationship issues, among other presenting problems) for children, adolescents and their families. Through a combination of individual supervision as well as applied seminar topics, students will receive supervision and training in many aspects of psychological intervention: integrative case formulation, developing and monitoring treatment plans, client management skills, session note documentation, working with parents and any collaterals, addressing process factors in the





therapeutic relationship, recognizing and appropriate follow-up regarding safety risks and fulfilling any mandatory reporting obligations. Students will receive training in a range of therapeutic modalities including CBT, attachment-focused and emotion-focused therapies. They will also receive training on incorporating play therapy and the outdoors into broader treatment plans for their cases as well as the use of virtual treatment modalities. Students will begin by shadowing and completing co-therapy cases and then be assessed individually for ability to complete cases individually under supervision.

### **SUPERVISION:**

Supervision will be provided in accordance with the requirements of the university in which the student is enrolled. A combination of live, individual and group supervision (depending on the number of students) will be provided by a registered psychologist or psychological associate. Additional training opportunities include participation in weekly team clinical consultation meetings, didactic seminars as well as any available practice-wide staff trainings.

### **APPLICATION PROCEDURE:**

**Application Material** (to be submitted to the attention of Dr. Patricia Zimmerman):

- Up-to-date Curriculum Vitae
- Covering letter outlining clinical experiences to date in addition to training objectives
- Two letters of reference, at least one of which would ideally be from a psychologist familiar with the student's clinical work
- Unofficial graduate transcript

### **Requirements:**

- Current enrollment in a graduate program in Clinical Psychology
- Previous clinical experience or comparable experience working with children
- Preference will be given to students with graduate training in child and developmental psychology
- \*\*Successful candidates will be required to complete a vulnerable sector criminal background check, at the student's expense, prior to the start of the placement.

### **Deadlines:**

- Application due dates as determined by GTA Match Process
- Only successful applicants will be invited for interviews





# Empower Your Child, Restore Balance

Expert Strategies for a Happier, Healthier Family.



At FFEW, our team is led by Dr. Zia Lakdawalla, a clinical psychologist with extensive graduate and post-graduate training in child development and evidence-based practices. Our therapists are well-versed in a variety of therapeutic approaches, including Cognitive Behavioural Therapy (CBT), Dialectical Behaviour Therapy (DBT), Mindfulness, and Acceptance and Commitment Therapy (ACT). We prioritize ongoing professional development, regularly hosting training sessions to ensure that our team remains at the forefront of therapeutic knowledge and techniques.

## Group Therapy Programs

Group therapy at FFEW offers numerous benefits, particularly in creating a supportive community where families can share their experiences and learn together. By participating in group sessions, individuals can alleviate feelings of isolation and shame, as they find acceptance and understanding among peers. Our groups are structured to teach evidence-based theories and practical skills in a systematic way, empowering participants to make meaningful changes in their lives. Additionally, group therapy is a cost-effective option, providing comprehensive learning and support at a reduced fee.

**These group therapy sessions are for parents with children in the following age groups:**

### **Building Blocks: Parenting for Emotional Health**

Ages 4 months to 5 years  
8-week virtual program, 1 hour/week

This program supports parents in creating secure parent-child relationships and building emotion regulation skills in young children. This is an early intervention-prevention group.

### **Parenting Emotionally Intense Children**

Ages 3-12 years  
10-week virtual program, 1 hour/week

Designed to provide caregivers with the skills and support needed to optimize healthy outcomes for emotionally intense children.

### **Parenting Children with Anxiety**

Ages 3-12 years  
8-week virtual program, 1 hour/week

This program helps parents with the tools and strategies to help their children manage anxiety effectively.

### **Coping with Anxiety for Children & Adolescents**

Ages 9-12 & 13-16 years  
8-week in-person program,  
1.5 hours/week

An action-oriented group designed to help children learn and practice coping strategies for managing anxiety.





## How we support families

### For Children & Adolescents

At FFEW, we offer individual and group therapy for children and adolescents, struggling with a range of emotional and behavioural issues. Our team collaborates with your family to meet your child's specific needs and goals.

### For Parents

We provide parents with insights into their child's concerns and use evidence-based strategies to enhance emotional regulation and build resilience. Our team is committed to helping you create a supportive environment for your child's growth.

### For Schools & Educators

We support schools by providing consultation for the class and individual students. We also provide workshops tailored to your school community's needs, supporting early identification and intervention for student mental health.

At FFEW, we offer individual and group therapy to address the unique needs of each child and adolescent. Whether facing challenges with anxiety, depression, emotion regulation, attention difficulties, or social interactions, our team collaborates with your family to understand and support your child's specific needs, strengths, and goals.

### Starting Therapy at FFEW

To get started, parents can self-refer by visiting [www.ffew.ca](http://www.ffew.ca) and booking a FREE 15-minute intake call. During this call, we'll discuss your needs, any symptoms, and answer your questions about the treatment options available at our clinic.



## Getting Started with FFEW

Book a FREE 15-minute intake call.  
We'll discuss your needs, symptoms,  
and explore treatment options.



**FOUNDATIONS**  
for EMOTIONAL WELLNESS

2069 Danforth Ave, 2nd flr., Suite 4  
Toronto, Ontario M4C 1J8

hello@ffew.ca  
[www.ffew.ca](http://www.ffew.ca)





# Clinical Psychology Practicum Brochure 2025-2026



**forward thinking**<sup>TM</sup>  
psychological services

**Dr. Marlene Taube-Schiff**

[www.ftpsych.ca](http://www.ftpsych.ca)



@ftpsych.ca



@forwardthinking.psych



[@MarleneTaubeSchiff](https://www.linkedin.com/in/MarleneTaubeSchiff)

# Forward Thinking

## Psychological Services

### ● Who Are We

We are a **multidisciplinary collaborative group practice**. Associates in the practice have diverse backgrounds, including a psychologist, social worker, family therapist/parenting coach, psychotherapist, occupational therapist and doctoral level therapists. We all meet once a month to discuss challenging cases, collaborate and socialize.

### ● What We Do

Our practice specializes in the treatment of **OCD and OCD related disorders as well as anxiety disorders**. We also see clients with a range of other presenting issues as well, including depression, trauma, relationship issues, emotional and behavioral problems. We treat youth, adults, families and couples. We deliver individual and group treatment approaches. We provide assessments for treatment planning and formal diagnostic assessments.

### ● Our Services

We provide **evidence-based therapy** to help individuals overcome a variety of mental health concerns. Our approaches include:

- **Cognitive Behaviour Therapy (CBT)**
- **Exposure and Response Prevention (ERP)**
- **Inference-Based CBT for OCD (I-CBT)**
- **Cognitive Processing Therapy (CPT)**
- **Acceptance and Commitment Therapy (ACT)**
- **Dialectical Behaviour Therapy (DBT)**
- **Mindfulness**

We also offer formal **psychodiagnostic assessments** that can enhance treatment planning and an understanding of presenting issues. We offer:

- Brief and comprehensive psycho diagnostic assessments (including personality assessments)
- Adult ADHD assessments
- Adults ASD assessments

Formal reports are provided as part of this service.

# Forward Thinking

## Psychological Services

### What You Will Learn

Should you join our team, you will be provided with **consultation, supervision and training** in a variety of interventions, including **cognitive behavioural therapy (CBT)**, **acceptance and commitment therapy (ACT)** as well as **dialectical behavioural therapy (DBT)**. Supervision is provided in individual and group settings to allow for enhanced learning from others and individualized teaching time. Associates have access to a shared drive that provides comprehensive information on a multitude of assessment and treatment interventions. We offer ongoing professional development seminars as well!

### Why You Should Apply

There are many **excellent opportunities to learn and grow at FTPS**, as well as many benefits. They include:

- Having the freedom to **select clients** to work with that align with your training goals and learning objectives
- **Scheduling sessions** that best fits your availability
- Learning to deliver **effective therapy within a virtual environment**, which is an essential therapeutic skill
- Opportunities to **co-facilitate groups** as part of training goals
- Engage in **program evaluation** and quality assurance initiatives during individual and group therapy sessions
- Engage in **measurement-based care with clients** to help refine treatment interventions on an ongoing basis
- Get involved with skills and knowledge dissemination through social media work and blog writing, with a particular focus on OCD and anxiety.
- Attend multiple in-house training workshops to enhance ongoing learning

# Forward Thinking

## Psychological Services

### ● Working with Dr. Taube-Schiff & FTPS

At FTPS, trainees work with Dr. Marlene Taube-Schiff. Dr. Taube-Schiff was the team lead for the Thompson Anxiety Disorders Intensive Services program for OCD at Sunnybrook Health Sciences Centre for five years.

She will supervise your training in CBT for OCD with an emphasis on ERP and ICBT for OCD and anxiety disorders, as well as teaching ACT and DBT skills. She is able to supervise a multitude of other client presentations as well. She will also provide supervision through didactics, role-plays, note review, and audio/video recordings. Supervision sessions will be interactive and take place in both group format and individually.

Dr. Taube-Schiff is highly accessible during your practicum placement. In addition to scheduled supervision times, you will be able to access her through Owl messaging and text messaging as needed. She believes in an “open door” policy to supervision to ensure you will feel well supported throughout your training!

You will work with the rest of the team during collaborative team meetings. Other psychologists are involved in supervision as well, as needed.

### ● What We Are Looking For

We are looking for someone that has a solid foundation in CBT and is excited to join a warm, collaborative and thriving private practice for their training setting.

The ideal candidate will strive to help clients gain the skills they need to move forward and live the life they want.

