

# Toronto Area Residency Consortium (TARC) in School, Clinical, Counselling & Health Psychology

Residency Brochure 2023 – 2024



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 psychology, hosted by OISE/University of Toronto, comprised of two tracks:

- Child Track (6 positions): School – Clinical Psychology
- Adult Track (3 positions): Two positions in Clinical-Counselling Psychology , one position in Health Psychology.

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

**TARC was first accredited by the Canadian Psychological Association in 2016/17 for a 5-year period ending in 2021/2022. We recently had a site visit in July, 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.

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## 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) Child Development Institute, LDMH Program
- (iv) Psychological and Counselling Services group (on hiatus for 2023-24)
- (v) Family Psychology Centre (FPC)
- (vi) Broadview Psychology

### Adult Track:

- (i) Toronto Metropolitan University Centre for Student Development and Counselling (CSDC)
- (ii) University Health Network
- (iii) York University Psychology Clinic
- (iv) Broadview Psychology

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.

TARC is strongly committed to providing a learning and training environment and culture built on the fundamental values of equity, diversity and inclusion. We value the diversity of the communities that we serve, the diversity of those offering psychological/psychotherapy services and supervision, and the importance of recognizing and respecting human differences and similarities.

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## 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

Three 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 Toronto Metropolitan 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 Toronto Metropolitan 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.

### **Health Psychology** (One position):

The resident will have two half-time rotations simultaneously in Psychosocial Oncology and Palliative Care at Princess Margaret Hospital and the Eating Disorder Program at Toronto general Hospital.

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.

## **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.

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## 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 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](#) is the largest school board in Canada, with approximately 265,000 students and 580 schools. Our 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. Staff at the Toronto District School Board (TDSB) work every day to support the uniqueness and diversity of students. We strive to make all students and staff feel welcome and accepted in their school so they can be successful and reach their full potential, regardless of their background or personal circumstances.

Working with families and school teams, Psychology staff support students by conducting comprehensive assessments, consulting with families, teachers, and administrators, providing individual and group counselling, as well as collaborating with community agencies to coordinate and provide pathways to support. The work of psychological services providers is consistently exciting and challenging, and offers opportunities for continued professional growth.



To learn more about the Department of Psychology and the initiatives psychology staff are involved in, see:

[Psychological Services](#)

[TDSB Mental Health & Well-Being](#)

[Autism Services](#)

[TDSB Psychology Hearts & Minds Newsletter](#)

<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>

### **Child Development Institute (CDI), LDMH Services (formerly Integra Program)**

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), LDMH Services, formerly '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).

LDMH Services at CDI is located in midtown Toronto (Yonge and Davisville). CDI 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). LDMH Services 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, LDMH 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 LDMH Services. Understanding a child's learning profile is central to the development of the mental health treatment plan within LDMH Services. Unique to our service, clinicians tailor evidence-based practice to the child's specific processing and regulation abilities and creates and evaluates innovative evidence-informed therapies (such as Mindfulness Martial Arts, Young Warriors, Social Competence ACES Group Program).

[www.childdevelop.ca/](http://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, career and exposure coaching, as well as assessments.

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

### **Psychological and Counselling Services Group (on hiatus for 2023-24)**

Psychological & Counselling Services Group (PCSG), 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 PCGS's commitments to the field of psychology in nurturing the next generation of psychologists. For that purpose, in 2008, PCGS 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. <https://www.psychologicalcounsellingservicesgroup.com/>

### **Family Psychology Centre**

Family Psychology Centre (FPC) is a full-service psychology practice for children, adolescents, young adults, and families. Clinical Psychology Residents have the opportunity to obtain intensive training in emotion focused therapies, family-based treatment, as well as wide range of other treatment approaches, including CBT, DBT, ACT, CFT and play therapy. As a clinical teaching site within the community, our team comprises four Supervising Psychologists, approximately ten psychology trainees at different levels of clinical practice— practicum, residency, and supervised practiced— as well as an interdisciplinary team, including Psychiatry, Social Work, Art Therapy, Psychotherapy, and Occupational Therapy. The clinical services that we offer include psychological consultation, assessment, individual therapy, separated and joint parent-child therapy, parent coaching sessions, and family-based therapy. We are also affiliated with the Emotion Transformation Research Lab, which coordinates the Emotion Focused Family Therapy workshop for parents and caregivers. EFFT provides tools, support, and skills practice for parents and caregivers looking to help their loved ones through emotional and behavioural problems, mental health challenges, and recovery from a range of clinical disorders.

