

TRACKS AND MAJOR ROTATIONS

CHILD/ADOLESCENT TRACK

COORDINATOR: Dr. B. Duncan McKinlay

NMS Code Number 181513

3 Resident Positions are available

Number of applications in 2010: 38

The Child/Adolescent Track is designed to prepare residents for future post-doctoral supervised practice focused on children and adolescents and their families. Patients range in age from infancy to age 18. Training stresses three factors: developmental issues, family involvement, and liaison with interprofessional team members, physicians, community agencies, and schools. Competence in assessment and intervention skills are emphasized, integrating theoretical, ethical, research, and professional perspectives. Interdisciplinary teams are prevalent in all settings, and residents are provided the opportunity to work with professionals from a variety of disciplines.

Residents have the opportunity to choose major rotations in community mental health facilities as well as academic teaching hospitals. Across the two major rotation experiences, residents receive exposure to children and adolescents in both inpatient or residential care settings as well as outpatient and community services. Training can include opportunities to work with children and adolescents in areas including paediatric health psychology, eating disorders, community and rural mental health services, day treatment, inpatient units, attachment and relational perspectives, impulse control problems, mood disorders, anxiety disorders, developmental disabilities, and externalizing behaviours.

Within each rotation, supervisors will provide opportunities for individualized training experiences that meet the specific needs of the resident. Supervisors assure well-rounded experiences by assigning cases to residents that reflect client diversity in terms of ethnicity, socio-economic status, and other individual differences. Supervision styles and preferred therapeutic modalities vary across supervisors.

To be considered for the Child/Adolescent Track, resident applicants must have the following credentials:

- Course work at the graduate and/or undergraduate level in (a) child or lifespan development (or both), and (b) child psychopathology, assessment, and intervention.
- Course work and practica at the graduate level reflecting that children and/or adolescents are a population of key interest.
- A minimum of 75 face-to-face hours of child and/or adolescent therapeutic experience. This includes individual therapy with adolescent, school-aged, and pre-school aged children, group counseling for adolescents and/or children, career counseling for adolescents, family therapy and time spent in school counseling interventions, and
- A minimum of five child and/or adolescent integrated psychological reports.

In order to facilitate our review of your application, we strongly encourage you to clarify how you have met these requirements in the contents of your cover letter.

Major Rotations Available:

London Health Sciences Centre: Children's Hospital
London Health Sciences Centre: South Street Hospital/Victoria Hospital
St. Joseph's Health Care, London: Regional Mental Health Care, London
Child and Parent Resource Institute (CPRI)
Vanier Children's Services

London Health Sciences Centre: Children's Hospital

Psychologists in the Paediatric Health Psychology service of the Children's Hospital provide inpatient and outpatient services to children and families coping with acute and chronic medical conditions through a number of health focused clinics and interprofessional teams. Issues commonly addressed include coping with illness, medical compliance, and school adjustment.

Paediatric Health Psychology offers the following training experiences:

Inpatient:

Residents will become experienced in consultation-liaison and treatment services offered to a wide variety of inpatient medical services at the Children's Hospital (e.g., critical care, oncology, neurology, acquired brain injury, gastroenterology, respirology, orthopaedics, surgery). Services are provided for both children and their families for a number of different problems such as treatment compliance, coping with prolonged hospitalization, and palliative care. Cognitive, emotional, and behavioural strategies are employed to assist in managing distressing physical (e.g., acute or chronic pain) and psychological (e.g., depression, anxiety, somatization) symptoms. The resident will attend relevant rounds (e.g., Oncology, Critical Care, General Medicine) and consult with medical team members.

Outpatient:

Work with outpatients will include assessment, therapy, as well as consultation within the hospital and occasionally with schools. Some flexibility in the amount and scope of outpatient work is possible. There are a number of opportunities for outpatient work on this rotation including the following:

Residents may work with patients originally seen in the hospital (e.g., cancer patients in late effects clinic, school reintegration program for cancer patients) or with their family members (e.g., sibling bereavement group therapy).

Residents may work with outpatient children, adolescents, and their families who have either a medical problem that affects their psychological adjustment, or psychological problems that affect their health or adjustment to a medical condition. Issues may include management of recurrent or chronic pain such as headaches or abdominal pain, anxiety contributing or related to living with a medical condition, grief and support following diagnosis, or adherence to treatment regimes.

Residents may also become involved with the Diabetes/Endocrinology interprofessional teams that work with patients with diabetes, growth hormone problems, Turner's Syndrome, and precocious puberty. Issues addressed include adjustment to chronic illness, disease management and adherence problems, and difficulties related to developmental changes or other stressors. Residents also consult with these medical teams and participate in specialized initiatives (e.g., education days, community outreach).

Residents may have the opportunity to attend the Encopresis Clinic, which blends medical and behavioural procedures, emphasizing positive strategies to enhance treatment compliance.