### ● How To Apply

**Practicum Application Deadline:** Consistent with GTA Match Day

To apply to Forward Thinking, please feel free to submit a cover letter stating areas of interests and training objectives and a curriculum vitae to Dr. Marlene Taube-Schiff at: [marlene@ftpsych.ca](mailto:marlene@ftpsych.ca)

Candidates should also arrange for two supervisors to submit letters of reference separately to Dr. Taube-Schiff's email.

# Holland Bloorview Psychology Practicum Program

## Placements in Pediatric Neuropsychology and Autism Assessment

### 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.



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.

### Pediatric Neuropsychology and ASD

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 receive 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.

Holland Bloorview also offers a practicum with a focus on **autism spectrum disorder (ASD)** assessment. Due to the specialized nature of this placement, it is only suitable for advanced practicum students looking to complete their second or third assessment practicum. In this placement, students will learn about obtaining developmental histories relevant for a potential ASD diagnosis and will be exposed to the administration and scoring of a range of modules from the *Autism Diagnostic Observation Schedule: 2<sup>nd</sup> edition (ADOS-2)*. There will also be opportunities to participate in diagnostic formulation for ASD, as well as feedback sessions, and to learn how to



write reports and recommendations regarding ASD. Collaboration within a multidisciplinary team may also occur, although this varies depending on the client. Please note that previous exposure to the ADOS-2 is not a requirement for this placement but would be helpful. However, even with prior experience, students should not expect to become research-reliable on this measure during their placement.

## Training Model

Each practicum student will be assigned a primary clinical supervisor although case supervision may also be provided by other neuropsychologists/psychologists on the team. Students will receive a minimum of 1-2 hours a week of individual supervision by either a licensed clinical neuropsychologist, or a psychologist in the ASD program, depending on the placement. 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 training in supervision in our psychology residency program, practicum students will receive additional supervision and mentorship by pre-doctoral psychology residents receiving metasupervision from a supervising psychologist.

## Learning Opportunities

The goal of both placements is to develop skills in pediatric psychological 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, two days a week. Applicants interested in applying to an assessment practicum at Holland Bloorview should email the following documents to Dr. Janine Hay at [jhay@hollandbloorview.ca](mailto: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 psychology practicum program at Holland Bloorview, please contact Dr. Janine Hay, Practicum Coordinator.

E-mail: [jhay@hollandbloorview.ca](mailto:jhay@hollandbloorview.ca)

Phone: 416-425-6220 ext. 6342

Toll free: 1-800-363-2440

Please review our website at [www.hollandbloorview.ca](http://www.hollandbloorview.ca)





**Psychological  
& Counselling**  
SERVICES GROUP

2023/2024

## Doctoral Psychology Residency Program Information



Psychological & Counselling Services Group (PCSG) is a multi-functional, private practice, psychology and therapy clinic offering a wide range of services including psychological assessment and counselling/psychotherapy.

The aim of the clinic is to provide one-stop, comprehensive psychological services to meet the needs of children, adolescents, adults, couples, and families. The foundation of our clinical practice is client relations. We are committed to client-centered values and place an emphasis on strength, resiliency, and collaboration. Our intent is to provide a full-range psychological and counselling service based on a systemic and lifespan orientation using a variety of evidence-based approaches.

Our practice includes 30+ clinicians that span a wide range of mental health professions including psychologists, psychotherapists, psychometrists, registered dietitians, and psychoeducational interventionists.

### Contact

**Lina Budianto** PhD, C. Psych  
Director of Training

117 King Street East 2nd fl.  
Oshawa, ON L1B 1H9

Tel: 905-721-7723  
Fax: 905-721-6880

Email: [lbudianto@oshawapsychologist.com](mailto:lbudianto@oshawapsychologist.com)

Visit our website:  
[tinyurl.com/trainatpcsg](http://tinyurl.com/trainatpcsg)

### Areas of Practice

**Adult Clinical and  
Counselling Psychology**

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**Child Clinical and  
Counselling Psychology**

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**Health Psychology**

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**Rehabilitation  
Psychology**

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**School Psychology**

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**Sport Psychology**

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**Vocational and Career  
Counselling**

## OUR CLINICAL LOCATIONS

Our main clinic is currently located in downtown Oshawa at 117 King Street East, about 35 minutes away from Toronto. We are housed in the Oshawa Clinic, which is the largest multi-specialty medical group practice in Canada with over 110 physicians. PCSG's psychology offices are housed on the lower and second levels of the historic East Wing of the Oshawa clinic.

In Summer 2024, along with the Oshawa Clinic group practice, PCSG main office will be moving to a brand new state-of-the-art medical building at 198 Des Newman Boulevard, Whitby.

In addition to our main clinic, PCSG also has three other locations. Our Markham Clinic is located at Woodbine Medical Centre, our Ajax clinic is at Rossland Medical Centre, and our Peterborough clinic is at Optimal Health.

At this time, residents will be completing their residency from the main clinic in Oshawa with the option of working some days from the Markham and Ajax locations.



**Psychological  
& Counselling**  
SERVICES GROUP

## Doctoral Psychology Residency Program Brochure 2023/2024

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## Typical presenting concerns in our client population include

- **Personal growth and development issues** such as self-esteem, career, and vocational interests.
- **Major situational and developmental transitions** such as stress management, separation and divorce, loss and bereavement, motor vehicle accidents, chronic illness, and family life transition.
- **Significant relationship conflicts and intimacy issues** such as family relationship discord, parent-child conflict, parenting, couple relationship breakup, intimacy issues, and sexual difficulties.
- **Socially related issues and trauma** such as immigration and cultural dislocation, social isolation, child abuse, sexual abuse, and domestic violence.
- **Behavioural difficulties and mental health concerns** such as anger management, depression, anxiety, obsessive-compulsive disorder, eating disorder, and addictions.
- **Child development and behavioural issues** such as cognitive and intellectual functioning, Attention Deficit Disorder, Asperger's Syndrome, disruptive and oppositional behaviours, conduct problems, etc.



## PCSG's Service Philosophy

While PCSG is a private practice, supporting our community is part of our service philosophy and tradition. The general public is often faced with financial barriers in accessing the needed psychological services, both psychological treatment and assessment. Given our commitment in training and nurturing the next generation of psychologists, in 2008, PCSG established the not-for-profit Low Fee Clinical Service/Training Clinic, where practicum students provide services under the supervision of registered psychologists.



## PCSG RESIDENCY PROGRAM

PCSG trained its first doctoral psychology resident in 2015 as a non-APPIC member. Since 2018, PCSG has been a Child track partner with the Toronto Area Residency Consortium (TARC), a doctoral clinical psychology residency program accredited by the Canadian Psychological Association (CPA) and the association of Psychology Post-Doctoral and Internship Centers (APPIC). This partnership will be on hiatus for the coming academic year 2023/2024 as we are entering the process of becoming a member of APPIC as an independent residency program.

## PROGRAM STRUCTURE

PCSG offers two full-time (40 hour per week) residency positions. One position is in the child/adolescent track, and the other is in the adult track. The psychology residency runs annually from Sept 1 to Aug 31. During this time, residents are expected to have 15-20 hours of direct client contact per week. Direct client contact may be in-person or virtual and is defined as time directly spent interviewing, assessing, or intervening with clients. Given the needs of the population we serve as a private practice, residents are expected to have evening hours two days a week (until 8 pm). A specific schedule for hours will be determined at the commencement of the residency.

The salary for the residency (2023-2024 academic year) is CAD\$37,500 /year, paid bi-weekly. Residents do not receive supplemental health benefits.

Residents are provided with 3 weeks (15 days) vacation, 10 statutory holidays, and 5 professional development days. Professional development days are paid time off to participate in conferences, defend dissertations, and attend job interviews. All requests for time off must be made in writing via email for written approval by the Director of Training and Primary Supervisor.

Residents are entitled to the following paid statutory holidays: Labour Day, Thanksgiving, Christmas Day, Boxing Day, New Year's Day, Family Day, Good Friday, Victoria Day, Canada Day, Civic Holiday. If a statutory holiday falls on a weekend, residents will be given an additional working day off with pay, to be the Friday or the Monday immediately prior to or immediately after the statutory holiday. Please note that Psychological & Counselling Services Group adheres to the same holiday schedule for office hours as the Oshawa Clinic (e.g. open Easter Monday, close at noon on Christmas Eve). Vacation requests on a day that the office building closes early (e.g. whether the building closes at 12 noon or 3:00 pm in the afternoon) will be considered one (1) full vacation day.

Prior to the start of their residency, residents must obtain Professional Liability Insurance, as well as completing Vulnerable Sector Screening and Criminal Reference Background Check. Residents also need to apply for registration with the College of Registered Psychotherapists of Ontario prior to the start of their residency. All related fees are covered by PCSG.

## TRAINING GOALS

The primary objective of the residency program at PCSG is to prepare residents for independent and autonomous practice as clinical psychologists. To that end, our goals of training encompass the following areas:

- **Assessment and Treatment:** Residents are expected to develop skills and knowledge in evidence-based psychological assessment and treatment. Residents will be encouraged to think critically on how to apply these skills and knowledge competently in clinical practice. In assessments, residents are expected to be proficient in selecting, administering, scoring, and interpreting psychological tests. Residents will integrate finding from various sources, conceptualize case, and formulate diagnoses. Residents will write assessment reports and provide feedback to clients and/or families. In treatment/intervention, residents are expected to become competent in developing treatment planning/treatment goals, formulating case conceptualization, and providing evidence-based psychotherapeutic intervention. Residents will gain competency and confidence in managing crises and responding flexibly to clients' needs.
- **Consultation and Interprofessional Collaboration:** Residents will be prepared to function in an inter-professional team through communicating, consulting, and collaborating with other clinicians and staff members. There may be opportunities to engage in interdisciplinary collaboration with other professionals and community partners (e.g. schools, physicians, case managers, etc.)
- **Supervisory Skills:** Residents will develop emerging supervisory skills and knowledge by providing supervision to master's level students who are completing their practicum placement at PCSG.
- **Professional Ethics and Standards:** Residents are expected to develop awareness, knowledge, and application of ethical and professional principles of psychology practices.
- **Sensitivity to Differences:** Residents will improve awareness of cultural and individual differences in providing clinical assessment and intervention through exposure to a wide range of client demographics, presentations, and needs.
- **Professional Development:** The residency program also aims to facilitate the development of strong professional conduct and professional identity as a psychologist through direct clinical practice with the community, participation in supervision and didactic training, and exposure to a large number of established psychologists in the clinic.