Our clinic is conveniently located in Midtown Toronto and treats diverse populations. All of our services are back in-person but, if clinically appropriate, we do offer a variety of psychological services online through secure video, at the client's request. We receive referrals for youth of all ages as well as families from many backgrounds. Although we operate as a private practice, part of our mission is to provide accessible mental health care to our community and we do this through our Access FPC program, which offers low cost and pro bono services to hundreds of children and their families each year. <https://familypsychology.org>

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### **Consortium Partner Descriptions (Adult Track)**

## **Toronto Metropolitan University Centre for Student Development and Counselling (CSDC)**

Set in the heart of downtown Toronto, Toronto Metropolitan University is home to 36,000 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 and Academic Accommodation. The CSDC provides direct service to over 2,2000 students annually through individual therapy, group therapy, and psycho-educational workshops. The Department of Student Wellbeing is a multi-disciplinary team consisting of psychologists, social workers, registered psychotherapists, a health promotion nurse, psychiatrists and general practitioners

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

## **Broadview Psychology**

Broadview Psychology is a family focused and team based private clinic in central Toronto (Danforth and Broadview; Bloor and Bathurst) 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, career and exposure coaching, as well as assessments.

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

## **University Health Network**

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](http://www.yupc.org)

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### 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 CDI, Family Psychology Centre 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
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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: LDMH, CDI  Broadview FPC	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.

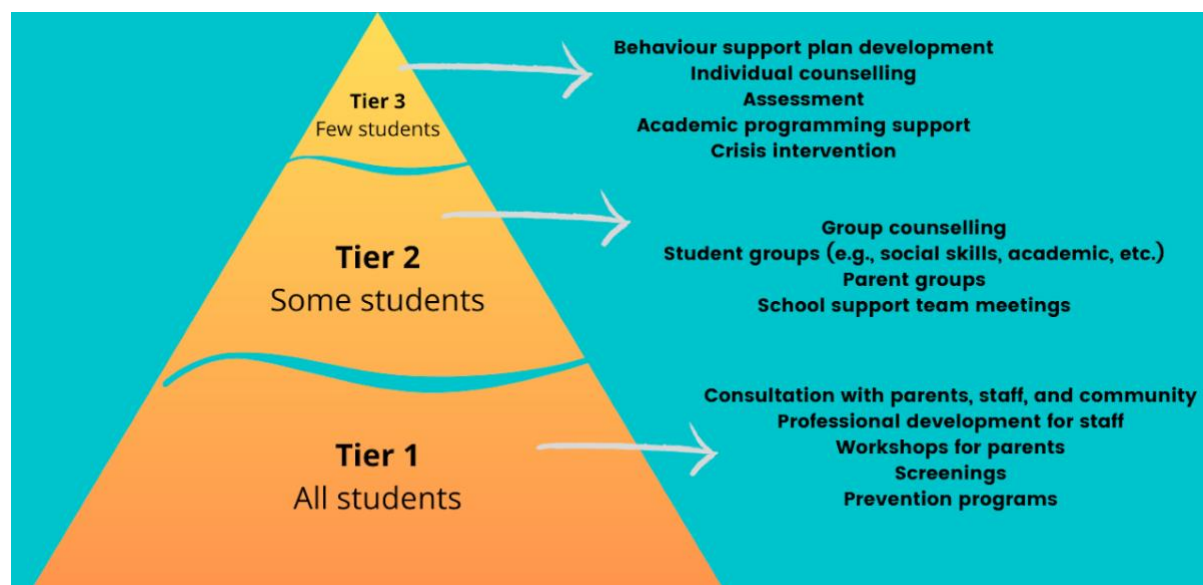
## Overview of Clinical Rotations

### Rotations in School Psychology

#### *Toronto District School Board (TDSB)*

Psychological Services providers at the TDSB are assigned to specific schools and are part of a multidisciplinary group of Professional Support Services (PSS). PSS groups include: Psychological Services, Speech and Language Pathology Services, Child and Youth Services, Occupational and Physiotherapy Services, Social Work Services and Board Certified Behaviour Analysts.

