

Toronto Area Residency Consortium (TARC)

in School, Clinical, Counselling & Health/Neuropsychology

Residency Brochure 2021 – 2022



UNIVERSITY OF TORONTO
OISE | ONTARIO INSTITUTE
FOR STUDIES IN EDUCATION



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Introduction

The Toronto Area Residency Consortium (TARC) is a CPA accredited doctoral residency training program in school, clinical, counselling and health/neuropsychology, hosted by OISE/University of Toronto, comprised of two tracks:

- Child Track (6 positions): School – Clinical Psychology
- Adult Track (2 positions): Two positions in Clinical-Counselling Psychology .
- One position in Neuropsychology/Health Psychology is on hiatus for 2021-22

The training program takes place over a 12-month, 1600-hour residency.

TARC was accredited by the Canadian Psychological Association in 2016/17 for a 5-year period ending in 2021/2022. The next site visit will be in 2022.

The over-arching goal of the TARC is for residents to develop competencies in the core areas of psychological practice, including psychological assessment, diagnosis, treatment/ intervention, consultation and program evaluation/research. These clinical skills will be developed and applied through the lenses of, and the various training opportunities unique to, the specific tracks and rotations of the consortium.

Consortium Partners

The ten-member organizations of the consortium are:

OISE, University of Toronto, Department of Applied Psychology and Human Development, and:

School-Clinical Track

- (i) Toronto District School Board (TDSB)
- (ii) Toronto Catholic District School Board (TCDSB)
- (iii) Integra Program, Child Development Institute
- (iv) Oshawa Psychological and Counselling Services
- (v) Youthdale Treatment Centres
- (vi) Broadview Psychology
- (vii) OISE Psychology Clinic

Adult Track:

- (i) Ryerson University Centre for Student Development and Counselling (CSDC)
- (ii) University Health Network **(on hiatus for 2021-22)**
- (iii) York University Psychology Clinic

The consortium is hosted by OISE, University of Toronto (UT). The Director of Residency Training (DT) is on faculty in OISE's Department of Applied Psychology and Human Development and is based there. The Consortium is comprised of several partners: OISE/UT (an academic training program), two Toronto school boards, several hospitals and community and university-based mental health settings.

Track Overviews

Child Track - School-Clinical

TARC will be offering six full-time residency positions in its School-Clinical Track. Each resident will spend 2.5 days a week in one of the school boards, 2 days a week at one of the clinical training sites. In addition, all residents will come together at OISE/University of Toronto for .5 days per week throughout the year.

The central goal of the Clinical-School track is to graduate residents who have competency in both school and clinical psychology with an emphasis on children, youth, and families. This goal is pursued through the provision of training in core areas of psychological practice, including assessment, diagnosis, therapeutic intervention, psycho-educational and psychological testing and consultation within both school and clinical rotations.

The training residents receive will equip them with the skills required to intervene effectively with children and youth experiencing a wide range of mental health concerns in both school and community settings as well as skills needed to assess, diagnose and offer remediation for learning difficulties. The high-quality training residents will receive will also prepare them for post-doctoral supervised practice in psychology.

Adult Track

Two full-time positions will be offered within the Adult Track:

Clinical-Counselling (Two positions):

Position 1: The resident will have two part-time rotations simultaneously at Ryerson University Centre for Student Development and Counselling (CSDC) and at the York University Psychology Clinic (YUPC).

Position 2: The resident will have two part-time rotations simultaneously at Ryerson University Centre for Student Development and Counselling (CSDC) and at Broadview Psychology.

The goal of these rotations is to prepare residents for independent practice as professional psychologists who are scientifically informed. By combining these two rotations, residents will work with clients from diverse populations, covering a wide range of mental health problems.

Neuropsychology major rotation/Health Psychology, minor rotation (One position- **ON HIATUS FOR 2021-22**):

The resident will have a full year major in clinical Neuropsychology/Rehabilitation within the Brain and Spinal Cord Rehabilitation program at Toronto Rehab and a minor rotation in Psychosocial Oncology and Palliative Care at Princess Margaret.

In addition, all residents will come together at OISE/UT for .5 days per week throughout the year.

After the completion of these rotations, residents will have acquired the skills needed to assess, diagnose and treat complex primary psychological issues; psychological issues that are secondary to medical conditions or that contribute to medical problems or impede health recovery, as well as neuropsychological problems.

Training Goals

In each organization, psychological services staff work within inter-professional teams. Within each organization there is a recognized need to train professionals in psychology in competencies related to the practice of psychology unique to that setting.

The following general goals of training are common to all members of the consortium:

1. To provide residents with a broad-based training program in core areas of psychological practice – assessment, diagnosis, consultation and treatment/intervention.
2. To facilitate the development of residents in their professionalism and professional identity as psychologists.
3. To facilitate the development of skills necessary for functioning as psychologists working within inter-disciplinary teams and with community partners.
4. To facilitate residents' appreciation and understanding of individual differences, including gender and multicultural issues.
5. To facilitate residents' integration of research and best practices into their professional roles.

More specifically, our objectives by the end of the residency year include:

- Assessment/consultation: Residents are expected to achieve competence in the following skills and judgments required for psychological assessment and consultation: interviewing; selecting psychological tests; administering and scoring psychological tests; interpreting test results; integrating findings from various sources; conceptualizing cases; diagnosing psychological disorders; formulating treatment recommendations; writing assessment/consultation reports; and giving feedback to clients/patients, families, and other professionals.
- Treatment: Residents are expected to achieve competence in the following skills and judgments required for psychological treatment: evaluating treatment needs, working with clients to set realistic treatment goals, selecting interventions, operating effectively within the chosen theoretical orientation(s), responding flexibly to clients' needs as they arise, managing crises, recognizing the need for consultation, and managing termination.
- Sensitivity to differences: Residents are expected to demonstrate sensitivity to individual and cultural differences by taking into account ethnic, gender, and sexuality differences when conceptualizing and diagnosing, and adjusting assessment and treatment approaches to meet the needs of patients representing various cultures, lifestyles, and levels of functioning.
- Professional identity and functioning: Residents are expected to demonstrate identification with the psychologist's professional role and values by understanding the psychologist's role on the multidisciplinary clinical team; participating actively in multidisciplinary clinical teams; participating in activities specific to psychologists; interacting respectfully with other disciplines;

understanding the roles of other disciplines; showing awareness of ethical standards of psychological practice; showing awareness of mental-health and other relevant legislation; behaving ethically toward patients, colleagues, and other staff; managing workload responsibly; completing work promptly; integrating readings and research findings into clinical practice; and interacting with community partners (e.g., schools, probation, physicians) to facilitate client care.

- **Research grounding:** Residents will be comfortable in evaluating practice-related research and will base decisions about their work (assessment, intervention, consultation) with clients on current findings. They will be able to evaluate the quality of evidence used to support clinical decisions.

In order to ensure that this residency meets professionally agreed upon standards and ensures employment mobility for our graduates, we are accredited by CPA and our residency training program adheres to CPA standards and criteria. We are also members of the Canadian Council for Professional Programs in Psychology (CCPPP) and the Association of Psychology Post-Doctoral and Residency Centers (APPIC). We participate in the APPIC Computerized Matching Program, and adhere to APPIC guidelines.

Consortium Partner Descriptions (School-Clinical Track):

OISE, University of Toronto

Located in Toronto, Ontario, the Ontario Institute for Studies in Education (OISE) of the University of Toronto is an international leader in the research, teaching and study of issues that matter in education. OISE is part of the University of Toronto, Canada's largest university, established in 1827 and recognized as a global leader in research and teaching.

The School and Clinical Psychology Program (SCCP) and the Clinical and Counselling Program (CCP) are two CPA accredited programs within OISE's Applied Psychology and Human Development Department, which hosts the consortium. The central mission of SCCP is to provide students with theoretical, research, and professional training in preparation for leadership in psychological practice with children, adolescents and families in school, mental health, private practice, and research settings. The child track of the consortium has this same mandate and is organized in collaboration with the Toronto District School Board (TDSB), the Toronto Catholic District School Board

(TCDSB), OISE and its Psychology Clinic and several community and university based mental health providers.

The Clinical and Counselling Psychology program at OISE (CCP) prepares students to be scientist-practitioners in both areas of counselling and clinical psychology.

Toronto District School Board (TDSB):

The Toronto District School Board (TDSB) is the largest school board in Canada, with 265,000 students and 580 schools. TDSB students come from a diverse range of ethnic and socio-economic backgrounds. Fifty-three percent have a language other than English, with more than 80 languages represented. About 17% of students receive some form of Special Education support. Given the range of needs at the TDSB, the work of psychological services providers is consistently exciting and challenging, and offers opportunities for continued professional growth.

<http://www.tdsb.on.ca/>

Toronto Catholic District School Board (TCDSB):

The Toronto Catholic District School Board (TCDSB) is the largest Catholic school board in Canada, with over 90,000 students and 200 schools. TCDSB students come from a diverse range of ethnic and socio-economic backgrounds. The work of Psychological Services staff addresses the continuum of needs from prevention to assessment and intervention, and from mental health promotion and training to program design and evaluation. In addition to School Psychology as their declared area of competence, a number of Psychological Services staff are also licensed to practice in Clinical and/or Counselling Psychology (as per their registration by the College of Psychologists of Ontario).