## CLINICAL ROTATIONS

Residents will complete their residency either in the Child, Adolescent, and Family Track or in the Adult Track.

### CHILD, ADOLESCENT, AND FAMILY TRACK

Residency in the Child, Adolescent, and Family track focuses on psychological assessment, intervention, consultation, and supervision related to psychological services for children age 4 to emerging adults and their families.

Assessment and testing generally encompass clinical interviewing (semi-structure and structured), diagnostic evaluation for psychopathology, psychoeducational assessment for learning processes, ASD assessment, ADHD assessment, and family/relational assessment. Residents receive extensive training in assessing and diagnosis of various psychological and learning disorders. They will engage in test selection, diagnostic interviewing, administration and scoring of psychological tests, case formulation, providing feedback, communicating diagnosis, making treatment recommendations, and writing comprehensive reports.

Psychological treatment/intervention modalities include individual, group, and family therapy. Residents receive training in the provision of intake assessment, diagnostic formulation, and treatment of a diverse range of psychological, emotional, behavioural, and relational difficulties in children/adolescents and their families. Residents also have the opportunity to facilitate group therapy. Some examples of current and previous treatment groups include the Adolescent DBT Skills group, Caregiver/Parent DBT Skills Group, and LGBTQ2+ group.

Residents will also be involved in consultation activities throughout their training year to provide

them with the opportunity to present and discuss clinical cases and to collaborate in other professional discussions. Residents will also receive training in providing supervision to master's level practicum students at PCSG.

Residents also have the option to participate in three elective rotations:

- **The High Performance Mental Health Clinic** provides psychological counselling and clinical support for athletes and performers (e.g., dancers, musicians, and vocalist) dealing with mental health concerns and challenges. This rotation is available in the Oshawa and Markham locations. Supervision for this rotation is provided by our clinicians who have training and experience working with competitive, elite, and professional athletes and performers.
- **The Eating Disorder Clinic** provides individual, group, and family counselling, as well as nutritional rehabilitation for children and adolescents dealing with eating disorder. Clinicians in the program also provide support for and work collaboratively with other health providers and schools. This program runs from the Ajax clinic.
- **The Family Therapy Clinic** provides family/relational assessment, as well as intervention for the family system. This rotation is available in the Oshawa and Markham location. Supervision in family therapy is provided by training staff who are certified as approved supervisor with the Ontario Association for Marriage and Family Therapy (OAMFT) and/or American Association for Marriage and Family Therapy (AAMFT).



## ADULT TRACK CLINICAL ROTATIONS

Residency in the Adult Track focuses on psychological assessment, intervention, consultation, and supervision related to psychological services for adults and couples.

Assessment and testing generally encompass clinical interviewing (semi-structured and structured) and diagnostic evaluation for psychopathology, including those in major areas of mental disorders, personality disorder, trauma, and substance use disorder. Residents may also provide psychoeducational assessment, ASD assessment, and ADHD assessment for adults. Residents receive extensive training in assessing and diagnosis various mental health disorders. Residents engage in test selection, diagnostic interviewing, administration and scoring of psychological tests, case formulation, providing feedback, communicating diagnosis, making treatment recommendations, and writing comprehensive reports.

Psychological treatment/intervention modalities include individual, couples/family, and group therapy. Resident receives training in the provision of intake assessment, diagnostic formulation, and treatment of a diverse range of psychological, emotional, behavioural, and relational difficulties in adults. Training in couples/family therapy is provided by training staff who are certified as approved supervisor with the Ontario Association for Marriage and Family Therapy (OAMFT) and/or American Association for Marriage and Family Therapy (AAMFT). Residents also have the opportunity to facilitate group therapy. Some examples of current and previous treatment groups include the adult DBT skills group (English or Cantonese), mindfulness meditation group, pain management group, smoking cessation group, and LGBTQ2+ group.

Residents will also be involved in consultation activities throughout their training year to provide them with the opportunity to present and discuss clinical cases and to collaborate in other professional discussions. Residents will also receive training in providing supervision to master's level practicum students at PCSG.

Residents also have the option to participate in three elective rotations:

**Couples/Sexual Relationship Clinic** provides assessment and treatment for relational difficulties and sexual relationships in adults and couples from diverse sexual orientations and gender expressions. This rotation is available in the Oshawa and Markham locations. Supervision is provided by psychologists who are approved supervisors with the Board of Examiners in Sex Therapy and Counselling in Ontario (BESTCO).

**The High Performance Mental Health Clinic** provides psychological counselling and clinical support for athletes and performers (e.g., dancers, musicians, and vocalist) dealing with mental health concerns and challenges. This rotation is available in the Oshawa and Markham locations. Supervision for this rotation is provided by our clinicians who have training and experience working with competitive, elite, and professional athletes and performers.

**Rehab Psychology Clinic** provides rehabilitation assessment and intervention for individuals looking to return to work or previous psychological functioning following physical and/or psychological injuries (e.g. being involved in a motor vehicle accident, work place injury, and disability leave). Supervision is provided by psychologists registered in rehabilitation psychology with CPO.



## SUPERVISION

Supervision is provided by doctoral-level psychologists, registered in good standing with the College of Psychologists of Ontario (CPO). Supervisors will only provide supervision within their scope of practice and declared area of competency and client population. Supervisors are clinically responsible for psychological services provided by the residents they are supervising. There is an “open-door” policy in which residents are encouraged to contact their supervisor should the need arise. Residents will receive a minimum of 3 hours of supervision time per week, of which at least 2 hours are in individual supervision. Supervision will include case presentation, case discussion and related literature, review of session recording, demonstration of intervention, and role plays. Residents are expected to maintain an ongoing supervision log for every formal supervision contact.

Residents and their supervisors will complete and review the Supervision Agreement and the Training Plan Form at the beginning of the residency. Formal evaluation of the residents is completed twice a year, while informal evaluation is conducted on an ongoing basis. Residents will also provide evaluations of the residency program twice a year.

## SUPERVISORY STAFF



**Dr. Ken Kwan**  
PhD, CCFT, .C. Psych  
University of Toronto  
Client populations:  
Child, Adolescent,  
Adult, Couples, Family



**Dr. Lina Budianto**  
PhD, C. Psych  
Fordham University  
Client populations:  
Adolescent, Adult,  
Couples



**Dr. Lisa Do Couto**  
PhD, C. Psych  
University of Guelph  
Client populations:  
Children, Adolescent,  
Family



**Dr. Sheelagh Jamieson**  
PhD, C. Psych  
Queen's University  
Client populations: Child,  
Adolescent, Adult



**Dr. Tammy Wong**  
PhD, C. Psych  
Fielding Graduate University  
Client populations: Adult,  
Couples, Family

## **DIDACTIC SEMINARS & CONSULTATION GROUPS**

There is a wide array of training opportunities and consultation groups organized by PCSG. Some of these seminars and consultation groups are open to all clinicians at the clinic, while others are specifically designed for residents and practicum students. Participation in the following didactic seminars and consultation groups are mandatory for all residents.

### **CLINICAL ROUNDS**

**Facilitator:** Dr. Ken Kwan

**When:** Every 1st Monday of month for 2 hours

**For:** All residents and practicum students.

Topics:

- Orientation and Client Preparation
- Therapeutic Alliance
- Therapeutic Processes: Microskills in Facilitating Effective Therapeutic Interactions, Therapeutic Presence, and Responsiveness.
- Effective Use of Self
- Evaluation and Treatment of Suicidal behaviours
- Ethical Issues
- Working with Difficult and Aggressive Clients
- Clinical Application of Mindfulness
- Professional Direction and the Business of Psychology Private Practic
- Systemic Perspective in Therapeutic Interventions and Effective Consultation
- Providing Supervision
- Professional Development: Thinking Back and Thinking Forward
- Diversity, Cultural Humility, and Intersectionality

## **RELATIONAL THERAPY WITH COUPLES AND FAMILY TRAINING AND CASE CONFERENCE**

**Facilitator:** Dr. Ken Kwan

**When:** Every 2nd Monday of the month for 2 hours

**For:** Clinicians who are currently working with couples and family, or who are interested in learning about relational therapy.

**Description:** Didactic training and case conferences regarding relational work (couples, family, interpersonal).

*Dr. Kwan is a Clinical Fellow and Approved Supervisor with the American Association for Marriage and Family Therapy (AAMFT) and also a sessional lecturer in family therapy and Couples therapy course at University of Toronto OISE.*

## **DIALECTICAL BEHAVIOURAL THERAPY (DBT) TRAINING AND CASE CONFERENCE**

**Facilitator:** Dr. Shelley McMain

**When:** Every 3rd Monday of the month for 3 hours

**For:** Clinicians who are currently providing DBT treatment, DBT for Complex PTSD, and/or working with complex cases with significant emotion dysregulation, suicide/self-harm behaviors or complex trauma. It is also for clinicians interested in learning DBT.

