

COUNSELLING TRACK

COORDINATOR: Dr. Kathryn Dance

NMS Code Number: 181517

Two (2) Resident Positions are available

Number of applications in 2015: 13

The Counselling Track is designed to prepare residents for practice in clinical and/or counselling psychology. This track is offered at one site, the Student Development Centre at Western University. Therefore, the client population is outpatient, primarily self-referred, undergraduate, graduate and part-time and mature students attending Western University. The typical age range is 17-22, although it is not unusual to see clients in their late 20s, 30s, and middle age.

This track will assist residents in furthering the competencies associated with clinical and counselling psychology including knowledge of adjustment and lifespan development (with an emphasis on late adolescent and young adult development), knowledge of psychopathology, intake assessment (clinical interview and Personality Assessment Inventory [PAI]), and interventions of varying durations (single sessions to longer-term). Training includes opportunities to work with clients with a range of problems including affect regulation difficulties, adjustment issues, grief and loss, self-esteem, eating problems, and body image concerns. Large numbers of clients meet diagnostic criteria for mood and anxiety disorders, and smaller portions of the population experience serious mental health concerns such as first episode psychosis. Therefore, skills in formulating and communicating a differential diagnosis for the purposes of developing an intervention or referring clients as needed may also be a focus of attention. It should be noted that comprehensive psychodiagnostic and psychoeducational assessments are not conducted in this setting.

The resident experience will reflect the activities undertaken by all psychologists in the setting. These activities (crisis work, intakes, single session, and shorter- and longer-term therapy) are divided into rotations that emphasize those experiences. There are three rotations, and residents complete all three. There is one rotation focused on crisis intervention, and two on intervention; one highlighting humanistic approaches and one highlighting integrative and CBT approaches. Both individual and group psychotherapy are required for intervention rotations; *these rotations also include completing intakes to build up a therapy caseload*. As part of the intervention rotations, residents also provide psychoeducational workshops to the broader student population.

Each rotation is supervised by a different psychologist, providing exposure to a variety of styles and approaches. Supervisors within rotations will furnish opportunities for residents to focus on their areas of interest (e.g., grief, eating problems), and will be assigned cases to reflect the diversity of the student population (e.g., ethnicity, sexual orientation). Additionally, residents may participate in a structured reading and discussion group devoted to the development of competencies for clinical supervision. Topics to be covered will include developing the supervisory alliance, legal and ethical aspects of supervision, assessment and evaluation of trainee competencies, methods and techniques for supervision, and dealing with trainee impairment and incompetence. Residents are given the opportunity to supervise at least one practicum student. Residents may also be involved in the training of practicum students via the delivery of lectures or workshops on selected topics of interest.

To be considered, applicants must have the following credentials:

- A minimum of 600 hours of direct client contact including assessment, intervention, consultation, and supervision practicum experience as assessed by summing face-to-face intervention and assessment hours (doctoral and master's level) and supervision hours stated in the APPI
- Completion of core required doctoral coursework, and,
- Experience with a range of intervention modalities.

Major Rotations required:

Crisis and Urgent Intervention
Contemporary Humanistic Therapy
Integrative/ CBT Interventions

Crisis and Urgent Intervention

SDC is committed to the provision of walk in/urgent and crisis appointments, both for self-referred clients and those referred by concerned members of the university community. Clients self-refer for crisis appointments for a wide variety of reasons including but not limited to loss of a relationship, family crisis, academic failure, sexual assault, and suicidal ideation. Clients are also referred by other sources when there is concern about their affect regulation, self-care, or their impact on others. Intensified risk assessments may be required. Residents will follow crisis clients over the short-term, until such time as the crisis is ameliorated. Residents will gain experience with creating safety plans for clients, liaising with the Campus Student Case Manager and community agencies as needed, understanding and dealing with confidentiality issues, and evaluating the impact of their interventions.