<http://www.tcdsb.org>

<https://www.tcdsb.org/ProgramsServices/SpecialEducation/psychology/Pages/What-is-School-Psychology.aspx>

Integra Program, Child Development Institute

Child Development Institute (CDI) is an accredited children's mental health agency in Toronto. CDI offers evidence-based programs for children (ages 0-12), youth (ages 13-18), and their families across four streams: Early Intervention Services (helping young children with social, emotional or behavioural challenges), Family Violence Services (supporting women and children who have experienced interpersonal violence), the Integra Program (services for youth ages 8 to 18 with diagnosed learning disabilities and mental health challenges) and Healthy Child Development (supporting healthy development and learning within Early Learning Centres and an Ontario Early Years Child and Family Centre).

The Integra Program at CDI is located in midtown Toronto (Yonge and Davisville). The Integra Program at CDI is the only accredited children's mental health organization in Canada to provide mental health services exclusively to children and youth whose mental health challenges (MH) are complicated by learning disabilities (LD). Integra provides family-centred, evidence-informed intervention to children and youth with diagnosed LD ages 8 to 18 years in the Toronto region, including individual, family, and group therapy. Typically, Integra clients have complex neurobiologies: 70% have more than one diagnosis, and the majority of clients have been to more than two children's mental health agencies before coming to the Integra program. Understanding a child's learning profile is central to the development of the mental health treatment plan at Integra. Unique to our service, Integra tailors evidence-based practice to the child's specific processing and regulation abilities and creates and evaluates innovative evidence-informed therapies (such as Integra Mindfulness Martial Arts, Integra Young Warriors, Integra Social Competence ACES Group Program).

www.childdevelop.ca/

Broadview Psychology

Broadview Psychology is a family focused and team based private clinic in central Toronto and Stouffville that provides DBT, CBT, ACT and EFT treatment to children, adolescents, parents, families, adults, and couples with diverse challenges. Its team consists of psychologists, social workers, post-docs, graduate students, behaviour therapists, a dietician and admin staff. Broadview Psychology specializes in treating transdiagnostic clients who have problems in regulating their emotions and behaviour through comprehensive and adherent outpatient DBT. Broadview offers separate DBT programs for children, young adolescents, older adolescents, young adults and adults. Broadview Psychology associates work closely together as a team to provide a wide range of services to clients as well as to their family members, including individual,

group, parent, family and sibling therapy, as well as phone/text coaching, educational and career coaching, and exposure therapy.

<http://www.broadviewpsychology.com/>

OISE Psychology Clinic, OISE

The OISE Psychology Clinic is located at the heart of St. George Campus – University of Toronto. A clinical training facility that provides psychotherapy and assessment services to adults, children, adolescents and families. The Clinic has a longstanding history of providing help to clients from the GTA and Southern Ontario. The Clinic offers support to clients from diverse backgrounds (cultural, ethnic, linguistic), and that present with a wide range of psychosocial and learning concerns. The Clinic offers therapeutic and psychological assessment services. The services provided through the clinic are all offered in support of our training mandate. That is, clinicians in training get involved at the OISE Clinic either as part of course-related requirements, an intervention practicum for junior and advanced students, as well as for residents. The latter two positions are solely for school and clinical child psychology. Clinical work is supported by highly trained supervisors, all registered with the College of Psychologists of Ontario. Given the range of complexity that our clients present, the clinic strives towards offering evidence-based treatment while also tailoring the treatment to meet the individualized needs of the clients.

<https://www.oise.utoronto.ca/psychservices/>

Oshawa Psychological and Counselling Services

Oshawa Psychological & Counselling Services (OPCS), established since 2006, is a multi-functional, private practice, psychology and family therapy clinic offering a wide range of clinical services including Psychological Assessment and Counselling/Psychotherapy by a team of experienced psychologists and clinicians. We are committed to client-centered values and place an emphasis on strength, resiliency, and collaboration. Our intent is to provide a “one stop” full-range psychological and counselling service based on a systemic and lifespan orientation using a variety of evidence-based approaches to meet the needs of children, adolescents, adults, couples, and families with a variety of clinical presentations and diverse populations. The office is located in a convenient downtown location, inside the Oshawa Clinic, which is the largest multi-specialty medical group practice in Canada with over 110 physicians.

Despite being 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 such as psychological assessment. At the same time, training students is one of OPCS's commitments to the field of psychology in nurturing the next generation of psychologists. For that purpose, in 2008, OPCS established the Low Fee Clinical Service/Training Clinic. The Low Fee Training Clinic is a not-for-profit service. Because it is not funded by any government and charity funding agencies, there is a charge of a nominal fee to cover the costs in running the service.

<http://www.oshawapsychologist.com>

Youthdale Treatment Centres

Established in 1969, Youthdale is one of the founding members of the children's mental health movement in Ontario, and continues to uphold the highest professional standards in meeting the needs of youth presenting with complex mental health needs and their families. Youthdale's mandate also includes research into new approaches for helping troubled youth and their families. Youthdale's comprehensive mental health services include: 24/7 crisis line services, mobile crisis response, psychiatric emergency admission and hospitalization for youth up to the age of 16 (including out of province youth from Canada's Eastern Provinces and Nunavut), residential treatment (encompassing milieu treatment, individual and family therapy, day treatment, psychiatric and psychological assessment and consultation, and summer treatment camp), as well as a range of outpatient services. The latter services include: assessment (psychiatric, psychological, neuropsychiatric, neurological, occupational therapy, and speech and language) and therapy (individual, art, and family). Youthdale's Sleep Centre also investigates and treats a wide variety of childhood and adolescent sleep disorders. Youthdale also provides an Intensive Support and Supervision Program (ISSP) for young persons with mental health needs who would likely be sentenced to custody for their criminal offenses, but who can alternatively be appropriately supported and supervised in the community.

www.youthdale.ca

Consortium Partner Descriptions (Adult Track)

Ryerson University Centre for Student Development and Counselling (CSDC)

Set in the heart of downtown Toronto, Ryerson University is home to 40,000 full-time undergraduate students and 2,500 graduate students, with a culturally diverse student population from 146 countries. The Centre for Student Development and Counselling is part of a larger department - Student Health and Wellness, which consists of the CSDC, Health Promotion, and the Medical Centre. The CSDC provides direct service to over 2,2000 students annually through individual therapy, group therapy, and psycho-educational workshops. The Department of Student Health and Wellness is a multi-disciplinary team consisting of psychologists, social workers, registered psychotherapists, a health promotion nurse, psychiatrists and general practitioners

www.ryerson.ca

Broadview Psychology

See description above under Child Track.

University Health Network. (ON HIATUS FOR 2021-22)

University Health Network (UHN) is Canada's leading research academic hospital. Building on the strengths and reputation of each of its programs, UHN brings together the talent and resources needed to transform lives and communities through excellence in care, discovery and learning. Our primary value above all else is that patients come first. Additional values include: Safety, Compassion, Teamwork, Integrity and Stewardship. UHN is a network of teaching hospitals that comprises: The Princess Margaret Cancer Centre, Toronto General Hospital, Toronto Western Hospital and the five sites of the Toronto Rehabilitation Institute covering ten program areas. Across the four hospitals are numerous inpatient and outpatient units focusing on care in a diverse range of medical issues and complex diseases. UHN serves the needs of both young and older adults from a large catchment area with a diverse cultural background. Psychologists work within interdisciplinary team settings to provide exemplary care for patients dealing with a range of complex medical issues with a focus on assessment, diagnostics and interventional techniques.

<http://www.uhn.ca/>

York University Psychology Clinic (YUPC)

YUPC is a state-of-the-art community mental health clinic and training centre associated with the Department of Psychology in the Faculty of Health and located on the Keele Campus of York University. The clinic was established several years ago with a main goal to enrich training experiences for York's two clinical doctoral psychology programs: Clinical Developmental which primarily focuses on the infant/child/youth populations and Clinical which primarily focuses on the adult population. Both programs are CPA accredited. The Clinical Area offers opportunities to engage in clinically-relevant research in psychotherapy process and outcomes, neuropsychology, health psychology and personality.

The clinic provides a range of leading edge, effective mental health services on a fee for service basis to keep people of all ages living healthy, productive lives. The clientele are not restricted to those seen in a typical university counselling service but rather are a broad range of community and university referrals of individuals, couples and families who live in the Greater Toronto Area. Services include comprehensive psychological assessments (psycho-educational, psycho-diagnostic and neuropsychological), therapy (individual and group) and health promotion activities such as mindfulness meditation groups.

www.yupc.org

Residency Program: Child Track (School-Clinical)

Please note that during the COVID pandemic or future waves, clinical services and training programs at all sites may be adjusted in line with infection prevention and control advisories from Public Health and the Ministry of Health.

Residents will be assigned to a major and a minor school psychology rotation within the TDSB or TCDSB and a major rotation in clinical child psychology at either Integra, OISE Psychology Clinic, Oshawa Psychological Services, Youthdale or Broadview Psychology. Each resident will spend 2.5 days a week in one of the school boards, 2 days a week at one of the clinical training sites, and .5 days a week at OISE/UT for the joint didactic portion of the training program. Specific rotation assignments will be made

post-match. Rotations will be discussed with the applicants and assigned on the basis of experience and preferences.

A typical schedule of rotation is outlined in the table below.