**Description:** Case-based didactic teaching on DBT & DBT for Complex PTSD, followed by case conference. There may be assigned reading, review of treatment video by experts in the area, intervention demonstration, role plays, formal case presentation, and consultation of actual ongoing client cases.

*Dr. McMain is head of the Borderline Personality Clinic at CAMH. Division Director and Associate Professor at University of Toronto OSIE Department of Psychiatry.*



## DIDACTIC SEMINARS & CONSULTATION GROUPS (CONT'D)

### EMOTIONAL FOCUSED THERAPY (EFT) TRAINING AND CASE CONFERENCE

**Facilitator:** Dr. Jeanne Watson

**When:** Every 4th Monday of the month for 2 hours

**For:** Clinicians who are currently doing EFT treatment or who are interested in learning EFT.

**Description:** Didactic teaching and case conference on EFT. There may be assigned reading, review of treatment video by experts in the area, intervention demonstration, role plays, formal case presentation, and consultation of actual ongoing client cases.

*Dr. Watson is one of the developers of EFT, co-founder of International Society for Emotion Focused Psychotherapy (isEFT), and faculty at Applied Psychology and Human Development at University of Toronto OISE.*

### WEEKLY PEER CONSULTATION GROUP

**When:** Every Wednesday for 1 hour

This group is an opportunity for clinicians to meet and discuss both clinical and non-clinical questions or issues.

### WEEKLY COMPLEX CASE CONSULTATION GROUP

**When:** Every Thursday for one hour

This group is an opportunity for clinicians to meet and discuss complex cases and to provide additional layer of support.



## OTHER EDUCATIONAL EXPERIENCES

### Greater Toronto Area (GTA) Resident Seminars

Approximately 5-6 times/training year, the local psychology residency programs within the GTA jointly offer half-day seminars available to all local residents to attend. The GTA seminars cover a range of professional practice topics in psychology presented by supervisors, local university faculty, College of Psychologists of Ontario staff and other experts in the field. Topics include clinical supervision, ethics and professional issues, program evaluation, diversity, licensure, and early career planning. Sessions are a mixture of didactic presentations, discussions, and informal opportunities to connect with residents at other settings.

### Barbara Wand Series of Webinars

These webinars are run by the College of Psychologists of Ontario (CPO) and occurs approximately 2 times per year. These are half-day webinars focusing on ethical issues, current professional and jurisprudence issues. Residents will join other clinicians at PCSG to attend these seminars.



**OSHAWA**  
**Psychotherapy**  
**TRAINING INSTITUTE**

OPTI is the external training arm of the Psychological & Counselling Services Group (PCSG). OPTI helps mental health practitioners incorporate the most recent and relevant research into their practice by offering short courses and continuing education workshops delivered by respected, experienced and accredited leaders in the field. Since 2016, OPTI workshops have been approved by the Canadian Psychological Association (CPA) and by the Canadian Counselling and Psychotherapy Association (CCPA) to offer continuing education for mental health practitioners in various individual, couple, and family psychotherapy models, addressing a wide range of topics that clinicians may encounter in their practice. Residents receive a special discount off the training rates for OPTI workshops. Participation in these workshops is not mandatory.

## ADMINISTRATIVE SUPPORT

PCSG has the support of a full administrative team. Residents have the option of scheduling ongoing appointments with clients on their own or utilize admin staff assistance for scheduling purpose. New assessment and therapy clients are scheduled by our Intake & Clinical Coordinator (intake@oshawapsychologist.com).

Members of the admin team will relay any phone or email messages to residents and will follow up with clients or others as directed. The admin team will handle billing, payment collection, and follow up on any unpaid fees. Admin staff can also assist with any photocopying, scanning, and faxing as needed.

Residents will be provided with office space that may be shared with other clinical staff on other days/times in the week. PCSG supports flexible work settings between in-person/in-office work and remote working options. However, residents are encouraged to offer as much in-person availability as possible and will be expected to work onsite for all required in-person aspects of the training program.

PCSG has a large testing library. Testing materials are stored in a dedicated assessment room and in the testing cabinets. Residents are expected to follow the policies and procedures for use and sign-out of the assessment testing materials (including testing protocols, manuals, stimulus materials and scoring software).

## APPLICATION PROCESS

### QUALIFICATION

All candidates must be enrolled in a CPA- and/or APA-accredited doctoral program in clinical or counselling psychology. Candidates must have received formal approval from their program's DCT to apply for the residency. A minimum of 2 practicum placements with 600 practicum hours, including at least 300 direct client contact hours and 150 supervision hours, is required to be considered. Prior to the commencement of the residency, candidates must also have completed all requirements of their doctoral program (i.e., all required doctoral coursework, comprehensive examinations, practicum) except completion of the dissertation.

Applications for the residency position at PCSG should include the following:

1. Cover letter stating applicant's preferred track, training goals, and professional plans
2. Curriculum Vitae
3. Graduate Transcripts
4. Three letters of reference, two of which should be from individuals familiar with the applicant's clinical skills. The third reference should ideally be the applicant's dissertation supervisor or graduate program's DCT.
5. Supplemental Material: a comprehensive psychological assessment report authored by the applicant.

Apply by email: [residency@oshawapsychologist.com](mailto:residency@oshawapsychologist.com)



**Psychological  
& Counselling**  
SERVICES GROUP

PCSG is committed to offering equal employment opportunity and encourages applications from all qualified individuals regardless of cultural or ethnic backgrounds, race, religion, gender, sexual preference, and disability. The residency program will make all efforts to ensure access to those with disabilities.

## MORE INFORMATION

**Lina Budianto** PhD, C. Psych

Director of Training

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**VISIT OUR WEBSITE: [TINYURL.COM/TRAINATPCSG](http://TINYURL.COM/TRAINATPCSG)**





# ROCK™

REACH OUT CENTRE FOR KIDS

CLINICAL PSYCHOLOGY PRACTICUM  
Updated August 2024

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 the past 50 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).

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

General Information:	<a href="http://www.halton.ca">www.halton.ca</a>
Attractions:	<a href="http://www.halton.ca/The-Region/Explore-and-Enjoy-Halton">www.halton.ca/The-Region/Explore-and-Enjoy-Halton</a>
Transportation:	<a href="http://www.oakvilletransit.ca">www.oakvilletransit.ca</a>
	<a href="http://www.milton.ca/en/living-in-milton/transit.aspx">www.milton.ca/en/living-in-milton/transit.aspx</a>
	<a href="http://www.burlington.ca/en/transit/transit.aspx">www.burlington.ca/en/transit/transit.aspx</a>
	<a href="http://www.gotransit.com">www.gotransit.com</a>

#### *Land Acknowledgement*

Reach Out Centre for Kids is deeply connected to the land on which we gather today. We have supported children, youth, and families on this land for 50 years. We respectfully acknowledge that this land is situated on the traditional territory of the Anishinaabe, Haudenosaunee, and the Huron-Wendat and is home to many First Nations, Inuit, and Métis peoples. We also respectfully acknowledge and are deeply grateful to the current treaty holders, the Mississaugas of the Credit First Nation, for sharing their traditional territory with us so that we can support children, youth, and families on their journeys of healing.

As we gather on these treaty lands, we honour and respect the four directions, land, waters, plants, animals, ancestors that walked before us, and all the wonderful elements of creation that exist.

## **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). Psychological services are being provided using a hybrid model, by utilizing a combination of both virtual and in-person sessions. Staff 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.

The Clinical Psychology Residency program is accredited by the Canadian Psychological Association (CPA), currently from the 2023/2024 academic year through the 2029/2030 academic year. ROCK is a member of APPIC and participates in the APPIC Match.

## **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 17 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 clients, 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 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.

### **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.

## **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 (Clinical 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, and FASD team member. 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. Katelyn Mullally (Clinical Psychologist-Supervised Practice)**

Ph.D., 2024, University of Guelph, Clinical Child and Adolescent 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 and 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](mailto: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](mailto: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**

### **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 often have opportunities to audit and/or co-facilitate groups. A calendar of current group offerings can be found here <https://rockonline.ca/group/>.

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 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 who are seeking services at ROCK. This service will provide a safe space and a culturally-relevant intervention to young people who are facing systemic barriers impacting their mental health, education, or family relationships.

### **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

provide 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 years. 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.

### **Enaahtig Healing Lodge and Learning Centre**

Enaahtig Healing Lodge and Learning Centre embraces Indigenous ancestral ways of well-being to support balanced communities and Nations for present and future generations through inclusive services with a focus on holistic healing, wellness, and Indigenous culture.