Psychological services at the TDSB are conceptualized according to a three-tier model (please see image below). Tier 1 support reflects a broad range of activities such as providing consultations, providing professional development, workshops, universal screenings and prevention programs. Meaningful opportunities to collaborate with PSS staff on a range of mental health & well-being initiatives are also available through the PSS Mental Health and Well-Being Committee. Tier 2 support reflects targeted intervention and includes membership on school support teams, consultations, and programming support. Tier 3 support reflects intensive intervention and includes psychological assessment and consultation, individual and group counselling, academic programming support, crisis intervention, 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 services 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 strategies in students' Individual Education Plans.

In this rotation, residents will receive at least 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/caregivers and the school system, provide consultation, work with special education and resource teachers, provide intervention, etc. Residents work with educators 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.

### **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 emotion regulation needs), strength-based interventions for middle school students with LD, program evaluation for mental health initiatives, monitoring/evaluating

implementation of academic interventions, and supporting programming in 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 learning experiences 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.

### **Examples of Special Projects:**

ASD Assessment Team- 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.

PSS Mental Health & Well-Being Committee-Residents may have the opportunity to join the PSS Mental Health and Well-Being Committee and collaborate with other PSS staff who are passionate about supporting equity focus and evidence-informed mental health initiatives in the board. Examples of special projects include developing board-wide resources to support: Children's Mental Health Week, Bell Let's Talk Week, Cultural/Heritage Months, Pride Month, Winter and Summer-Well-Being Guides, Parent/Caregiver webinars/workshops etc. The opportunities are endless and the work makes a meaningful difference in the lives of families, students and staff.

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 emotion and behaviour regulation challenges 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 may work closely with psychological service providers and other staff from Caring and Safe Schools.

### **Supervision:**

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.



**Managers:** Carolyn Lennox, Ph.D., C.Psych., David Schwartzbein Ph.D., C.Psych. (retiring July 15, 2022), Laura Mahoney, M.A., C.Psych. Assoc., Yvonne Martinez, 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**

### **Learning Disabilities/Mental Health Program, (LDMH), CDI**

The LDMH 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 LDMH Services 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 using various treatment modalities, including Emotion Focused Skills Training for parents and CBT for children and youth. Residents co-lead groups, which may include the Integra Social Competence Aces Group program or Unified Protocol (UP) group program.

Residents are considered as part of the LDMH clinical team, and work directly and collaboratively with Child and Family therapists (social workers, psychotherapists).

#### Psychological Consultations:

LDMH's Psychology department has a central role in our Assessment and Consultation Clinic. Admission to LDMH Services requires that clients have a completed psychological assessment and a documented Learning Disability. Unique to LDMH, clients are first seen in a two-part clinic that often 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 first under supervision of a psychologist and when ready, take on a regular consultation clinic of their own each week. Residents may have the opportunity to supervise psychology practicum students who are providing consultations. 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 Day Treatment 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 LDMH clinical services are evaluated, and residents are supported by CDI's clinical evaluation team 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 LDMH 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:

At **LDMH/CDI**, 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.

Supervision training for residents

During the second half of the year, residents may have the opportunity to supervise a junior student (for example, a co-leader of the Social Competence ACES group program). Other supervision opportunities may also be available as CDI often has psychology practicum students.

**Supervisor:** Nora Klemencic, 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 (primarily CBT and DBT) to clients 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 or CBT services:

- DBT assessment and case formulation of children, adolescents, and/or young adults and/or adults
- DBT skills groups (co-facilitated) for children, adolescents, young adults, adults, and/or parents
- CBT, ACT or Mindfulness groups (co-facilitated) for adolescents, young adults or adults
- DBT or CBT individual therapy for children, adolescents, young adults or adults

- DBT phone and text coaching with children, adolescents, young adults or adults
- DBT, EFT or CBT oriented parent and/or family therapy

Residents may improve their testing and conceptualization skills by providing psychodiagnostic, psychoeducational, autism, ADHD and gifted assessments to children, adolescents or adults.