Rotation	Days/ week	Months	Location	Description
Major School Psychology	2.5 days per week	Sept. – June	TDSB or TCDSB	Elementary and Secondary School Psychology Rotation Minor rotations or special projects (see list in brochure) may be sought.
Major Clinical Child Psychology	2 days per week	Sept. – Aug.	One of: Integra, OISE Clinic Broadview Youthdale OPCS	See descriptions in the body of the brochure.
Seminars/Resident Meetings	Friday PM .5 days	Sept. – Aug.	OISE	Didactic seminars, professional development, resident meetings
Summer		July-Aug	All sites	Hours increased at clinical sites.

Overview of Clinical Rotations

Rotations in School Psychology

Toronto District School Board (TDSB)

Psychological Services providers at the TDSB are assigned to specific schools, based on a weighting of the needs at each school, and are part of a multidisciplinary group of Professional Support Services that includes Psychology, Social Work, Speech and Language, Child and Youth Workers, and Occupational Therapists.

Psychological services at the TDSB are conceptualized according to a three-tier model. Tier 1 reflects universal intervention and includes activities such as reading interventions in the classroom, resilience programming, PD to educators about mental health and learning issues, and research to inform practice in psychology and education in general. Tier 2 reflects targeted intervention and includes membership on school teams, crisis intervention, social skills groups, and support of teachers leading remedial groups. Tier 3 reflects intensive intervention and includes psychological assessment and consultation, individual counselling, and membership on Identification, Placement and Review Committees. Residency opportunities primarily involve Tier 3 activities, with some involvement at the Tier 1 and 2 levels in the following Major and Minor School Psychology Rotations.

Major School Psychology Rotation: Elementary and Secondary School Psychology Rotation (TDSB)

School Psychologists play a significant role in the TDSB in helping to develop and promote mentally healthy schools. They do this through the provision of a full range of psychological work in schools including consultation, assessment, intervention, participation in multi-disciplinary teams and communication with outside agencies. School psychologists are also involved in providing professional development to staff within their assigned schools and with working closely with teachers and special education teachers to translate psychological findings to students' Individual Education Plans (IEP). Finally, school psychologists represent the role and contribution of the profession of psychology within their schools, districts and the TDSB more broadly.

In this rotation, residents will receive two full-year (Sept to June) assignments to one Elementary and one Secondary School. Within those schools, they will take on all the responsibilities associated with the role of School Psychologist. They will conduct assessments, write reports tailored to address the needs of parents and the school system, do consultation, work with special education and resource teachers, provide

intervention, etc. Residents work with teachers and special education teachers to translate assessment findings to Individual Education Plans (IEP) for students. Residents may be involved in providing professional development to staff within their assigned schools. They may also be involved in providing counselling and crisis intervention and may have opportunities to work with other professionals to run intervention groups (e.g. social skills, positive psychology, cognitive-behavioural groups).

Special Projects (TDSB):

There are a variety of services within the TDSB that are supported and led by Psychological Services. Examples include working with students with complex needs (e.g., developmental delay, autism, significant behavioural needs), positive psychology strength-based approach to middle school students with LD, program evaluation for mental health initiatives, development of reading intervention, and Caring and Safe Schools. These teams are multidisciplinary and may or may not be tied to a specific school.

Residents may work with their primary supervisor to select and organize placement in one or more of these special teams over the year, depending on each resident's interest and training goals, time and the opportunities available. Students will be involved with a secondary supervisor while in these special team placements.

Special Projects include:

ASD Specialization - Psychological Services helps assess and identify students who display traits associated with ASD. This involves specialized assessment using such instruments as the ADOS II, ASRS, observation, and acquiring information from parents and school staff. These assessments are undertaken within the framework of a multidisciplinary team. Residents will work closely with professionals from Speech and Language, Occupational Therapy, and members of the TDSB ASD team.

Strength Based Resilience Initiative (Positive Psychology) – Residents will work with specially trained staff to train teachers and students to lead more optimistic and resilient lives. The program includes helping participants to identify and build on their own character strengths, values, and positive actions.

Caring and Safe Schools – Several settings are provided to accommodate students whose disruptive behavior, aggression, and noncompliance result in suspension or expulsion. Assessments, clinical interventions, and support with transitions, are undertaken within the framework of a multidisciplinary team (including social workers,

teachers, and child and youth workers). Residents will work closely with psychological service providers and other staff from Caring and Safe Schools.

Supervisors: Carolyn Lennox Ph.D., C.Psych., David Schwartzbein Ph.D., C.Psych., Laura Mahoney Ph.D., C.Psych.

Toronto Catholic District School Board (TCDSB)

Psychological Services staff at the TCDSB are assigned to specific schools (elementary and secondary) and are members of each school's interdisciplinary team which also includes Social Workers, Speech-Language Pathologists, Assessment and Programming Teachers, the school Principal and appropriate school staff.

At the TCDSB, psychological service provision is based on a multi-tiered prevention/intervention model, whereby the intensity of supports and the levels of interventions are provided based on need. At the primary (Tier 1) level, consultative support and broad scale universal preventative and proactive interventions are provided to entire schools or classrooms. These may include whole class prevention programs, as well as the provision of professional development and training (to teachers, guidance counselors, school administrators and support staff) on topics such as, e.g. mental health, special education needs of students with disabilities, classroom behaviour management, etc. At the secondary (Tier 2) level, targeted prevention and intervention is provided to at-risk groups or individuals. These may include the provision of needs-based group intervention (e.g., anxiety reduction, anger management, social skills development), focused consultation to teachers and school staff, crisis response, and involvement in threat and risk assessment teams. At the tertiary (Tier 3) level, intensive intervention and remediation efforts are tailored to individuals with significant needs. These may include psychological assessment, development of positive behaviour support plans and safety plans, behavioural assessment and programming, participation on specialized support teams (e.g., autism team, alternative education team), implementation and evaluation of individualized programs, and provision of individual counseling and treatment.

Residency opportunities are available at all levels. Supervision is provided by psychologists with declared competency in School Psychology (and potentially in Counselling, and/or Clinical Psychology). The following Major School Psychology Rotations and special projects are available:

Major School Psychology Rotation: Elementary and Secondary School Psychology Rotation (TCDSB)

In this rotation, residents will receive assignments to one Elementary and one Secondary School. Within each of these schools, they will work alongside a Psychologist, and will complete the following professional activities: conduct teacher focused consultations, participate in the school's interdisciplinary team meetings and case conferences, provide professional development presentations to school staff or parents, conduct full psychological assessments, write reports (tailored to address the needs of parents and the school system), work with classroom teachers and special education teachers to translate assessment findings to Individual Education Plans (IEP) for students, present at Identification, Placement and Review Committee meetings, provide intervention/counseling.

Other opportunities for residents may include: Participating in our annual student-lead mental health awareness initiative ("Stop the Stigma") offered in secondary and some elementary schools, providing crisis intervention, working with other professionals to run intervention groups (e.g. social skills, cognitive-behavioural groups).

In addition, residents will be invited to participate in professional development activities/events organized regularly for the members of the TCDSB Psychological Services Department.

Special Projects:

There are a variety of other types of services within the TCDSB that are supported and/or led by Psychological Services, such as providing and overseeing school-wide and board-wide mental health initiatives (e.g. the annual student mental health conference), providing classroom based mental health prevention programs, involvement in program design and implementation for students with special education needs, participating in evaluation of new and/or existing intervention programs, etc. These services are provided in a collaborative interdisciplinary context and may not be tied to a specific school. Residents may choose to participate in one or more of these services.

In addition to the above, there are specialized services provided by Psychological Services staff to support students with complex needs. Involvement in such services will allow for the opportunity to gain experience and develop skills in working with students with specific needs or disabilities. Residents may participate in interdisciplinary teams servicing the Autism Programs (system wide); the Alternative Secondary School Program (which provides support to students aged 16 to 21); and the Alternative Program for students who have been expelled from elementary or secondary school due to struggles with noncompliance, aggression, and disruptive behavior. Residents will have an opportunity to gain experience in consultation to teachers, support staff,

and parents; conducting psychological, social-emotional, or behavioural assessment, counselling and/or intervention, depending on the presenting need; and liaising with service providers in the community (e.g., hospitals, mental health agencies, juvenile justice system, etc.).

Residents will work with their primary supervisor to select and organize participation in one or more of these specialized services over the year, depending on each resident's interest and training goals and the opportunities available. Students may be involved with a secondary supervisor while in these special team placements.

Supervisor: Dr. Joseph Mirabella, Ph.D., C. Psych.

Major Child and Adolescent Clinical Psychology Rotations

Integra Program, CDI

The Integra Program rotation includes three primary areas of focus: (1) providing evidence-informed individual, family and group therapy for children and youth ages 8 to 18 years who have Learning Disabilities/Mental Health challenges (LDMH); (2) providing psychological consultation to clients and Integra clinical staff; and (3) participating in research and program evaluation of our clinical, innovative interventions. The composition of the caseload and clinical activities are tailored to the resident's learning goals.

LDMH Informed Interventions:

Typically, residents carry individual therapy cases and have an opportunity to conduct family therapy. Residents co-lead groups, which may include the Integra Social Competence Group program, Integra Mindfulness Martial Arts, Integra Young Warriors,

or the Triple P Positive Parenting Program. Residents are considered as part of the Integra clinical team, and work directly and collaboratively with Child and Family therapists (social workers, psychotherapists).