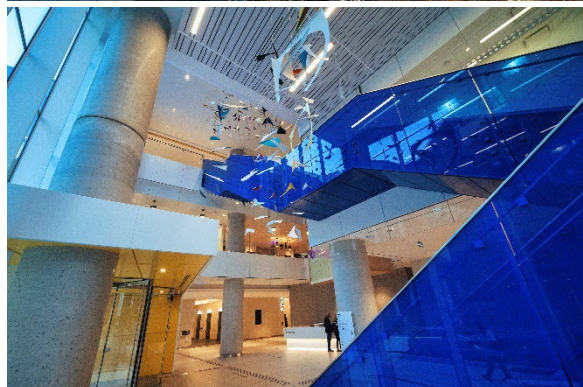
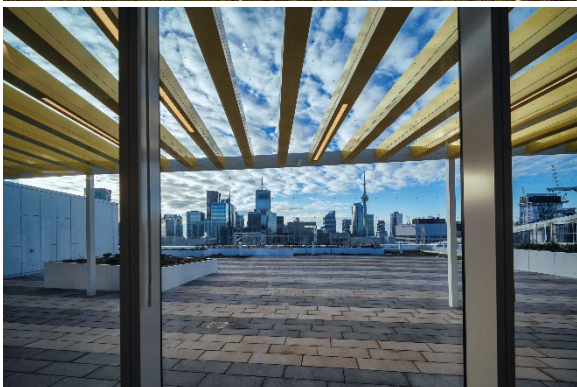
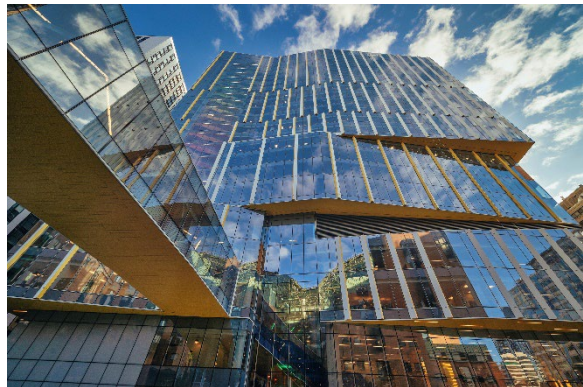
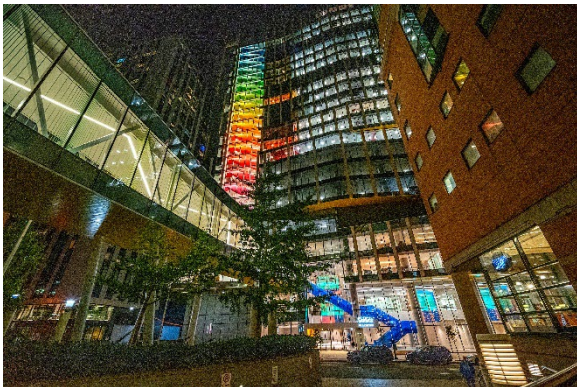
### **Woodview Mental Health and Autism Services**

Woodview offers services and support for children and youth facing mental health challenges and for those diagnosed with Autism Spectrum Disorder (ASD).





# Psychology Practicum Placements 2025 – 2026



**Department of Psychology**

The Hospital for Sick Children, Toronto, ON, Canada

## Clinical practicum placements for psychology graduate students

Procedures and requirements for MA and PhD students interested in a practicum placement in the Department of Psychology at The Hospital for Sick Children (SickKids).

### Criteria for application:

1. Applicant must be enrolled in a *CPA-accredited* graduate program in clinical psychology (MA or PhD level).
2. Students must have completed a graduate course in child or adult assessment and/or intervention.
3. Students must have completed graduate level courses in child psychopathology, child development, and learning disabilities.
4. Completion of a course in ethics is preferred.

### Deadlines for application:

For fall or summer placements, applications must be submitted by February 1 of each calendar year.

### Application process:

- Submit a PDF document containing a cover letter and CV to [psychology.practicum@sickkids.ca](mailto:psychology.practicum@sickkids.ca).
- The cover letter should contain the following information:
  - Brief description of previous training and skills.
  - Reason for applying to SickKids.
  - Desired focus: Assessment vs. intervention.
  - Number of hours and days per week requested.
  - Duration of placement (September to April or May to August).
  - Specific rotations/programs of interest.
- Submit a maximum of 3 reference letters:
  - Referees are to submit letters directly to the practicum coordinator (email below). Any file format is acceptable.
- Please **do not submit** university course transcripts.
- Receipt of application will be acknowledged by email.

***Applications received after the stated deadlines will not be considered.*** Applications will be reviewed by staff available to offer placements and you will be contacted directly if an interview is going to be scheduled. Notification of placement offers will be made in mid-March per the GTA Practicum group agreement.

- Practicum students will usually work with and under the supervision of 1 psychologist/program.
- On occasion, a placement may be offered with shared supervision between 2 staff psychologists.
- The number of placements offered may vary each year based on supervisor availability.

In addition to direct clinical work, students will have the opportunity to attend interdisciplinary rounds, case conferences and professional development offered within a specific program and within the larger Department of Psychology. This includes monthly Psychology Rounds, Psychology Education Day and didactic seminars offered in the Department of Psychology.

### COVID-19 Impact on Training

Since the onset of the COVID-19 pandemic, the education program and faculty have navigated the uncertain landscape with flexibility prioritizing clinical care, training and safety. We continue to use a hybrid model of care (combination of in-hospital and virtual) in most clinics.

Should similar disruptions occur in the future, potential and current practicum students will be notified as soon as information becomes available.



Practicum students are expected to comply with any and all federal, provincial, and SickKids organization regulations including but not limited to wearing Personal Protective Equipment, maintaining appropriate physical distancing, abiding by travel restrictions, quarantining, and other Infection Prevention and Control procedures within the context of providing clinical services, or otherwise.

**If you have questions about a specific clinic, please contact one of the supervisors directly.**

**If you have questions about the process or practica at SickKids in general, please contact the practicum coordinator:**

[psychology.practicum@sickkids.ca](mailto:psychology.practicum@sickkids.ca) (January – March)

[jennifer.stanga@sickkids.ca](mailto:jennifer.stanga@sickkids.ca) (the rest of the year)

**Possible Practicum Rotations (OP = outpatient; IP = inpatient)**

Neuropsychological Assessment	Population/Description	Age	OP	IP
<b>Epilepsy Surgery, Epilepsy Classroom &amp; DBS</b> Dr. Elizabeth Kerr <i>elizabeth.kerr@sickkids.ca</i>	Epilepsy patients being considered for surgery and post-surgical follow-up  Students attending an ECPP classroom for Epilepsy  Patients being followed for Deep Brain Stimulation	4-18+	√	√
<b>Epilepsy Surgery, Metabolic/Genetics, &amp; Neurosurgery</b> Dr. Eva Mamak <i>eva.mamak@sickkids.ca</i>	Epilepsy patients being considered for surgery  Genetic/Metabolic disorders	0-18	√	√
<b>General Neurology</b> Dr. Katia Sinopoli <i>katia.sinopoli@sickkids.ca</i>	Non-surgical epilepsy  Neuroinflammatory diseases (e.g., multiple sclerosis, CNS vasculitis)	4-18	√	
<b>Haematology/Oncology</b> Dr. Laura Janzen <i>laura.janzen@sickkids.ca</i> Dr. Andrea Coppens <i>andrea.coppens@sickkids.ca</i>	Cancer ( e.g., acute lymphoblastic leukemia, brain tumours) and Hematological Conditions (e.g., Sickle Cell Disease)	3-18	√	
<b>Stroke</b> Dr. Robyn Westmacott <i>robyn.westmacott@sickkids.ca</i>	Neonatal and childhood stroke; Arterial ischemic stroke, cerebral sinovenous thrombosis or other neurovascular conditions such as moya moya disease	3-18+	√	
<b>Transplant &amp; Regenerative Medicine</b> Dr. Anna Gold <i>anna.gold@sickkids.ca</i>	Children with congenital or acquired organ deficits including heart, lung, liver or kidney, and have received or are awaiting organ transplantation  Children with intestinal failure who require intestinal rehabilitation or transplant	2-18	√	√

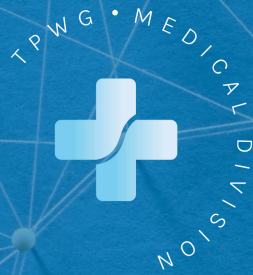
Psychoeducational and Neuropsychological Assessment		Age	O/P	I/P
<b>Cardiology</b> Dr. Renee Sananes <i>renee.sananes@sickkids.ca</i> Dr. Dragana Ostojic-Aitkens <i>dragana.ostojic-aitkens@sickkids.ca</i>	Children with complex congenital and acquired heart conditions	4-18	√	
<b>Tics and Tourette's Clinic &amp; Psychiatry</b> Dr. Jennifer Stanga <i>jennifer.stanga@sickkids.ca</i>	Children with tics and Tourette syndrome, ADHD, learning disorders, anxiety disorders, executive functioning challenges	7-18+	√	
Neuropsychological Assessment and Intervention		Age	O/P	I/P
<b>NeuroOutcomes Lab</b> Dr. Tricia Williams <i>tricia.williams@sickkids.ca</i>	<p>The NeuroOutcomes lab focuses on answering clinically relevant questions in families and children impacted by early brain injury and/or neurological disorders. Taking a child and family-centered approach, key discoveries have provided insight into psychological comorbidities, parent experiences, and influences of neurological factors on cognitive, academic, and mental health outcomes. The NeuroOutcomes lab works closely with other members of the inter-disciplinary team, including neonatal neurologists, nurse practitioners, social work; health psychologists, educators.</p> <p>The predominant focus is on preschool and school age children with congenital or neonatal conditions impacting brain development (i.e., HIE, neonatal stroke, extreme preterm birth, congenital heart disease) and their parents. Children present with early behaviour and/or learning concerns. Opportunities for both assessment and treatment (e.g., virtual parenting behaviour intervention) are available to trainees.</p> <p>Research opportunities include early neurocognitive and mental health outcomes, parent experiences and parenting intervention, tiered based model of neuropsychological assessment and care, stepped-care models of mental health service delivery, and patient-oriented research methodologies. Over the course of the rotation, trainees will develop neuropsychological assessment and consultation skills, clinical research skill and collaboration and grant application writing skills can be explored depending on trainee</p>		√	