Residents in this stream will have an opportunity to encounter a diverse array of presenting problems and personality types, and will gain experience in case conceptualization. They will also make treatment recommendations and referrals as necessary.

Supervisors for this rotation vary in their theoretical orientation, but all employ active strategies for managing client crisis, with an emphasis on ensuring the formation of a strong therapeutic alliance. This rotation is one day per week in the first six months, under the supervision of a psychologist who is not supervising an intervention rotation.

Supervisors: Dr. Kathryn Dance
 Dr. Elspeth Evans
 Dr. Gail Hutchinson
 Dr. Susan Ruscher
 Dr. Beverly Ulak
 Dr. Naomi Wiesenthal

Contemporary Humanistic Therapy

This rotation will present residents with the unique opportunity to explore, broaden, and refine their understanding of counselling psychology from a humanistic perspective. At its core, this rotation will assist residents in attaining competencies in skills for promoting psychological health by helping individuals to recognize and to use their inherent strengths to effect meaningful and positive change in their lives.

Residents will familiarize themselves with the conceptual origins of humanistic personality theory in order to gain an appreciation of the breadth, depth, and timelessness of the humanistic tradition. An additional core component of this rotation will be the investigation and practice of informed, structured, and goal oriented experiential methods, with an emphasis on Acceptance and Commitment Therapy (ACT), and/or Narrative Therapy. Additionally, there will be a focus on the theoretical and practical value of using interventions such as metaphoric language, imagery, archetypes, folklore, and dream work. Residents will acquire an understanding of how such interventions can be utilized to facilitate personal growth and change, insight, articulation of feeling states, reframing of experience, affect regulation, trauma recovery, interpersonal effectiveness, and creative problem solving. There will be an emphasis on strategies for selecting appropriate interventions and evaluating their effectiveness. The experiential methods reviewed in this rotation will be presented in a contemporary/holistic fashion that integrates effectively with current practices in psychology. Finally, this rotation includes the opportunity for residents to provide supervision to practicum students.

Supervisor: Dr. Beverly Ulak
 Dr. Jared French

Integrative / CBT Interventions

In this rotation, individual cognitive behavioural therapy is integrated with other approaches (e.g., mindfulness meditation, affect regulation, skills development) with the aim of responding flexibly to client concerns. Therapy is typically shorter-term but there are opportunities for longer-term therapy. Opportunities for developing and/or leading groups (e.g., Mindfulness Meditation, Managing Anxiety and Stress, DBT skills) will also be available.

Within this rotation, supervisors will provide opportunities for individualized training that meet the specific needs of the resident. Supervision styles vary across supervisors and may emphasize case conceptualization, training in specific skills (e.g., empirically-supported treatments) and the development of therapeutic process skills. Supervisors assure well-rounded experience by assigning cases that reflect client diversity in terms of ethnicity, sexual orientation, socio-economic status, and other individual differences.

Competence in intervention skill is emphasized, and various theoretical perspectives are integrated. Finally, this rotation includes the opportunity for residents to provide supervision to practicum students.

Supervisors: Dr. Kathryn Dance
 Dr. Elspeth Evans
 Dr. Gail Hutchinson
 Dr. Susan Ruscher
 Dr. Naomi Wiesenthal

London Clinical Psychology Residency Consortium 2017-2018

TRACK	Counselling (see p.71-72)		
ORGANIZATION and SITE	Western University Psychological Services, Student Development Centre (see p. 73-74)		
MAJOR ROTATION/ SERVICE *See list of Minor Rotation options (pp. 79-87)	Crisis & Urgent Intervention	Contemporary Humanistic Therapy	Integrative/CBT Interventions

Sample Combinations of Major and Minor Rotation Schedules:

Track	1st Six Months Major – 4 days/week	2nd Six Months Major – 3 days/week	Minor – 1 day/week
Counselling	Contemporary Humanistic, Crisis & Urgent Intervention (Western SDC)	Integrative/CBT Skills (Western SDC)	Community Children's Mental Health (Vanier)