Psychological Consultations:

Integra's Psychology department has a central role in our Assessment and Consultation Clinic. Admission to Integra requires that clients have a completed psychological assessment and a documented Learning Disability. Unique to Integra, clients are first seen in a two-part clinic that includes an opportunity for the parents/guardians to meet with the psychologist or psychology resident and the Clinic therapist to understand the

implications of the psychology assessment report findings for everyday life and for mental health services. Residents work closely with the Integra Psychologist and when ready, take on a regular consultation clinic of their own each week. Residents typically are not expected to complete a comprehensive psychological assessment although there may be opportunities for the resident to supervise a psychology practicum student. There may be opportunities for the resident to participate in CDI consultations to other departments across the agency, including Childcare Consultations and consultations to the Section 23 classroom. In May and June, residents may be involved in consultations for the Towhee Summer Residential Program.

Research & Learning Opportunities:

Residents are encouraged to select a research or program evaluation project of their interest. All of the innovative Integra clinical services are evaluated, and residents are supported by the Integra Research Manager (Dr. Ashley Morgan) and the CDI Director of Program Development, Research, and Quality Improvement (Dr. Samantha Yamada) to participate in their preferred area of interest. For example, this has included any or all of the stages of evaluation, including: working with the clinical team to define and operationalize research questions, reviewing the literature, designing an evaluation or study, selecting measures, implementing a study, and analyzing and writing up the results for publication.

As a member of the Integra Clinical Team, residents attend monthly professional development in-services, clinical case conferences, and team/staff meetings. There are also opportunities to become involved in our Community Education and Engagement Program (this program provides training and public education about Learning Disabilities and Mental Health Challenges)

Supervision training for residents

During the second half of the year, residents will have the opportunity to supervise a junior student (for example, a co-leader of the Social Competence ACES group program).

Supervisor: Jen Scully, Ph.D., C.Psych.

Broadview Psychology DBT Program

Clinical Opportunities at Broadview Psychology:

Residents will work within a dynamic, stimulating, and supportive team to provide empirically based treatment (e.g. CBT, DBT) to clients between the ages of 6 and 23

who have problems related to emotional and behavioural regulation. Broadview Psychology specializes in providing comprehensive and adherent outpatient DBT to clients and their families. DBT aims to help clients to improve their ability to be mindful of, tolerate and cope with difficult emotions, relationships and situations. Residents will have the opportunity to provide the following DBT services:

- DBT assessment and case formulation of children, adolescents, and/or young adults
- DBT skills groups (co-facilitated) for children, adolescents, young adults, and/or parents
- DBT individual therapy for children, adolescents and/or young adults
- DBT phone and text coaching with children, adolescents and/or young adults
- DBT parent and/or family therapy

Educational Opportunities:

Residents will have the opportunity to receive considerable training while at Broadview Psychology as this is an important component of the clinic. They will participate in a series of 9 training sessions on providing DBT to adolescents and families (total of 27 hours). Residents

will participate in training or attend consultation sessions that are provided to the team at Broadview Psychology on a regular basis by Broadview psychologists, or by external psychologists. Trainings and consultations often relate to the treatment of BPD, self harm, suicidality, eating disorders, addictions, OCD, and PTSD, and are provided by clinicians skilled in the use of DBT, CBT or ACT. Residents will take part in weekly DBT consultation team meetings at which they will receive consultation from and provide consultation to team members. Finally, Residents will also have the opportunity to learn from clients who share their experiences in treatment at recovery evenings.

Research Opportunities:

Residents will contribute to the program evaluation of Broadview Psychology's clinical services. They will select a project in which they engage in a process or summative evaluation of an aspect of the DBT program for children, adolescents and/or parents.

Supervision training for residents:

Residents will have the opportunity to supervise a graduate student or a behaviour therapy student during the second half of the year.

Supervisors:

Christine Sloss, Ph.D., C.Psych Michele Locke, Ph.D., C.Psych
Christine Klinkhoff, Psy.D., C.Psych, Dr. Carmen Lalonde Psy.D.

OISE Psychology Clinic

Program:

Through the OISE Psychology Clinic, services are offered for children, youth and families that experience a wide range of presenting concerns, ranging from anxiety and depression to trauma and behavioural concerns, learning difficulties, as well as other problems such as disrupted family dynamics. The Clinic supports families from diverse backgrounds. Psychological testing, clinical assessment and therapeutic interventions are delivered for children and youth, ages ranging from 4 to emerging adults.

Psychological Consultation and Intervention:

Residents will carry a caseload of short and long-term psychotherapy clients (play therapy, individual therapy, family therapy, dyadic therapy and parent guidance). All therapy referrals will begin with an initial consultation and assessment process. This initial phase will consist of meeting with the child/youth and parents/guardian as appropriate, as well as connecting with other collateral sources. An emphasis will be given to supporting residents in establishing a therapeutic alliance with the clients, “meeting them where they are at”, as well as developing a bio-psychosocial formulation that will dictate, in collaboration with the clients, the treatment goals and recommendations. The treatment approach will be guided by evidence based practices, with a solid foundation on relational/attachment informed psychotherapy, while integrating CBT and DBT as well. In line with the clinic’s focus on the delivery of evidenced based treatments, students will also become familiarized with general trends in psychotherapy processes, particularly with regards to the selection and implementation of various outcome and psychotherapy experience measures, which will be implemented during the course of the treatments.

Psycho-educational/Comprehensive testing:

Residents will also carry a small number of comprehensive testing cases. Most of the testing cases will focus on evaluating a child/youth’s cognitive functioning as well as on the socio-emotional dimension. Emphasis will be given to the integration of the results derived from relevant interviews with parents, child/youth and other professionals as appropriate, testing data (cognitive/learning/social emotional including projectives) that would support the development of a formulation and appropriate recommendations. There will be an emphasis on therapeutic approaches to assessment and feedback as well on developing specific clinical competencies to increase parents and young client’s adherence to treatment

recommendations.

Supervision training for residents:

Residents will have the opportunity to supervise a junior graduate student during the second half of the year with a focus on learning about supervision theories and competencies.

Research/Special Projects:

Depending on scheduling demands, residents may be able to participate in a project involving consultations to a Northern community, led by Dr. Todd Cunningham. This project consists of implementing consultations via tele-psychology to teachers. The project also includes an actual visit to the Northern site close to the end of the project. Weekly supervision will be offered to the students as well.

Other training opportunities

Although there are not research opportunities associated with this placement, students should be aware that the OISE Psychology Clinic is located within the Department of Applied Psychology and Human Development, one of the largest group of developmental and clinical psychologists in Canada. Faculty are involved in many aspects of the running of the clinic and residents would be able to connect with faculty about their research and potential opportunities if they so desired.

Primary Supervisor:

Mariana Wainer, Psy.D., C.Psych.

Oshawa Psychological & Counselling Services (OPCS)

Residents in Clinical Child will be placed in our Low Fee Clinical Service /Training Clinic. The intent of the program is to offer a low fee alternative to the community for individuals who otherwise may not be able to afford the service of a psychologist, as well as to offer clinical training to advance students in Clinical Child Psychology programs. Similar to the full fee private practice service, the clinical nature of services offered resembles an outpatient mental health clinic, serving diverse client populations with a wide range of complex clinical presentations including neurodevelopmental issues, anxiety, mood and behaviour disturbances, self-harm, trauma, and significant relational distress such as bullying and family conflicts. The program is supported by registered psychologists who are seasoned practitioners and experienced supervisors.

Psychotherapeutic Interventions and Consultations

Under the supervision of the supervising psychologist, the services offered through the Low Fee Training Clinic include: session-limited Pro Bono consultation service to clients; a low fee psychological service in psychological assessment and intervention including individual therapy with children and adolescents from age 4 to emerging adulthood; working with parents, doing parent/child dyadic work, and family therapy as well as opportunity in doing group work; and consultation and collaboration with other involved professionals from variety disciplines.

Residents will carry an active on-going treatment caseload. The training goals is focused on developing competencies in intervention including: intervention planning, intervention implementation, intervention evaluation, and practice management. At OPCS, we do not have a preferred clinical model of care. The emphasis, guided by evidence practice and current research in therapeutic process and outcome research, is on respecting the students' strength, style, and interest as the foundation to build and broaden their clinical capacities in best meeting clients' treatment need.

Clinicians at OPCS use a variety of therapeutic treatment modalities including approaches such as Emotion-Focused Therapy (EFT), Cognitive Behavioural Therapy (CBT), Dialectical Behavioural Therapy (DBT), Narrative Therapy, Object Relations, Brief Psychodynamic Therapy, Attachment Based Family Therapy, and Structural Family Therapy.

To further facilitate client active participation in the therapeutic processes and clinician's awareness of client progress, OPCS has been utilizing a secured web-based system for client post-session self-report clinical measures as a means of providing ongoing feedbacks.

In addition to direct client services, residents also have the opportunities for doing group work and/or offer Pro Bono workshops on a variety of topics such as stress management, parenting, and coping with ADHD.

Psychoeducational/Comprehensive Assessment:

Residents will carry a small number of comprehensive assessment cases. The training is focused on developing competencies in assessment with the emphasis given to identify specific learning process deficits and social emotional dynamics to facilitate the integration of assessment findings that would provide detail understanding of the nature of the presenting issue and the impact on functioning to inform recommendations for service intervention, treatment needs, and diagnostic conclusion. Assessment is about people. The clinical training in assessment is also focused on the communication of assessment findings as a means to facilitate understanding and compassion,

generation of hope, motivation for change, and drawing collaboration and cohesion among the child, parents, educators, and helping professionals.

Supervision Training for Residents:

Consultation to other mental health providers is part of the routine clinical work. Residents may also have the opportunity to supervise a junior graduate student during the second half of the residency. The training goal will focus on developing competency in consultation and supervision using a person-centered approach.