	skills set and goals. Prior experience with neuropsychological assessment is an asset but not required. Experience with parenting behaviour intervention and behavioural intervention are also assets.			
	<b>Preference for advanced learners</b>			
<b>Intervention: Clinical/Health Psychology</b>		<b>Age</b>	<b>O/P</b>	<b>I/P</b>
<b>Chronic Pain</b> Dr. Danielle Ruskin <i>danielle.ruskin@sickkids.ca</i> Dr. Catherine Munns <i>catherine.munns@sickkids.ca</i>	Children and adolescents with chronic pain conditions (e.g., neuropathic pain after injury, headache, neuromuscular disease), with disability problems secondary to pain, and pain as a presenting sign of depressive, anxiety, or somatoform disorders	3-18	√	√
<b>Eating Disorders</b> Dr. Hannah Gennis <i>hannah.gennis@sickkids.ca</i> Dr. Brooke Halpert <i>brooke.halpert@sickkids.ca</i> Dr. Sandra Doyle-Lisek <i>sandra.doylelisek@sickkids.ca</i>	The Eating Disorders Program at SickKids diagnoses and treats children and adolescents with a range of eating disorders. They are the primary treatment site for the central Toronto area and are a specialty centre for the province of Ontario. The program has an interdisciplinary approach to treatment and believes family involvement is crucial for recovery from an eating disorder.	Up to 18	√	
	<b>Advanced/Third Practica Only</b>			
<b>Inflammatory Bowel Diseases</b> Dr. Sara Ahola Kohut <i>sara.aholakohut@sickkids.ca</i>	Children and adolescents with IBD (e.g., Crohn's Disease and Ulcerative Colitis) experiencing mental health issues associated with their chronic health condition (e.g., mood and anxiety, OCD, perfectionism, medical trauma). Individual, group, and caregiver treatment approaches offered.  Children/adolescents and caregivers may also present with difficulties including adherence to medical regime, acceptance of IBD diagnosis, coping with IBD diagnosis, symptoms and treatment, chronic pain, body image, eating habits, sleep issues, and somatic symptoms  Will also get exposure to broader GI presentations and co-morbid conditions (e.g., Celiac Disease, Irritable Bowel Syndrome, Juvenile Idiopathic Arthritis)	6 -18 (poss. some early childhood)	√	
	<b>Best suited for advanced practicum student</b>			

<p><b>SickKids Healthy Living Clinic (HLC)</b>  Dr. Elizabeth Dettmer  <i>elizabeth.dettmer@sickkids.ca</i>  Dr. Andrea Regina  <i>andrea.regina@sickkids.ca</i>  Dr. Jason Isaacs  <i>jason.isaacs@sickkids.ca</i></p>	<p>The SickKids Health Living Clinic (formerly the SickKids Team Obesity Management Program (STOMP)) provides outpatient interdisciplinary assessment and treatment to children, youth and their caregivers for complex concerns related to weight, eating, activity and related medical and psychological comorbidities. Although the clinic serves children of all ages, psychology services are typically provided to school-aged children and youth. The team is comprised of specialists from Psychology, Social Work, Nursing, Endocrinology, Adolescent Medicine, Pediatrics, Nutrition, Exercise, and Physiotherapy.</p> <p>Mental health providers on the team are integral in the assessment and treatment of complex and often severe health psychology presentations that include emotional eating, hyperphagia (secondary to hypothalamic obesity), binge eating, and adherence issues, as well as related co-morbid psychological issues such as social and/or generalized anxiety, depression, suicidal ideation, bullying and/or peer relationship issues, school refusal, and body image concerns. Additional socioeconomic, genetic, and familial/interpersonal relationship factors have a particularly strong impact on treatment and prognosis. Treatment is primarily cognitive behavioural (CBT), with other approaches (e.g., MI, DBT skills, EFT, and parent management training) integrated as appropriate. Both individual and group treatments are offered for patients and their caregivers. Mental health providers also support allied health team members in the delivery of care through joint appointments to assist with treatment progress. Professional consultations and community collaborations are also key to patient care plans.</p> <p>Psychology trainees contribute to all parts of the program and will receive training and exposure in both clinical and health psychology. They conduct psychology assessments, provide group and individual therapy for children, adolescents, and caregivers, as well as</p>	<p>0 -18</p>	<p>√</p>	
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	<p>engage in frequent consultations with the community and with the interdisciplinary team via joint allied health appointments and weekly rounds. The SickKids HLC team is also heavily involved in ongoing program development and evaluation, quality improvement projects, and clinical research. Opportunities include contributing to the development and evaluation of novel treatment approaches (e.g., binge eating protocol, group treatment, etc.) and examining psychological correlates of weight related factors for children and youth (e.g., trauma, familial stress, anxiety and depressive symptoms, etc.). Trainees are encouraged and supported in joining specialized projects as interested. Competitive candidates have a strong interest in CBT, and/or DBT, and a strong interest in both Health and Clinical Psychology.</p>			
<p><b>Tics and Tourette Clinic (Psychiatry Dept)</b>  Dr. Jody Levenbach  <i>jody.levenbach@sickkids.ca</i></p>	<p>Youth with tics (primarily Tourette syndrome) and comorbid conditions such as OCD, ADHD, ASD, anxiety and mood disorders, body-focused repetitive behaviours (e.g., trichotillomania) and self-regulation challenges.</p> <p>Intervention services include individual and group therapy using a cognitive behavioural approach, comprehensive behavior intervention for tics (CBIT), and parent training.</p>	<p>7-18+</p>	<p>√</p>	





# TPWG'S CLINICAL TRAINING PROGRAM

Toronto Psychology & Wellness Group (TPWG) is a large multidisciplinary practice in midtown Toronto, specializing in the assessment and treatment of children, adolescents and adults with a variety of mental health concerns. At TPWG we view therapy as an empowered, individualized and collaborative process grounded in respect and understanding of each client's unique goals, needs, personal backgrounds and histories.

With over 50 therapists, dietitians, physicians, nurse practitioners, and administrative staff, we are able to offer many exciting virtual and/or in-person clinical training opportunities for our students.



# TPWG's Training Program Foundational Components:

1. **Individual Therapy**
2. **Group Therapy**
3. **Assessment**
4. **DBT Program**
5. **Outpatient Eating Disorder Program**
6. **Supervision and Consultation**

## 1. INDIVIDUAL THERAPY

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TPWG provides evidence-based individual therapy for a number of mental health difficulties including, but not limited to: depression, generalized anxiety, obsessive compulsive disorder, panic disorder, phobias, social anxiety, PTSD, perinatal mental health issues, personality disorders, eating disorders, grief and loss, gender identity and sexuality issues, life transitions, perfectionism, and parenting issues. Treatment modalities offered include: cognitive behavioural therapy, dialectical behaviour therapy, emotion focused therapy, psychodynamic and mindfulness based approaches.

## 2. GROUP THERAPY

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The clinic offers various in-person and virtual groups to support clients' unique emotional journeys. These include: Dialectical Behaviour Therapy Groups for adolescents and adults, Caregiver Support Groups, Radically Open DBT Groups, Motivational Enhancement for Eating Disorders and Body Image Groups.

## 3. ASSESSMENT

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In addition to comprehensive diagnostic assessments, TPWG offers psychoeducational testing for youth and adults as well as ADHD assessments. Clinicians work in collaboration with TPWG's psychometrist throughout the assessment process.



# Foundational Components:

## 4. DBT PROGRAM

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Since its inception in 2019, TPWG's Dialectical Behaviour Therapy Program is available on an outpatient basis to adolescents and adults, and combines elements of individual therapy, group therapy and caregiving support for those struggling with episodes of emotion dysregulation. All DBT groups run for a minimum of 6 months and include instruction in the 5 main skill domains: i) distress tolerance; ii) mindfulness; iii) emotion regulation; iv) interpersonal effectiveness; and v) building balance.

## 5. OUTPATIENT EATING DISORDER PROGRAM

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TPWG's Outpatient Eating Disorder Program launched in 2020 to treat Anorexia Nervosa, Bulimia Nervosa, Binge Eating, OSFED, and ARFID in youth and adults. The program incorporates a multidisciplinary medical and therapeutic team approach with the following elements: i) comprehensive team intake; ii) individual therapy;

iii) dietetic support; and iv) medical monitoring.

With intake assessments scheduled weekly, the EDP serves youth and adults in the early stages of their illness, upon recent discharge from residential or hospital programs, and those on waitlists for more intensive programming.

An essential component to the EDP are weekly clinical rounds, which are required for all practitioners involved in ED care at the clinic.

## 6. SUPERVISION & CONSULTATION

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The success of TPWG's Clinical Training Program rests on the foundation of excellent individual and group supervision. Each student is expected to meet weekly with their primary supervisor and is expected to become an active member of weekly team consultation meetings. Students are also welcome to attend all clinic wide trainings and workshops.

# Application Process:



Clinical placements typically extend across all programs at TPWG, and involve both intervention and assessment. All placements are for a minimum of 500 hours, and students are expected to maintain a caseload of approximately 5-10 clients. Placements may be virtual, in-person or hybrid, and typically extend from September to May, with a preference for a 12 month commitment.

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## APPLICATION INSTRUCTIONS

The deadline for applications is February 1st for all placements.

Please submit the following materials to: [drmafrici@tpwg.ca](mailto:drmafrici@tpwg.ca) & [drfoster@tpwg.ca](mailto:drfoster@tpwg.ca):

01

A cover letter detailing your interest in TPWG and associated training goals.

02

An updated CV.

03

Two letters of reference submitted, with one from a clinical supervisor.

All applicants selected for an interview with the Clinic Founders will be contacted in early February, with most interviews taking place within 6 weeks of the application deadline.

# Training Program FAQs:

## 1 How are individual supervisors selected?

Individual supervisors are selected based on a number of factors, including shared clinical interests, aligned availability and virtual vs. in-person preferences. All supervisors of our Doctoral training program hold licenses with the College of Psychologists of Ontario.

## 2 Why is there a preference for 8+month placements?

While TPWG accepts students for academic year placements (September-May), the programs at TPWG (namely DBT & EDP) typically yield longer-term clientele. In our experience, trainees have had a preference for working with clients longer than 8 months. Students who are interested in a longer-term paid commitment following their placement are encouraged to note this in their cover letter.