### **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:**

Broadview Psychology has a program evaluation team that coordinates regular and ongoing program evaluation. Residents will meet with this team to choose a program evaluation project using existing data or by collecting new data. They may engage in a process or summative evaluation of any of our primarily DBT or CBT services.

### **Supervision:**

**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.

### **Supervision training for residents:**

Residents will have the opportunity to supervise a graduate student or a behaviour therapist during the second half of the year. They will also provide consultation to any

members of the clinical team both formally through consultation team meetings and informally through ongoing collaboration on cases.

**Supervisors:**

Christine Sloss, Ph.D., C.Psych (child, adolescent, adult, family couple)

Carmen Lalonde, Psy.D., C.Psych (child, adolescent, adult, family, assessment)

Aranda Wingsiong, Ph.D., C.Psych (child, adolescent, assessment)

**Psychological & Counselling Services Group (PCGS)- on hiatus for 2023-24**

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 PCGS, 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 PCGS 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, PCGS 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:

**At PCGS** 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.

#### 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. For more information, please visit our website at [www.oshawapsychotherapytraining.com](http://www.oshawapsychotherapytraining.com).

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

## 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.**

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## Residency Program: Adult Track

Residents in the Clinical – Counselling Psychology position will be assigned to either, 1) a half-time major rotation at Toronto Metropolitan University Centre for Student Development and Counselling and a half-time major rotation at the York University Psychology Clinic (YUPC); or 2) a half-time major rotation at Toronto Metropolitan University Centre for Student Development and Counselling and a half-time rotation at Broadview Psychology. In addition, they will 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 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.**

### Toronto Metropolitan 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](http://www.ryerson.ca/counselling).

### 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

### **Supervision:**

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.

**Supervisors:**

Dr. Andrea Martin, C. Psych. [andreamartin@ryerson.ca](mailto:andreamartin@ryerson.ca)

Dr. Jesmen Mendoza, C. Psych. [j5mendoz@ryerson.ca](mailto: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.

**Supervision:**

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.

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

Contact: [lhartley@yorku.ca](mailto: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](mailto:drsloss@broadviewpsychology.com)

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

## Major Health Rotations

### University Health Network:

Psychosocial Oncology and Eating Disorder Program

### **PRINCESS MARGARET CANCER CENTER: – Psychosocial Oncology (PSO)**

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 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, survivorship and late stage disease (end of life). You will have the opportunity to provide both individual and couples therapy (including sex therapy). You will receive training in biopsychosocial treatment approach to managing the diagnosis of a life-threatening illness. Additionally, you will receive training in Schema-Focused Therapy as it pertains to health psychology. You will have the opportunity to participate in multidisciplinary rounds with oncology, psychiatry, psychology and social work. Specific Clinics involved in your rotation include an adolescent and young adult psychosocial clinic, a survivorship consult clinic and a sexual rehabilitation clinic.

A resident's typical experience in this rotation comprises: Two days of clinical service provision including screening, assessment, and treatment; and .5 days 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](mailto:Andrew.matthew@uhn.ca)

Norma D'agostino, Ph.D. C.Psych. [norma.d'agostino@uhn.ca](mailto:norma.d'agostino@uhn.ca)

## **TORONTO GENERAL HOSPITAL – Eating Disorders Program**

The Toronto General Hospital Eating Disorder Program provides assessment and intensive treatment to adults (age 17+) with eating disorders and other comorbid mental health conditions. Our program includes inpatient, intensive outpatient and individual therapy outpatient treatment services.