Research/Special Projects:

Depending on scheduling demands, residents may be able to participate in a research project currently in development.

Other Training Opportunities

As part of the large organization, Oshawa Psychotherapy Training Institute (OPTI), is our professional development training arm offering a wide ranging of training workshops to mental health professionals in topics such as CBT, DBT, EFT, Couple and Family Therapy, and Mindfulness. Students can attend any of the workshops with a nominal fee of \$50.00 per workshop. For more information, please visit our website at www.oshawapsychotherapytraining.com.

Primary Supervisor: Kenneth Y. W. Kwan, Ph.D., RMFT, C.Psych. (for biographic information, please visit <http://www.oshawapsychologist.com>)

Youthdale Treatment Centres

Major Clinical Child Psychology Rotation

During the rotation at Youthdale Treatment Centres, residents complete comprehensive (i.e., psychoeducational as well as socio-emotional/personality) assessments, as well as more focally focused psychological assessments with children, teens, and transitional-aged youth, presenting with the most complex mental health, learning, and behavioural needs from a variety of settings (inpatient, residential, outpatient services); as such, Youthdale residents develop clinical assessment and diagnostic skills to provide psychological assessment services across a wide variety of settings (e.g., community mental health agencies, hospital settings, and private practice).

In terms of therapy, residents carry a regular case load of 2-3 individual therapy cases with each resident's caseload balanced between child, adolescent and transitional age

clients presenting with diverse clinical needs, either from Youthdale's outpatient service or residential treatment program. Therapy will incorporate psychodynamic, CBT and DBT models.

In addition, each resident carry a family therapy caseload of 1-2 therapy cases. These cases will be jointly supervised by Dr. Alissa Levy and a member of the Centre for Individual & Family Therapy (CIFT) team. Family therapy is from a predominantly systems perspective and follows the McMaster Family Therapy model. Residents will also participate in the CIFT teams bi-weekly family therapy seminar and supervision, together with Youthdale CIFT team and social work students. Details of this seminar (and other Youthdale educational opportunities) can be found in the EDUCATIONAL OPPORTUNITIES/DIDACTIC SEMINARS section of this brochure.

While providing the above outlined range of psychological assessment and treatment services, residents will have many opportunities to consult with a range of professional staff members, including psychiatrists, social workers/family therapists, CYWs, and mental health managers. At the beginning of the residency year, residents will observe a variety of inpatient and crisis service team meetings (i.e., inpatient: prioritization and clinical rounds; and crisis team shift change) as an orientation to Youthdale's inpatient and crisis services. Over the course of the residency, residents will have the opportunity to participate in consultations (including Plan of Care team meetings, individual psychiatric consultations and file reviews) to a variety of teams (inpatient, outpatient, day treatment programs).

Supervisor: Dr. Alissa Levy, Ph.D., C. Psych., Staff Psychologist

Didactic Program

Friday Afternoons (OISE)

On Friday afternoons all residents will come to OISE. During this time, residents will have didactic seminars or resident meetings with the Director of Training, participating in discussions of issues relating to professional practice in clinical psychology.

Summer Rotation (Clinical Sites)

Over the months of July and August, residents in the School-Clinical track will no longer be involved in their School Psychology rotations. During this time, residents will increase their clinical training experiences through transferring the balance of their hours to their clinical sites thereby expanding clinical work at their community settings. As well, there may be some clinical or research opportunities at other clinical sites or through the OISE Psychology Clinic.

At a minimum, 25% of residents' time will be spent in the provision of direct face-to-face of psychological services to clients. Direct time will not exceed two thirds of training time.

Residency Program: Adult Track

Residents in the Clinical – Counselling Psychology position will be assigned to a part-time major rotation at Ryerson University Centre for Student Development and Counselling and part-time to a half-time major rotation at the York University Psychology Clinic (YUPC). In addition, they will have spend one half-day per week at OISE from September to August.

Rotation	Days/week	Months	Location	Description
Major Clinical /Counselling Psychology	2 days-2.5 days	Sept. – Aug	CSDC	See descriptions in the body of the brochure.
Major Clinical/Counselling Psychology	2 days-2.5 days	Sept. – Aug	YUPC	See descriptions in the body of the brochure.
Major Clinical Psychology	2 days-2.5 days	Sept.- Aug	Broadview	See descriptions in the body of the brochure.
Seminars/Resident Meetings	.5 days Friday afternoons	Sept. – Aug.	OISE	Didactic seminars, professional development, resident meetings

Overview of Adult Clinical/Counselling and Neuropsychology/Health Rotations

Major Clinical/Counselling Rotations

Please note that during the COVID pandemic or future waves, clinical services and training programs at all sites may be adjusted in line with infection prevention and control advisories from Public Health and the Ministry of Health.

Ryerson University Centre for Student Development and Counselling

The CSDC offers a range of short-term evidence-based treatments. This residency will focus on training for both individual and group treatments as well as on knowledge of current clinical research on best practices and new developments in treatment approaches.

Assessment occurs through our semi-structured initial consultation appointments, structured suicide risk assessments, and ongoing monitoring and assessment of client symptoms and progress through client self-report. Recognition of the developmental stage of the majority of our clients (late adolescents and young adults) is integral to assessment, treatment and therapeutic alliance, as is understanding of their cultural background, gender and any other relevant factors. Considerable attention is given to lifestyle changes, coping skills and adjustment issues within the context of specific disorders. Residents will have an exciting opportunity to work with an exceptionally diverse student body as our students come from a broad range of cultures, and present to the CSDC with a broad range of diagnostic issues.

Description of Training Activities:

Individual Therapy Training Rotation:

CBT Rotation: Training will focus on diagnosis, formulating a CBT collaborative case conceptualization incorporating predisposing and protective factors, using standard CBT session structure, forming and sustaining a positive therapeutic alliance, and following standard CBT treatment protocols for a wide range of disorders: Anxiety Disorders, Depressive Disorders, Insomnia (within the context of Depression), IBS, OCD Spectrum Disorders, and PTSD. We also provide short-term treatment for relationship issues, adjustment difficulties, dealing with family break up, grief, and loss. As adjunct to these protocols, there will be considerable emphasis on strengths-based CBT and integration of

the development of a personal model of resilience into appropriate cases. Training in crisis intervention skills and suicide risk assessment training and intervention is incorporated into client case management, as appropriate. Supervision is conducted from a developmental framework. Methods of supervision include discussion of cases, listening to audio recordings of sessions together, loan of DVDs by master clinicians, and co-therapy as appropriate. Techniques of supervision include: modeling, role-plays and role rehearsal.

Emotion Focused Therapy (EFT) Rotation:

Training in EFT will take into account each resident's unique developmental needs for the effective use of emotion focused therapy. Skill development will begin with review of verbal and nonverbal communication skills and empathic attunement underlying therapeutic presence as a foundation for building rapport and trust. Skill development will progress through exposure to relevant emotion theory and its application to practice, alongside development of competence in a range of marker-driven emotion focused therapy interventions including empathic attunement, promotion of affective experience, reprocessing tasks, and use of emotion to transform emotion through evocative tasks. Concurrently, residents will be exposed to concepts of process diagnosis and case conceptualization within an EFT framework. Residents may expect to work with individual clients presenting with a range of anxiety and mood disorder symptoms.

Interested residents may request to co-facilitate an EFT group with a focus on the use of two-chair tasks to resolve self-critical splits. Training in crisis intervention skills and suicide risk assessment is incorporated into client case management, as appropriate. Methods of supervision include completion of assigned independent reading and review of selected APA DVDs, experiential and self-reflective learning, collaborative review of resident's audio recorded sessions, and discussion of cases.

Group Therapy Training Rotation:

Training in group therapy will focus on theory and practice of group therapy. Residents will be given the option of breadth (co-facilitating a wide range of groups) and/or the option of depth (focusing on a specific protocol for one or two disorders and co-facilitating several groups for that population). Opportunities to co-facilitate groups with your group therapy supervisor or another clinical psychologist include: CBT for depression, generalized anxiety, social anxiety, or panic disorder. Interested residents may request to co-facilitate an EFT group with focus on the use of two-chair tasks to resolve self-critical splits. Additional therapy groups offered by the CSDC include: mindfulness meditation for stress reduction, relationship lab: learning dating and couples skills, family relationships, tame your critic, facing loss, sexual violence support group and support group for eating disorders. A complete listing of current therapy programs may be viewed at the CSDC website at www.ryerson.ca/counselling.

***For 2021-22 all rotations will be offered (CBT, EFT and Group Therapy Rotations) with one position focusing on CBT, the other on EFT.**

Rotation goals

Residents will:

- develop competence in delivering evidence-based psychotherapy, delivering both individual CBT , EFT and group therapy to diverse clients with a wide range of presenting issues/disorders.
- consolidate their training in suicide risk assessment and crisis intervention, and increase awareness of ethical dilemmas as they pertain to these issues, develop group facilitation skills for a wide range of presenting issues/disorders using evidence based interventions
- acquire basic motivational interviewing skills
- refine their documentation skills, and enhance their identities as professionals in the field of clinical psychology

Supervisors:

Dr. Andrea Martin, C. Psych. andreamartin@ryerson.ca

Dr. Jesmen Mendoza, C. Psych. j5mendoz@ryerson.ca

York University Psychology Clinic

The YUPC rotation will be primarily affiliated with the Clinical training program and focus on intervention with adult clients who range in age, ethnicity and type of presenting problem. The Clinical doctoral program at York University provides in-depth training in evidence-based intervention strategies that are informed by a humanistic psychotherapy treatment model. Given the increased understanding of the importance of emotional processes in therapeutic change, the program provides a unique training opportunity that focuses on working directly with emotions in therapy. In particular, clinical psychology residents will receive in-depth training and supervision in an integrative, Emotion-focused therapy (EFT) treatment approach that highlights the importance of facilitating narrative, emotion, and new meaning making processes when working with a range of client presenting problems such as MDD, GAD, social anxiety and complex trauma. In addition, opportunities for comprehensive psychological assessment training experiences will be provided tailored to the resident's interests and building upon previous experience with clinical testing of issues related to cognitive, academic and emotional problems.