## 3 Are there certain days that students are required to be at placement?

While there exists flexibility for students to select certain days and hours to engage in their placement, it is important to note the requirement of participation in at least one consult meeting weekly, in addition to 1:1 supervision. Consult meetings are held virtually over the lunch hour on Tuesdays (EDP) and Thursdays (DBT).

## 4 What is the highest degree an individual must hold to be considered for a placement at TPWG?

Students may apply in the final year of their Master's program to TPWG. However, prior to beginning their placement students must be in at least PhD 1. Given the nature of clinical populations we work with it is prudent that students have completed a placement involving both assessment and intervention prior to beginning at TPWG.



## Meet the Founders.

Drs. Michele Foster & Nina Mafriçi launched TPWG in 2017 with a vision to reduce gaps in mental healthcare and provide a client-centered approach to evidence-based treatment. Grounded in their clinical and research interests in both eating disorder prevention and treatment, as well as emotion dysregulation difficulties across the lifespan, TPWG has since evolved into a large multidisciplinary healthcare team that services youth, adults and families. Proud to be the first outpatient non-hospital-based Eating Disorder Program in Ontario that provides OHIP-covered physician care alongside psychological and dietetic treatment across the lifespan, TPWG is committed to enhancing patient outcomes and reducing wait times to much needed services.



Have further questions? We are happy to connect with you!

General inquiries on placements:  
[intake@tpwg.ca](mailto:intake@tpwg.ca)

Website:  
[www.tpwg.ca](http://www.tpwg.ca)

Social:  
: @torontopsychologywellnessgroup

Join the Team

06

# TRANSFORMING EMOTIONS

CLINICAL PRACTICUM TRAINING  
PROGRAM IN PSYCHOLOGY

**2025-2026**

**Director of Training: Dr. Sarah Thompson, C. Psych.**

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## OVERVIEW OF TRANSFORMING EMOTIONS

### **Transforming Emotions**

Transforming Emotions is a group psychotherapy practice based in downtown Toronto, dedicated to providing inclusive and evidence-informed mental health care to a diverse range of clients. Transforming Emotions is committed to creating an environment that prioritizes anti-racist and queer-positive practices, alongside life-long learning and warm collegiality among its team members. With a mission to support emotional well-being through personalized, evidence-based interventions, Transforming Emotions is a leading practice in the area of Emotion Focused Therapy (EFT). The practice offers services to clients across the lifespan, from young children starting at age six to older adults (65+), addressing a wide range of emotional and psychological challenges.

At Transforming Emotions, the therapeutic approach is centered around Emotion Focused Therapy (EFT), which is known for its effectiveness in treating emotional difficulties such as anxiety, depression, trauma, and navigating life transitions. The practice emphasizes working collaboratively with clients to foster emotional healing and growth. The clinical team, comprising 15-20 professionals, including practicum students, autonomous psychologists, social workers, and psychotherapists, tailors their interventions to meet the unique needs of each individual.

### **Mission and Therapeutic Focus**

The primary mission of Transforming Emotions is to help clients gain a deeper understanding of their emotions, resolve emotional distress, and develop the emotional skills necessary for a healthier, more fulfilling life. The team aims to empower individuals by providing them with tools to address a wide range of concerns such as:

- Depression
- Anxiety
- Life transitions (e.g., career changes, grief and loss, relationship stress)
- Childhood trauma
- Post-traumatic stress
- Peer and family relational difficulties
- Executive functioning challenges
- Emotion regulation
- School avoidance

By utilizing Emotion Focused Therapy, the clinicians focus on helping clients access, express, and transform emotional experiences that are often at the root of psychological concerns. For clients with a history of trauma, particularly childhood trauma, Transforming Emotions provides specialized interventions designed to support healing and recovery from these adverse experiences.

The practice offers both virtual and in-person therapy opportunities, providing clients with the flexibility to choose the format that best suits their needs. Virtual therapy allows clients

to receive support from the comfort of their homes, while in-person sessions are available for those who prefer face-to-face interactions. This dual approach enables the team to reach a broader audience, including individuals who may not have easy access to in-person services.

## **Vision and Core Values**

Transforming Emotions is guided by a clear vision: **Helping every client and clinician be their best self.** This vision drives the practice's commitment to creating an environment where both clients and clinicians feel supported, valued, and empowered to grow.

The practice's core values reflect its dedication to excellence and professional development:

- Excellence in client care through evidence-informed treatment.
- Supporting clinicians by ensuring they are well-resourced and well-trained.
- Encouraging team members to bring their whole selves to work, recognizing the importance of authenticity and self-care.
- Fostering a culture of life-long learning and continuous professional development.
- Active engagement and collaboration, welcoming team contributions to the evolution of services, policies, and procedures at TE.

Clinicians at Transforming Emotions describe the work environment as warm, collaborative, and growth-focused. The practice encourages independent learning while also providing ample supervision and opportunities for ongoing education. As a team, they prioritize clinician well-being, recognizing that the best care for clients comes from clinicians who are themselves well-supported.



## PRACTICUM OPPORTUNITIES

Transforming Emotions is dedicated to the education and professional development of future clinicians. The practice offers an 8-month practicum for three to five PhD-level students from APA/CPA accredited programs. This practicum focuses on providing students with intensive training in Emotion Focused Therapy, enabling them to work effectively with clients experiencing depression, anxiety, life transitions, or trauma-related symptoms.

The practicum includes the following components:

- Two days per week of clinical practice working with clients.
- Weekly individual supervision with a Registered Psychologist
- Monthly group supervision, with an emphasis on reviewing in-session recordings for constructive feedback and learning.
- Completion of a 30-hour EFT course (no fee for TE practicum students, interns, and residents) provided by Dr. Thompson, which includes both full-day and half-day sessions aimed at deepening students' theoretical and practical knowledge of EFT.

Students participating in this practicum can expect a supportive learning environment with opportunities for professional growth. In addition to clinical work, there may be opportunities to assist with research, such as conducting literature reviews for conference presentations, academic writing projects, or contributing to community training curricula. Students may also have the chance to engage in program evaluation efforts within the practice.

### **Supervision and Training**

Under the supervision of registered psychologists, students can expect to receive rigorous training in Emotion Focused Therapy and are encouraged to take initiative in their learning. Independent study is an important aspect of the practicum, as students are expected to review relevant literature and APA resources, including EFT therapy videos. This blend of direct supervision, group learning, and self-directed study ensures that students gain a comprehensive understanding of the EFT model.

The practicum emphasizes hands-on experience with intervention services. While Transforming Emotions does not offer opportunities for psychodiagnostic assessments, students benefit from working directly with clients under careful supervision, helping them develop essential clinical skills.

## CLINICAL SUPERVISORS

### **DR. SARAH THOMPSON, C. PSYCH.**

Dr. Sarah Thompson received her Ph.D. in Psychology from the University of Toronto in 2006 and has been registered with the College of Psychologists of Ontario as a Clinical Psychologist since 2007. Sarah completed her doctoral training in various settings including postsecondary mental health (York University), inpatient mental health (Wellesley Hospital), and outpatient mental health (St. Michael's Hospital, Hinck's-Dellcrest Centre).

From 2004 to 2022, Sarah worked at the Centre for Student Development and Counselling at Toronto Metropolitan University, acting as psychologist, clinic director from 2011-2017, and clinical supervisor to practicum students, residents, psychologists in supervised practice, and staff from 2011 to 2022. Sarah is certified by the International Society for Emotion Focused Therapy (isEFT) as a therapist, supervisor, and trainer, and is the co-editor of The isEFT Times, isEFT's international newsletter.

At present, Sarah is the Director and Founding Psychologist at Transforming Emotions where she aims to foster excellence in clinical care, supervision, and team member professional development. She is also an adjunct faculty member with the Department of Psychology at Toronto Metropolitan University. As a psychologist she works primarily with queer-identified couples and individuals seeking treatment for depression, anxiety, PTSD and CPTSD. Sarah works primarily from an EFT and trauma-informed lens, integrating elements of CBT, DBT, and psychodynamic therapy. She offers local and international trainings in Emotion Focused Therapy and Emotion Focused Group Psychotherapy and has co-authored one article, one chapter, and an EFT Group Manual. Sarah is also a proud mom to her teenaged son with whom she survived and completed a black belt in Taekwondo in 2021, and is attempting a second degree black belt in 2024/25 with the support and tolerance of her wife!

### **DR. IMMACULATE ANTONY, C. PSYCH.**

Immaculate completed her Doctorate of Education in counselling psychology in 2016, at the Ontario Institute for Studies in Education of the University of Toronto (OISE/UT). Since 2014, she has held a role as a psychologist and counsellor at the Centre for Student Development and Counselling of the Toronto Metropolitan University (TMU), where she has been providing high-quality psychotherapy and counselling to students enrolled in the institution.

Immaculate has extensive experience as a supervisor and trainer, providing supervision and clinical consultation to master-level students and social workers, psychologists and

psychiatrists in several organizations, such as the OISE/TU, Center for Addiction and Mental Health (CAMH), University of Western Ontario and TMU.

Regarding her training, Immaculate has enhanced her skill set with a Motivational Interviewing Trainer Certification from the Motivational Interviewing Network of Trainers (MINT), a certificate course in clinical supervision at TMU and the Advanced Level Certificate Course in Cognitive Behaviour Therapy (CBT) from the OISE/UT.

She brings a multicultural diversity lens and an anti-oppressive framework, grounding her practice in evidence-based approaches, like cognitive behaviour therapy (CBT), motivational interviewing (MI), emotion-focused therapy (EFT), and mindfulness.