Residents will have the opportunity to work with adults of various ages and with a range of eating disorder diagnoses including anorexia nervosa, bulimia nervosa, other specified feeding or eating disorder (OSFED) and avoidant/restrictive food intake disorder (ARFID). (Note that we do not provide services for binge eating disorder.) Our patients commonly have comorbid mental health concerns including mood and anxiety disorders, posttraumatic stress disorder, obsessive compulsive disorder, substance use disorders, personality disorders, and other difficulties with emotion regulation and impulsivity. Our treatment program is focused on trauma-informed, evidence-based care within a cognitive behavioural framework. Residents will have the opportunity to perform semi-structured diagnostic assessments, provide structured individual CBT including Enhanced CBT for Eating Disorders (CBT-E), CBT for ARFID, and group CBT and DBT, as well as participate in multidisciplinary clinical team meetings.

A resident's typical experience in this rotation includes approximately 2 days of clinical service provision including assessment, treatment and documentation, and 0.5 day of supervision and training. Our clinic also conducts a variety of research projects, including related to the processes and outcomes of CBT-based treatments for eating disorders, eating disorders and emotion regulation, and the treatment of comorbid eating disorders and PTSD. Residents are welcome to contribute to ongoing research projects as part of the rotation if this is of interest.

Contact Psychologists:

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

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

Supervision at UHN:

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.

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## **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.

### **CDI, LDMH Services**

CDI actively promotes a culture of learning throughout the organization. Residents are encouraged to take advantage of CDI'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.



### **Psychological & Counselling Services Group: (on hiatus for 2023-24)**

To support the overall clinical practice at PCGS 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.

#### **TMU, 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.

## Faculty

Name & Credentials	Title & Affiliation	Contact & Website	Clinical Interests
Norma D'Agostino, Ph.D, C.Psych	Psychologist, UHN, Department of Psychiatry, U of T	<a href="mailto:norma.dagostino@uhn.ca">norma.dagostino@uhn.ca</a> <a href="http://www.uhn.ca">www.uhn.ca</a> <a href="http://www.ellicsr.ca">www.ellicsr.ca</a>	Pediatric cancer, adolescent and young adult oncology, health care transitions, cancer survivorship.
Jessica Iaboni	Clinic Manager, YUPC, York University	<a href="mailto:jeiaboni@yorku.ca">jeiaboni@yorku.ca</a>  <a href="http://www.yorku.ca/yupc">www.yorku.ca/yupc</a>	
Kenneth Y.W. Kwan, Ph.D., RMFT, C.Psych.	Executive Director/Chief Psychologist Oshawa Psychological & Counselling Services	<a href="mailto:kkwan@oshawapsychologist.com">kkwan@oshawapsychologist.com</a> P. 905.721.7723 <a href="http://www.oshawapsychologist.com">www.oshawapsychologist.com</a>	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
Mirisse Foroughe, Ph.D, C.Psych.	Chief Psychologist, Family Psychology Centre	<a href="mailto:mforoughe@familypsychology.org">mforoughe@familypsychology.org</a> <a href="http://familypsychology.org">familypsychology.org</a> 416.848.1829	Emotion transformation, family therapy, intergenerational trauma, nonverbal behaviour, clinical teaching