Rotation Goals:

By the end of the rotation, goals for our residents include:

- Increased understanding of emotional change principles.
- Increased competency in psychopathology assessment; case formulation and EFT interventions.
- Increased knowledge about professional and ethical issues related specifically to working in a setting similar to a group private practice.

Primary Supervisor: Sandra Paivio, Ph.D., C.Psych.

Contact: lhartley@yorku.ca

Broadview Psychology

Broadview Psychology is a family focused and team based private clinic in central Toronto and Stouffville that provides DBT, CBT, ACT and EFT treatment to children, adolescents, parents, families, adults, and couples with diverse challenges. Its team consists of psychologists, social workers, post-docs, graduate students, behaviour therapists, a dietician and admin staff. Broadview Psychology specializes in treating transdiagnostic clients who have problems in regulating their emotions and behaviour through comprehensive and adherent outpatient DBT. Broadview offers separate DBT programs for children, young adolescents, older adolescents, young adults and adults. Broadview Psychology associates work closely together as a team to provide a wide range of services to clients as well as to their family members, including individual, group, parent, family and sibling therapy, as well as phone/text coaching, educational and career coaching, and exposure therapy.

<http://www.broadviewpsychology.com/>

Rotation goals

Residents will:

- develop competence in assessment and conceptualization skills within a DBT framework
- develop competence in delivering DBT to youth and adults through individual therapy, phone/text coaching, and group skills training.
- develop comfort in involving family members in the assessment and treatment process as appropriate

- increase competence in conducting psychoeducation and psychodiagnostic assessments with youth and adults.

Description of Training Activities:

Young Adult / Adult Therapy Training Rotation:

Residents will receive considerable DBT training and supervision in conceptualization, assessment, treatment planning, and intervention. Residents will provide 8 to 11 months of individual DBT treatment plus phone/text coaching to young adults or adults. They will also co-facilitate a young adult or adult DBT skills group and/or a family member/parent DBT skills group. Residents will participate in a weekly DBT consultation team where they will contribute through asking consultation questions, providing consultation to others, and presenting / leading. While working at Broadview Psychology, residents may also take on shorter term clients or groups using a CBT/ACT framework and work with adolescent clients (should this be a training goal). Finally, residents will have the opportunity to complete psychoeducational or psychodiagnostic assessments with adolescents, young adults or adults.

Main contact:

Christine Sloss, Ph.D. C.Psych. drsloss@broadviewpsychology.com

Supervision provided by Dr. Sloss or other psychologists, depending on fit.

Major Neuropsychology/Health Rotations

University Health Network: UHN Rotations (on hiatus for 2021-22)

PRINCESS MARGARET CANCER CENTER: – Psychosocial Oncology and Palliative Care (POPC)

The Princess Margaret Psychosocial Oncology team provides clinical care to patients and their families as they cope with the diagnosis and treatment of cancer. As an interdisciplinary team we assess and treat emotional and functional symptoms such as, depression, anxiety, trauma, fatigue, and pain. This assistance extends to planning advanced care for those who are managing progressive disease.

As a resident, you will have the opportunity to work with a variety of oncology patients of various ages and disease diagnoses at all stages of the disease trajectory. Within this rotation, you will focus on the assessment and intervention of health-related psychosocial issues related to adjusting to diagnosis, treatment decision making, coping with survivorship concerns, and accepting end of life. You will have the opportunity to provide both individual and couples therapy (including sex therapy). You will have the

opportunity to participate in multidisciplinary rounds with oncology, psychiatry, psychology and social work. Specific Clinics involved in your rotation include a sexual rehabilitation clinic for couples, an adolescent and young adult psychosocial clinic, a survivorship consult clinic and a clinic for patients with urologic cancer (testicular, prostate, bladder, and kidney).

A resident's typical experience in this rotation comprises: One full day of clinical service provision including screening, assessment, and treatment; and one full day of supervision and training including individual and group supervision, and a variety of hospital-based clinical/research multidisciplinary rounds. A variety of research is also currently being conducted within our group including: impact of the late effects of cancer and cancer treatment on psychosocial development; transition from paediatric to adult health care; and health-related quality of life and survivorship in cancer patients. Residents are welcome to consider joining these research projects.

Contact Psychologists:

Andrew G. Matthew, Ph.D. C.Psych. Andrew.matthew@uhn.ca

Norma D'agostino, Ph.D. C.Psych. norma.d'agostino@uhn.ca

TORONTO REHAB – Neuropsychology, Rumsey Site. (on hiatus for 2021-22)

The resident in this rotation will serve as an integral member of our interprofessional rehabilitation team consisting of neuropsychology, social work, occupational therapy, physiotherapy, speech language therapy and psychiatry services. This team offers assessment, consultation, treatment and education to individuals with acquired brain injuries. We help those with a brain injury work towards returning to work, school and to living more independently. Our inter-professional team works with patients and their families to help them meet their rehab needs and goals.

As a resident in this rotation you will be working with adult outpatients that have experienced a wide range of acquired brain injuries (e.g., traumatic brain injury, stroke, multiple sclerosis, anoxic brain injury, tumours, epilepsy, infectious illness, etc.) You will be conducting neuropsychological assessments with these patients and providing feedback to patients, family members and the interdisciplinary team as well as providing psycho-education and making treatment recommendations. Residents will have the opportunity to work within an interdisciplinary team model and attend rounds for the various patient streams (i.e., Acquired Brain Injury/ABI, Multiple Sclerosis/MS, and Stroke). Residents are also welcome and encouraged to attend various other

educational offerings (e.g., Brain Injury Education Series, journal clubs, IPE placements, etc.) and participate in research that may be ongoing.

Contact Psychologist:

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

TORONTO REHAB – Spinal Cord Rehab, Lyndhurst Site. (on hiatus for 2021-22)

The Spinal Cord Rehabilitation Program offers both inpatient and outpatient services for individuals who have sustained either a traumatic or non-traumatic spinal cord injury. Outpatient therapy and specialty clinics are designed to address any concerns our clients may have relating to their independence and overall health, while the inpatient program is designed to be a short-term rehabilitation program and is intended to help patients maximize independence and functional status in preparation for their return to the community. It is an adult program for patients 16 years of age and older. An individualized and interdisciplinary rehabilitation program has been developed to address the specific needs of each patient admitted to the program. The interdisciplinary team consists of physiatrists, general practitioners, physiotherapists, occupational therapists, social workers, consulting psychiatrist, recreation therapists, nurses, speech language pathologists, respiratory therapists, and spiritual care.

As a resident in this rotation, you will be working with spinal cord injury patients in both the inpatient and outpatient setting. Residents will also have the opportunity to work with individuals who have sustained a spinal cord injury concurrent with a number of clinical conditions including acquired and traumatic brain injury, neurological disorders, psychiatric disorders, substance use disorders, and mild cognitive impairment. Clinical opportunities are available to conduct both clinical psychological and clinical neuropsychological assessments for individuals that have sustained both traumatic and non-traumatic spinal cord injuries. Residents will also have the opportunity to work within an interdisciplinary inpatient clinical team and actively participate in case conferences, as well as gain experience in the areas of health psychology and rehabilitation psychology. Clinical interventions including cognitive behavioral therapy interventions; mindfulness based intervention; behavioural medicine; interpersonal therapy, supportive counseling and cognitive remediation can also be part of the clinical training experience. In addition, residents will have an opportunity to provide group intervention, and to co-facilitate an outpatient community integration group program. Residents are assured diversity of experiences across the age span (young adult to geriatric) and cultural and socio-economic backgrounds. Residents will be supervised by two supervisors (Dr. McKay and Dr. Yao) within the rotation.

Contact Psychologists:

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

Christie Yao, Ph.D., C.Psych

christie.yao2@uhn.ca

Educational Opportunities/Didactic Seminars

There are a wide variety of educational experiences available to residents across the consortium sites. Each rotation includes educational and training activities, such as multidisciplinary case conferences and workshops. In addition, residents are encouraged to take advantage of a wide variety of other professional development activities including professional lectures, weekly grand rounds, workshops, seminars, and professional conferences. A partial list of opportunities available across sites is provided below.

Toronto District School Board (TDSB):

Workshops are held throughout the year, most often on Fridays, on topics relevant to the practice of school psychology. Topics in past years have included ADOS training, crisis intervention, CBT training, risk and threat assessment, advanced psychometric training, multi-disciplinary discussion of complex cases, etc. Opportunities are available to work with other professions (e.g., special education). Professional development/peer support meetings are scheduled throughout the year, every two or three weeks. Issues include quality assurance, group supervision, discussion of new measures, report writing group, etc.

Integra:

Integra actively promotes a culture of learning throughout the organization. Residents are encouraged to take advantage of Integra's rich professional development opportunities, which include monthly case consultations, clinical staff development in-services, webinars, team meetings, and workshops.