### **DR. JULIA MCARTHUR, C.PSYCH.**

Dr. Julia McArthur completed her Ph.D. in Clinical Psychology from the University of Guelph where she has since held several sessional positions, teaching courses to both graduate and undergraduate students in Psychology. Registered to work with both children and adolescents, Julia completed her clinical training at a variety of settings including private practices (Kitchener Psychology Centre, Transforming Emotions), SickKids Centre for Community Mental Health, Centre for Psychological Services, Hamilton-Wentworth District Schoolboard, McMaster Children's Hospital, and the Thames Valley District Schoolboard.

Julia works from a collaborative and trauma-informed approach when tailoring treatment, integrating approaches from several evidence-based treatments including: Emotion Focused Therapy (EFT), Cognitive Behaviour Therapy (CBT), and Interpersonal Psychotherapy. She has worked extensively with individuals who struggle with GAD, depression, trauma, emotion regulation difficulties, ADHD, and learning difficulties, and she is a firm believer that humour is an important part of the healing process.

## HOW TO APPLY

The deadline for practicum applications is **Thursday, February 1st, 2025**, for 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 exceptions, and please do not phone or email regarding exceptions).

Applications are to include:

1. A completed application form (see next page)
2. Cover letter outlining your interest in the practicum opportunity.
3. Resume detailing relevant clinical experience.
4. Three references (please include formal and informal training in Emotion Focused Therapy).
5. A description of previous training in EFT (courses, workshops, independent reading). Note, prior training in EFT is not required. Capacity to formulate and deliver empathy statements will be explored during interviews.

Submit all materials to **welcome@transformingemotions.ca**. Your application will be reviewed by the supervising team, and selected applicants will be contacted for an interview, typically within six weeks of the deadline.

Transforming Emotions (TE) is part of the PRRO consortium, which is in the process of completing registration with APPIC. As such, this practicum opportunity is open to students from CPA/APA accredited programs or those in the process of accreditation. Should your university not have an existing affiliation agreement with Transforming Emotions, this must be obtained before your placement begins.

APPLICATION FORM  
2024-2025 Psychology Practicum Application Form

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

Name:

Address:	
Telephone:	
Date of Birth:	
Email Address:	

Educational Background:

Educational Institution:	
Dates of Enrollment:	
Field of Study (Major):	
Degree Granted (or Anticipated Graduation Date):	

Director of Clinical Training:

Name:	
Telephone:	
Email Address:	

## **Student Training Opportunities in Psychology 2025-2026**

# **University Health Network (UHN)**

**Princess Margaret Cancer Center**

**Toronto General Hospital**

**Toronto Western Hospital**

**Toronto Rehab**

**Student Practicum Training Opportunities in Psychology 2025-2026**  
**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 and Behavioural Analysts of Ontario (CPBAO) and as such, adhere to practice standards set out by the CPBAO.

Please note that we use the common deadline and notification procedures for the Greater Toronto Area (GTA) 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 GTA and has a different notification deadline, please provide details in your application form and your letter of interest.

**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](mailto: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](mailto:Andrew.Matthew@uhn.ca)

*Dr. Matthew and Dr. D'agostino co-supervise all students. Number of practicum spots for Fall-Winter 2025-26 = 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, PhD CPsych; [Aliza.panjwani@uhn.ca](mailto:Aliza.panjwani@uhn.ca).**

*Number of spots for 2025-2026 practicum: 1 (PhD-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

**Contact: Angela Sekely, Ph.D. C.Psych. [angela.sekely@uhn.ca](mailto:angela.sekely@uhn.ca)**

*Number of practicum spots for Fall-Winter 2025-26 = 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](mailto:lori.bernstein@uhn.ca)**

*Number of practicum spots for Fall-Winter 2025-26=0 (research students only)*

## **TORONTO GENERAL HOSPITAL:**

### **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](mailto:maxwell.slepian@uhn.ca)

Alternate Contact: **Molly McCarthy, Ph.D., C.Psych.** [molly.mccarthy@uhn.ca](mailto:molly.mccarthy@uhn.ca)

*Number of practicum spots for Fall-Winter 2025-26 = 2*

*Number of practicum spots for Summer 2025 = 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, virtual intensive outpatient, and virtual 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](mailto:rachel.liebman@uhn.ca) (currently on leave)

Danielle MacDonald, Ph.D., C.Psych. [danielle.macdonald@uhn.ca](mailto:danielle.macdonald@uhn.ca)

Shauna Solomon-Krakus, Ph.D., C.Psych. [shauna.solomonkrakus@uhn.ca](mailto:shauna.solomonkrakus@uhn.ca)

Sarah Royal, Ph.D., C.Psych. [sarah.royal@uhn.ca](mailto:sarah.royal@uhn.ca)

Kathryn Trottier, Ph.D., C.Psych. [kathryn.trottier@uhn.ca](mailto:kathryn.trottier@uhn.ca)

Vincent Santiago, PhD, C. Psych. (supervised practice) [vincent.santiago@uhn.ca](mailto:vincent.santiago@uhn.ca)

**Contact:** [danielle.macdonald@uhn.ca](mailto:danielle.macdonald@uhn.ca)

*Number of practicum spots for Summer 2025 = 0 (PhD-level students only); for Fall-Winter 2025-26 = 0*

## **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](mailto:sarah.royal@uhn.ca)

Susan Wnuk, Ph.D. C. Psych., [susan.wnuk@uhn.ca](mailto:susan.wnuk@uhn.ca)

*Number of practicum spots: Summer 2025 = 2; Fall/Winter 2025-26 = 2*

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

## **NEUROPSYCHOLOGY CLINIC, KREMBIL NEUROSCIENCE CENTRE**

*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](mailto:melanie.cohn@uhn.ca)

**David Gold, Ph.D. C.Psych.** [david.gold@uhn.ca](mailto:david.gold@uhn.ca)

**Marta Statucka, Ph.D., C.Psych.** [marta.statucka@uhn.ca](mailto:marta.statucka@uhn.ca)

**Rachel Leung, Ph.D., C.Psych.** [rachel.leung@uhn.ca](mailto:rachel.leung@uhn.ca)

**Devon Andersen, Ph.D., C.Psych.** [devon.andersen@uhn.ca](mailto:devon.andersen@uhn.ca)

Email inquiries should be addressed to [marta.statucka@uhn.ca](mailto:marta.statucka@uhn.ca)

*\*Ph.D. level students only*

*Number of practicum spots for Summer 2025 = 0; Number of practicum spots for Fall-Winter 2025-26 = 2-3*

## **TORONTO REHAB:**

*The Kite TeleNeuroRehab Centre for Acquired Brain Injury (ABI) 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 or Brenda Colella for The Kite TeleNeuroRehab Centre for ABI**

*Number of practicum spots for Summer 2025 = 1; Number of practicum spots for Fall-Winter 2025-26 = 1-2. Ph.D. level students only*

### **The Kite TeleNeuroRehab Centre for ABI. UNIVERSITY SITE**

***Population:*** adults with wide range of acquired brain injuries, and various neurological disorders – chronic stages of injury (>6 months post-diagnosis) only

***Clinical Assessments:*** clinical neuropsychological

***Clinical Interventions:*** A number of remotely delivered group based intervention programs are offered including cognitive behavioural therapy, mindfulness, Goal Management Training and psychoeducation. Interventions target symptoms including cognitive, mood and fatigue. In addition, the Centre has a range of research programs spanning basic to applied research.

### **Psychologists:**

**Brenda Colella, M.A., C.Psych.Assoc.** [brenda.colella@uhn.ca](mailto:brenda.colella@uhn.ca)

Liesel-Ann Meusel, Ph.D., C.Psych [liesel-ann.meusel@uhh.ca](mailto:liesel-ann.meusel@uhh.ca)  
Robin Green, Ph.D., C.Psych [robin.green@uhn.ca](mailto:robin.green@uhn.ca)  
Lesley Ruttan, Ph.D., C.Psych. [lesley.ruttan@uhn.ca](mailto:lesley.ruttan@uhn.ca)

### **SPINAL CORD REHAB, LYNDHURST SITE**

**Population:** spinal cord injury patients 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:** Typical intervention modalities employed, but not limited to, cognitive behavioural intervention; interpersonal therapy, 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](mailto:martha.mckay@uhn.ca)

**Christie Yao, Ph.D., C.Psych.** [christie.yao2@uhn.ca](mailto:christie.yao2@uhn.ca)

### **Schroeder Pain Assessment and Rehabilitation Research Centre (SPARC)- UNIVERSITY SITE**

#### **Clinic Info:**

The Schroeder Pain Assessment and Rehabilitation Research Centre (SPARC) is an interdisciplinary clinic at KITE Research Institute that provides comprehensive care for people suffering from chronic pain. This placement will consist of 1-2 days per week with some flexibility with virtual services.

**Population:** Outpatient adults and older adults with chronic pain.

**Clinical Assessments:** Neuropsychological assessments.

**Clinical Interventions:** Pain management education. Offered to individuals and groups along with in-person and virtual appointments.

**Research:** Program evaluation; Feasibility and potential impact on disability and quality of life using pain reprocessing therapy in a sample of WSIB clients with chronic pain; Exercise and cognitive interventions to improve headaches and functional capacity.

**Contact: Elias Jeffay, Ph.D. C.Psych.** [elijas.jeffay@uhn.ca](mailto:elijas.jeffay@uhn.ca)

Number of practicum spots for Fall-Winter 2025-26 = 1

## 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) – (5) as a single PDF to [marta.statucka@uhn.ca](mailto:marta.statucka@uhn.ca) with “**Psychology Practicum Application**” as the subject header.

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.

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