Supervisors: Dr. Danielle Cataudella
Dr. Erica Gold
Ms. Ann Klinck
Dr. Cathy Maan

London Health Sciences Centre: Victoria Hospital

At the Victoria Hospital site of the London Health Sciences Centre, the Child and Adolescent Mental Health Care Program provides integrated inpatient and outpatient services to children and their families with potential experiences for a resident with Outpatients, Inpatient Day Treatment, and Eating Disorders services.

The program currently provides Child and Adolescent Outpatient Services to children and their families through an inter-professional team specializing in assessment and treatment of children, adolescents, and families. Presenting problems are generally of an internalizing nature such as depression, anxiety, loss sequelae, etc. A range of services is offered including individual, group and family therapy, community liaison, etc.

While residents who choose this Major Rotation will have exposure to the various areas of psychology with the Child and Adolescent Mental Health Care Program, they will be asked to select one area within which to focus their training.

Psychological services are concentrated within the Mood and Anxiety Disorders team. Residents will have the opportunity to gain experience in both assessment and treatment of internalizing disorders. Cognitive behavioural therapy is the primary therapeutic approach. Supervision and consultation with other program staff is also encouraged.

Supervisor: Dr. Julie Eichstedt

The Child and Adolescent Inpatients service specializes in assessment and stabilization of acute mental health crises spanning a wide range of presenting issues. Residents have exposure to daily inter-professional team care planning and consultation. The Inpatients treatment team has extensive expertise in child development, internalizing disorders, and crisis stabilization. The resident may also act as primary therapist for several patients, conducting clinical assessment, individual therapy, parental interventions, and case management.

Supervisor: Dr. Heather Jacques
Ms. Monique Pressé

The Child and Adolescent Day Treatment involves an interprofessional team working with adolescents, ages 10 through 17 years, who are experiencing significant internalizing difficulties. Presenting problems involve mood and anxiety disorders, with comorbid attention and learning concerns. A diverse range of treatment is provided, with an emphasis on evidence-based interventions (e.g., cognitive behavioural therapy), while adolescents also maintain educational involvement through the W.D. Sutton classroom. Residents will gain experience providing individual, group, and family therapy, as well as parent training. Psychological assessments of emotional, family, cognitive, and academic functioning will also be conducted. Residents will further have opportunities to consult and coordinate treatment plans with program staff, community agencies, and school personnel.

Supervisor: Dr. Kerry Collins

The Child and Adolescent Eating Disorders is an interprofessional team specializing in the assessment and treatment of eating disorders in children and adolescents until the age of 18. It has inpatient, day treatment, and outpatient follow-up components. Residents may have exposure to assessment, treatment planning, and group psychotherapy experiences for patients and their families.

Supervisor: Dr. Debbie Vanderheyden

St. Joseph's Health Care, London: Regional Mental Health Care, London

The Adolescent Program at Regional Mental Health Care, London is a specialized inpatient psychiatric service that provides consultation, education, assessment, treatment, stabilization, and community integration. These services are accessible to adolescents, between the ages of 13 and their 18th birthday, living in Southwestern Ontario, who are experiencing serious mental illness that may be complicated by their developmental stage and/or concurrent diagnosis.

This interprofessional program uses a biopsychosocial approach to assist adolescents in developing more adaptive, healthier, ways of thinking, feeling, and behaving. Clients in the program experience a wide spectrum of emotional and psychiatric difficulties. These difficulties include emotional regulation; adjustment issues; mood disorders such as depression and bipolar disorder; anxiety disorders; suicidal thoughts/actions; and psychosis.

On this service, the resident would provide a variety of clinical services including assessment, individual treatment, and group therapy with adolescents with cognitive and dialectical behavioural therapy approaches. As well, the resident would be a member of the interprofessional team and would consult with the team at team rounds, clinical planning meetings, as well as individually.

Supervisor: Dr. Lee Ann Charlton-Case

Child and Parent Resource Institute (CPRI)

Residents at CPRI can choose to receive breadth and depth of training at this site during a major rotation by working on more than one clinical team, with more than one supervisor. Beyond the supervision from our psychologists, psychology residents would work with psychiatrists, developmental paediatricians, social workers, speech and language pathologists, occupational therapists, front-line behaviour therapists, and teachers.

Residents should have interest in diagnosing complex, comorbid child and adolescent populations experiencing significant family dysfunction, understanding larger system issues in child and family wellness, and a desire to assist caregivers and teachers in reducing acting out behaviours including aggression. Residents at CPRI may negotiate experiences directly supervised by a psychologist in the following services:

The Attachment Consultation and Education Service (ACES) provides assessments, consultations, and education about and for children with significant early pathogenic care leading to complex trauma response, disturbances of attachment, and/or reactive attachment disorder. Comprehensive relational assessments, as well as more standard and trauma psychological assessments and community and caregiver consultations are offered, with the option of family or individual therapy involvement.