Broadview Psychology:

Residents will attend 14 training sessions on providing DBT to youth and families during

the first three months of their residency. Throughout the residency, they will participate in a weekly 2 hour DBT consultation meeting, in which team members consult, teach, model and learn from one another. Residents will also participate in periodic training or consultation sessions that are provided to the team at Broadview Psychology by Broadview psychologists, or by external psychologists. Trainings and consultations often relate to the treatment of BPD, self-harm, suicidality, eating disorders, substance use disorders, OCD, and PTSD, and are provided by clinicians skilled in the use of DBT, CBT or ACT. And finally, they will receive training through watching videotapes and webinars that the clinic owns to help clinicians with their education and development.

OISE:

There are monthly colloquia in the Applied Psychology Department at OISE on a variety of research and clinical topics in psychology that residents are welcome to attend. The ongoing half-day weekly resident meetings at OISE will include many topics relevant to the practice of psychology, with some seminars having external speakers and others with the DT and the resident group.

Oshawa Psychological & Counselling Services:

To support the overall clinical practice at OPCS as a whole, we have in-house clinical consultation/ training teams including DBT teams with Dr. Shelley McMain, EFT team with Dr. Jeanne Watson and Emotion Focused Skills Training (EFST) for Parents with Dr. Joanne Dolhanty. The group activities in these teams include didactic teaching and discussion with 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. Students are encouraged to join any one of the teams as desired and be an active member of the team.

Youthdale

Youthdale residents will participate in the CIFT teams bi-weekly seminar on the McMaster Family Therapy model, together with social work students/staff. Residents will also participate in bi-weekly group supervision with the CIFT team and social work students where clinicians and students present on active cases and discuss treatment issues. Dr. Levy will also offer some didactic sessions on assessing and treating youth with Autism Spectrum Disorders. Youthdale residents will also have the opportunity to participate in Youthdale's grand rounds seminars offered throughout the year and any additional training opportunities that are offered. Finally, residents will join Youthdale clinical staff at Youthdale's annual all-day spring conference, during which a variety of

speakers are invited to speak on current clinical issues that are determined to be of interest by Youthdale staff.

Ryerson CSDC

We offer a weekly, two hour seminar/group supervision for all trainees on (1) CBT theory and interventions, (2) EFT theory and interventions and (3) common factors relating to therapeutic alliance and empathy. Our residents attend weekly case management meetings and monthly professional development seminars offered to all CSDC staff.

UHN

Within each rotation, residents will be expected to attend mandatory patient rounds as well as didactic seminars. In addition, residents are encouraged to take advantage of a wide variety of other professional development activities including: interdisciplinary clinical teaching rounds; research rounds; weekly grand rounds; psychology team meetings; an education series for patients and families; as well as weekly and monthly journal club meetings.

YUPC

Being associated with and housed in an academic institution enables YUPC to provide a range of training and education activities throughout the residency year. There are monthly clinical rounds in which guest speakers present on a variety of therapeutic issues. In addition to these rounds, the resident will be offered the opportunity to attend similar rounds where the focus is on neuropsychology and health psychology topics, subspecialties with the York University Clinical Doctoral Program. YUPC also sponsors a number of continuing education programs to community-based professionals that the resident will have an opportunity to attend.

Supervision

Psychological services provided by the resident are supervised by supervisors who are registered, doctoral-level and experienced psychologists, registered within their jurisdiction of practice, and deemed competent to provide the kind of psychological service for which they are providing supervision. **Supervisors are clinically responsible for psychological services provided by the residents they are supervising.**

Residents will receive a minimum of 4 hours of supervision time per week, at least three which are in individual supervision, across all residency sites.

At the **TDSB**, supervision of residents will be provided by staff who are registered with the College of Psychologists of Ontario, who have an established record of supervision and mentoring, and who have breadth and depth in their understanding of school psychology. In school rotations, supervision will cover all aspects of professional school psychology, including: consultation; assessment and diagnosis; intervention; ethics and professional conduct; the multidisciplinary approach; respect for diversity; and use of evidence-based practice. Supervision will be provided by a primary supervisor for the major school-based rotation. A secondary supervisor may supervise the other projects, depending on the expertise required. At a minimum, residents will receive two hours per week of individual supervision from supervisors at TDSB.

At **Integra**, clinical supervision is highly valued for all clinical staff. Residents will receive weekly individual supervision with a psychologist. Residents will receive a combination of formal scheduled individual supervision (regularly scheduled one to two hours per week, live/video supervision), group supervision (approximately one hour per week) and informal supervision ('open door' policy for dropping in with questions, peer supervision). Residents will meet for peer supervision with child and family therapists, particularly in the context of co-leading groups.

Broadview Psychology places an emphasis on supervision and provides weekly supervision to all clinicians, not solely trainees. Residents will receive a minimum of 1 hour of weekly individual supervision with a registered psychologist, and 2 hours of weekly group consultation/supervision at DBT consultation team meetings. They will also receive supervision on an as needed basis with primary supervisors, co-facilitators of groups and with colleagues. Supervisors will be available at all times for emergency consultation. Supervision will occur through discussions of clinical, professional and ethical questions and issues, and the review of session recordings.

At the **OISE Psychology Clinic**, Dr. Wainer will act as primary supervisor. She has extensive experience working with children as young as 2-year-olds all the way to adulthood, as well as working with families. She has been supervising psychology trainees as well as inter-professional teams for many years. Dr. Wainer has extensive experience working with children, youth and families that present with a wide range of presenting problems, offering both assessments and intervention. During the course of supervision, an emphasis will be given to case conceptualization, treatment planning, implementation and treatment monitoring, the development of a therapeutic alliance, addressing therapeutic ruptures. An emphasis will be given to offering services while bearing in mind a culturally sensitive framework. Ethical issues and dilemmas will be addressed and discussed throughout the rotation.

Residents will receive direct in vivo supervision as well as supervision via video-recording the session. Residents will receive a minimum of 2 hours of supervision per week. Residents will also receive supervision from a secondary supervisor, at least one hour per week, and whenever appropriate, students will have a chance to participate in Dr. Todd Cunningham's Northern community consultation project, which includes weekly supervision.

In addition to individual supervision, weekly group supervision will be offered, as a way to maximize the experiential learning opportunity. Group supervision will be led with a case conference/seminar structure. Readings will be assigned at the beginning of the rotation as well as during the training year as a way to scaffold the training and competencies development. An emphasis will be given to relational/attachment approaches while keeping in mind an integrative perspective.

At OPCS we are committed to student/learner-centered values and place an emphasis on students' strength, resiliency, and collaboration. Keenly aware of the inherent power differential in supervision, to create a safe and open learning space for students to learn and grow is our responsibility as supervisors. The supervision is grounded on respecting the students' strength, style, and interest as the foundation to build and broaden their clinical capacities within the context of best meeting clients' clinical needs.

The resident will receive weekly 2-hour supervision with the primary supervisor. There is an "open-door" policy in which the student can contact the supervisor should the need arise as well as possibilities for in-session consultation, and co-therapy and clinical collaboration with the supervisor for complex cases. The supervision will include case presentation, case discussion and related literature, review of session recording, demonstration of intervention, and role plays. In addition to individual supervision, weekly group supervision will be offered, as a way to maximize the experiential case-based learning opportunity. Participants are expected to take turns in doing formal structured case presentations, engaging in discussions and role-plays.

At **Youthdale** residents will participate in the CIFT teams bi-weekly seminar on the McMaster Family Therapy model, together with social work students/staff. Residents will also participate in bi-weekly group supervision with the CIFT team and social work students where clinicians and students present on active cases and discuss treatment issues. Dr. Levy will also offer some didactic sessions on assessing and treating youth with Autism Spectrum Disorders. Youthdale residents will also have the opportunity to participate in Youthdale's grand rounds seminars offered throughout the year and any additional training opportunities that are offered. Finally, residents will join Youthdale clinical staff at Youthdale's annual all-day spring conference, during which a variety of

speakers are invited to speak on current clinical issues that are determined to be of interest by Youthdale staff.

At **CSDC**, for the individual CBT rotation, residents will participate in weekly individual and group supervision. Individual supervision includes a weekly review of cases, diagnostic clarification, case conceptualization, treatment planning, case management, discussion of ethical dilemmas, and discussion of professional practice issues as they arise. This also involves the supervisor periodically listening to the resident's audio recording of sessions and review and co-signing of all session notes, referral letters and reports. Group supervision occurs in the context of our weekly 2-hour micro-skills seminars; whereby residents and practicum students present cases as they pertain to the topic of the week.

For the Group Therapy rotation, supervision will include discussion of best practices within group therapy, review and preparation for each group session prior to each group, and discussion and debrief analysis after each group. Group dynamics, client progress, therapy interfering behaviours, etc. will be discussed and addressed. Session notes will be reviewed and co-signed by supervisor. Residents will initially observe and then will co-facilitate these therapy groups with their supervisor.

At **UHN**, supervision of residents will be provided by staff who are registered with the College of Psychologists of Ontario and who have an established record of both supervision and mentoring. At a minimum, residents will receive 4 hours per week of individual supervision across their rotations.

At **YUPC**, mirroring our client centred therapeutic approach; the supervision of our residents is done in an individual format focused on the preparation for independent, professional practice. A resident can expect to carry a case load of 5-8 clients and receive a minimum of 2 hrs. of weekly supervision provided by a registered psychologist that includes a review of their videotaped sessions and integrative discussions of didactic material relevant to each case.