Carolyn Lennox, Ph.D	Manager of Psych. Services, TDSB (SW)	<a href="mailto:carolyn.lennox@tdsb.on.ca">carolyn.lennox@tdsb.on.ca</a> 416.394.3904 <a href="http://www.tdsb.on.ca">www.tdsb.on.ca</a>	
Andrew G. Matthew, Ph.D, C.Psych.	Psychologist, UHN, Departments of Surgery & Psychiatry, University of Toronto	<a href="mailto:andrew.matthew@uhn.ca">andrew.matthew@uhn.ca</a> 416.946.2332 <a href="http://www.uhn.ca">www.uhn.ca</a>	Psychosocial oncology including program development and evaluation in treatment decision making, sexual rehab & survivorship.
Andrea Martin, Ph.D., C.Psych.	Psychologist, Practicum and Residency Coordinator Toronto Metropolitan University	<a href="mailto:andreamartin@ryerson.ca">andreamartin@ryerson.ca</a> 416.979.5000 x 6757	Mood and anxiety disorders, CBT/EFT
Jesmen Mendoza, Ph.D, C. Psych.	Psychologist, Toronto Metropolitan University	<a href="mailto:j5mendoz@ryerson.ca">j5mendoz@ryerson.ca</a> 416.979.5000 x 16630	Group therapy, CBT, forensic psychology
Joseph Mirabella Ph.D, C. Psych.	Chief Psychologist TCDSB	<a href="mailto:Joseph.mirabella@tcdsb.org">Joseph.mirabella@tcdsb.org</a> 416.222.8282x2626 <a href="http://www.tcdsb.org">www.tcdsb.org</a>	Children and youth with learning disabilities, prevention and intervention programs in schools.
Sandra Paivio, Ph.D, C.Psych.	Clinical Adjunct Faculty Member, York University	<a href="http://www.yorku.ca/yupc">www.yorku.ca/yupc</a>	Process-outcome research, trauma, role of emotion in therapy, treatment development and evaluation.
Danielle MacDonald, Ph.D, C.Psych.	Psychologist, Eating Disorders Program, University Health Network; Assistant	<a href="mailto:danielle.macdonald@uhn.ca">danielle.macdonald@uhn.ca</a> 416-340-4749 <a href="http://www.uhn.ca">www.uhn.ca</a>	Eating disorders intensive treatment from a cognitive-behavioural framework;

	Professor, Department of Psychiatry, University of Toronto		program development and evaluation.
Nora Klemencic Ph.D, C.Psych.	Lead Clinical Psychologist CDI	<a href="mailto:nklemencic@childdevelop.ca">nklemencic@childdevelop.ca</a>  416.603.1827x2234 <a href="https://www.childdevelop.ca/programs/learning-disabilities-and-mental-health">https://www.childdevelop.ca/programs/learning-disabilities-and-mental-health</a>	Emotion regulation, disruptive behaviour, anxiety, ASD & 'neuroatypical' development, CBT
Christine Sloss, Ph.D. C.Psych.	Director of Broadview Psychology	<a href="mailto:drsloss@broadviewpsychology.com">drsloss@broadviewpsychology.com</a>	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.
Kathryn Trottier, Ph.D, C.Psych.	Psychologist and Clinical Program Lead, Eating Disorders Program, UHN, Department of Psychiatry, University of Toronto	<a href="mailto:Kathryn.trottier@uhn.ca">Kathryn.trottier@uhn.ca</a> 416-340-4800 x4067 <a href="http://www.uhn.ca">www.uhn.ca</a>	Eating disorders intensive treatment including program development and evaluation.

Debby Zweig, Ph.D, C.Psych.	Director, TARC OISE, U of T	<a href="mailto:debby.zweig@utoronto.ca">debby.zweig@utoronto.ca</a> 416.978.1964	Anxiety disorders, OCD in children, youth & adults.
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## 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.

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## 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 2022 (2 weeks) and March 2023 (1 week). In the case of community rotation placements, residents can take their vacation as coordinated with their placements.

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## Requirements

### Eligibility/Minimum application requirements (Academic)

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,

- A minimum of 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)

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.**

**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 be fully vaccinated for COVID and also meet the specific eligibility requirements of their training sites such as Police Checks (VSS), updated immunizations.

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## 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

TARC will only accept applications received through the APPI online.

Please Note:

- 1) We may contact referees or the DCT's directly for further information or clarification.
- 2) We require *no supplemental material* to be sent with the application.
- 3) 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, experience in intervention and assessment and best fit 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. While we attempt to offer residents one of their top two choices of rotations, we cannot guarantee this. Residents must be prepared to be assigned to any of the rotations.

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

- **186311** School-Clinical Residency (6) \*
- **186312** Health Psychology Residency (1)
- **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: **November 1, 2022, 11:59pm.**

**\*\*Note: All interviews in January 2023 will be done virtually.**

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## Contact Information

Dr. Debby Zweig, C. Psych.,  
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Applied Psychology & Human Development

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**Other Contacts:**

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**Canadian Psychological Association (CPA):**

141 Laurier Avenue West, Suite 702

Ottawa, Ontario K1P 5J3

Tel: 613-237-2144

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

<http://www.cpa.ca>