Faculty

Name & Credentials	Title & Affiliation	Contact & Website	Clinical Interests

Norma D'agostino, Ph.D, C.Psych	Psychologist, UHN, Department of Psychiatry, U of T	norma.dagostino@uhn.ca www.uhn.ca www.ellicsr.ca	Pediatric cancer, adolescent and young adult oncology, health care transitions, cancer survivorship.
Louise Hartley, Ph.D, C.Psych	Director, YUPC, York University	lhartley@yorku.ca 416.736.2100 x 30428 www.yorku.ca/yupc	
Kenneth Y.W. Kwan, Ph.D., RMFT, C.Psych.	Executive Director/Chief Psychologist Oshawa Psychological & Counselling Services	kkwan@oshawapsychologist.com P. 905.721.7723 www.oshawapsychologist.com	Therapeutic processes, relational repair, working with complex mental health cases including trauma, individual and family therapy, working with parents, learning processes and learning disability, ASD and ADHD
Alissa Levy, Ph.D, C.Psych.	Psychologist, Youthdale	Alissa.levy@youthdale.ca 416.3633751x2534 www.youthdale.ca	Mood and anxiety disorders, complex needs youth, comorbid diagnoses
Carolyn Lennox, Ph.D	Chief of Psych. Services, TDSB (SW)	carolyn.lennox@tdsb.on.ca 416.394.3904 www.tdsb.on.ca	
Michelle Locke, Ph.D., C. Psych	Program Leader of Adolescent DBT Program	drlocke@broadviewpsychology.com	Children, adolescents, parents and families, DBT/CBT, BPD, self harm, suicidality, emotional and behavioural dysregulation,

			trauma, relationship issues.
Martha McKay, Ph.D, C.Psych.	Neuropsychologist, UHN	martha.mckay@uhn.ca 416.597.3422 x 6223	Spinal cord injury, concurrent acquired/traumatic brain injury, adjustment to injury, mood and anxiety disorders, CBT, group treatment, community integration
Andrea Martin, Ph.D., C.Psych.	Psychologist, Practicum and Residency Coordinator	andreamartin@ryerson.ca 416.979.5000 x 6757	Mood and anxiety disorders, CBT/EFT
Jesmen Mendoza, Ph.D, C. Psych.	Psychologist, Ryerson	j5mendoz@ryerson.ca 416.979.5000 x 16630	Group therapy, CBT, forensic psychology
Joseph Mirabella Ph.D, C. Psych.	Chief Psychologist TCDSB	Joseph.mirabella@tcdsb.org 416.222.8282x2626 www.tcdsb.org	Children and youth with learning disabilities, prevention and intervention programs in schools.

Sandra Paivio, Ph.D, C.Psych.	Clinical Adjunct Faculty Member, York University	www.yorku.ca/yupc	Process-outcome research, trauma, role of emotion in therapy, treatment development and evaluation.
Lesley Ruttan, Ph.D, C.Psych.	Neuropsychologist, Toronto Rehab/UHN	lesley.ruttan@uhn.ca	Acquired brain injury; traumatic brain injury; post concussive syndrome; CBT/GMT/mindfuln ess meditation interventions.
Jenifer Scully Ph.D, C.Psych.	Psychologist. Integra Program CDI	jscully@childdevelop.ca 416.603-1827 x 5240 www.childdevelop.ca/programs/integra-program	Learning Disabilities & mental health, emotion regulation, emotion focused family therapy, parenting
David Schwartzbein, P h.D, C.Psych.	Chief of Psych. Services, TDSB (D)	david.schwartzbein@tdsb.on.ca 416.459.0901 www.tdsb.on.ca	
Christine Sloss, Ph.D.,C.Psych.	Director of Broadview Psychology	drsloss@broadviewpsychology.com	Children, adolescents, adults, families and couples, DBT/CBT, parent and family therapy, emotional and behavioural dysregulation, BPD, self harm, suicidality, problematic eating, mood and anxiety disorders, OCD,

			substance use, trauma, relationship issues.
Mariana Wainer, Ph.D, C.Psych.	Psychologist, OISE/UT	mariana.wainer@utoronto.ca	Relational problems, attachment disorders, attachment-based treatment modalities and the movement of integrative psychotherapy
Christie Yao Ph.D, C.Psych.	Neuropsychologist, Toronto Rehab/UHN	Christie.yao2@uhn.ca 416.597.3422x6272	Spinal cord injury; traumatic brain injury; concussion; CBT for mood, anxiety and insomnia; IPT for depression.
Debby Zweig, Ph.D, C.Psych.	Director, TARC OISE, U of T	debby.zweig@utoronto.ca 416.978.1964	Anxiety disorders, OCD in children, youth & adults.

Evaluation

Each student is evaluated by their primary supervisor for each major and minor rotation. Written evaluations are conducted at the midpoint and end of each rotation. Residents receive a formal, written evaluation of their clinical skills and performance at the midpoint (sixth month) and end (twelfth month) of the residency year. It is expected by the end of the residency that residents are rated on all items within the top three categories. These evaluations are reviewed with the resident and rotation supervisor and are then

sent to the Director of Training (DT) to be reviewed. Residents also complete written evaluations for each supervisor in each of their rotations, at the end of their rotations. Residents are encouraged to provide feedback on the quality of supervision, the time commitments involved in the rotation, the balance between direct and indirect hours, and other aspects of the rotation experience. The DT is responsible for communicating with the resident's home academic institution regarding the residents' progress. Written feedback is sent to the home institution at the midpoint and at the time of completion of the residency.

Salary

Residents will receive a salary of \$35,000. Residents will receive three weeks of vacation. In the case of the school rotation placements, holidays must be taken in December 2020 (2 weeks) and March 2021 (1 week). In the case of community rotation placements, residents can take their vacation as coordinated with their placements.

Requirements

Eligibility/Minimum application requirements (Academic)

Applicants must be enrolled in a CPA or an APA accredited professional psychology doctoral program (Clinical, Counselling or School-Clinical) or its equivalent. Minimum requirements include:

- Applicants must be enrolled in a CPA or an APA accredited professional psychology doctoral program (Clinical, Counselling or School-Clinical) or its equivalent,
- 600 hours of practicum experience, with both assessment and intervention experience required,
- Completion of all requirements for the doctoral degree except for the dissertation.

Eligibility/Minimum application requirements (Non-Academic)

All residents must hold Professional Liability Insurance during the full course of their residency training. Proof of liability insurance coverage will need to be demonstrated prior to beginning the residency. Residents must also meet the specific eligibility

requirements of their training sites such as Police Checks (VSS) and updated immunizations.

Residents in the School-Clinical Track must also have the following:

- 1) A Master's degree
- 2) A car license by the time of interviewing and access to a car during the residency year.

Application Process

We are CPA- accredited and our residency training program adherences to CPA standards and criteria. We are also members of the Canadian Council for Professional Programs in Psychology (CCPPP) and the Association of Psychology Post-Doctoral and Residency Centers (APPIC). We participate in the APPIC Matching Program, abiding by all APPIC guidelines regarding the residency application and selection process.

Canadian immigration policy requires that suitable Canadian Citizen and Permanent Resident applicants must be given preference; international students with valid Canadian Co-op Work Permits will be considered and may apply.

Application Procedure

Application procedures involve submission of each the following using the AAPI Online:

- Cover letter
- APPIC Application for Psychology Residency (AAPI)
- APPIC Academic Program's Verification of Residency Eligibility and Readiness
- A summary of practicum hours
- Curriculum Vitae
- Graduate transcripts
- Three letters of reference. Please note, the Consortium may contact referees directly for further information.

* Please note that we require *no supplemental material* to be sent with the application.

**** If you had placements and / or requirements that were negatively impacted by the COVID-19 pandemic, please request that your Director of Clinical Training highlight the nature of this impact in their portion of the APPIC application. If you had placements that were cancelled or prematurely terminated, please describe**

the training and hours that were anticipated in your cover letter. In the event that your hours fall short of the minimal requirements due to COVID-19, this shortfall will be taken into consideration.

Rotation Selection Process for the School-Clinical Positions

Students in the Child Track apply to the consortium, not to specific rotations. Once invited to interview, and prior to the actual interview, candidates for the School-Clinical positions will be asked about their preferences for Major rotations. This will inform the interview process and better match applicants with interviewing faculty. Once matched, incoming residents will be asked for their final preferences. Consortium Committee members will take into account the preferences of the selected candidates as well as site-specific criteria in order to assign residents to their final individualized year-long training rotations. While many practical factors are taken into consideration during this process, resident interest, preference and the need to ensure that all residents have a broad-based clinical experience are important influences in the formation of the final schedule. All efforts are made to ensure that residents' interests and needs are met for their Major Rotation selections. We attempt to offer residents one of their top two choices of rotations, but cannot guarantee this.

***Note:** For two of the six School-Clinical positions, preference will be given to qualifying OISE applicants.

Please use these program numbers when applying to the Toronto Consortium:

- **186311** School-Clinical Residency (6) *
- **186313** Clinical Psychology Residency (2)

***Note:** For two of the six School-Clinical positions, preference will be given to qualifying OISE applicants.

The application deadline is: **October 31, 2020, 11:59pm.**

***Note: All interviews in January 2021 will be done virtually.**

Contact Information

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Toll free (in Canada): 1-888-472-0657

<http://www.cpa.ca>