Supervisor: Dr. Richard Zayed

The Autism Spectrum Disorders Clinic provides diagnostic, screening and behaviour interventions in the community to children and youth with diagnoses along the spectrum. Many clients have comorbid diagnoses of Mental Retardation, ADHD, Anxiety disorders, to name the most frequent co-occurrences. The psychologist on the interprofessional team oversees the Screening Clinic for ASD, conducts differential diagnostic assessments, provides clinical consultation to the Community Behavioural Consultants, and develops training for staff. The primary therapeutic model is Applied Behaviour Analysis.

Supervisor: Dr. Louise LaRose

The Bipolar Clinic provides assessment and treatment of children/adolescents ages 6 to 18 years. Due to the complexity of diagnosing bipolar disorder in children and adolescents, a pre-screening session is conducted on all referrals to determine the likelihood of the disorder. This is followed by the completion of a comprehensive assessment using a standardized interview, the WASH-U-KSADS. Children/Adolescents diagnosed with bipolar disorder receive intensive 8 to 10 sessions of group psychoeducational therapy, and in addition, a separate group for the parents is offered. Individual therapy is also available to clients.

Supervisor: Dr. Gani Braimoh

The Brake Shop provides service to children and adolescents diagnosed with a tic disorder; clients present with complex combinations of neurodevelopmental disorders including Tourette Syndrome, Obsessive-Compulsive Disorder or other anxiety disorders, Attention-Deficit/ Hyperactivity Disorder, sensory processing dysfunctions, and/or significant behavioural issues including Intermittent Explosive Disorder ('rage'). A wide selection of services for Brake Shop clients translates into substantial opportunity for residents to tailor and vary their experiences within a Brake Shop rotation. Options include assessments (semi-structured diagnostic assessments and/or standardized testing), co-facilitation of various cognitive behavioural treatment groups (e.g., Exposure & Response Prevention), individual therapy, consultations (client or programming-based), and knowledge transfer activities such as community presentations or school assemblies. Attendance at inter-professional rounds, conducting literature reviews, student supervision, or program development/ evaluation are additional opportunities. For more detailed information please see the Brake Shop's Residents/ Practicum Students webpage at www.cpri.ca (click on "Clinics/Brake Shop").

Supervisor: Dr. B. Duncan McKinlay

The Dual Diagnosis program provides assessment, consultation, and treatment for children and adolescents, 2 to 18 years, who have both developmental disabilities and a mental health or behavioural disorder. Both outpatient and residential services are provided by an interprofessional team. The psychologist assists with assessment and treatment, including supervision of all behavioural programming on residential units. Residents can also be exposed to clients with Autism.

Supervisors: Dr. Jennifer Crotogino
Dr. Karin Gleason

The interprofessional Emotional Disorders team, led by a psychologist, provides psychological consultation, assessment, and treatment of children and youth with developmental disabilities and emotional disorders.

Supervisor: Dr. Karin Gleason

The Home Visiting Program for Infants (HVPI) provides services for infants and young children, birth to 5 years, who have a developmental disability or are at risk of developmental delay. Children seen in the program present with a range of risks for developmental difficulties, including established risk (e.g., genetic syndromes, neurological conditions), biological risk (e.g., prematurity, prenatal exposures), or psychosocial risk (e.g., attachment difficulties, early abuse/neglect). The psychologist provides comprehensive developmental assessment, consultation, and family-centered intervention within a strong transdisciplinary team approach. Most services are provided within the child's home environment. Opportunities for residents include training in infant and preschool assessment, parenting consultation and intervention (e.g., feeding, behaviour, attachment), participation in transdisciplinary services (e.g., team screens, feeding team), and team and family-based support services to address the impact of family and psychosocial stressors on early child development.

Supervisor: Dr. Susan Bryant

A Selective Mutism service is available where direct assessment and school consultation is provided by a psychologist and speech and language pathologist to support children who do not speak at school due to social anxiety.

Supervisor: Dr. Jeff St. Pierre

Residents may also choose to work in Residential/Intensive Services where they will work with children and youth, 6 to 18 years, admitted due to severe psychiatric disturbance, and family and school placement breakdown. Psychologists on our residences and in-house school provide cognitive/ learning, social, emotional assessment, behaviour programming, individual parenting interventions, consultation, individual cognitive behavioural therapy, and staff training and support. Interest in complex, comorbid child and youth populations with diverse family trauma is required. Residents will gain experience in working with multiple systems, matching strengths, needs and supports, and planning and implementation at a multi-agency team level.

Supervisors (various possible): Dr. Jennifer Crotogino (inpatient dual diagnosis services)
Dr. Karin Gleason (inpatient dual diagnosis services)
Ms. Patricia Jordan (inpatient boys unit)
Dr. Niki Reilly (inpatient young child unit)
Dr. Jeff St. Pierre (inpatient girls unit)

Residents in a clinical rotation at CPRI can choose to enhance their knowledge of program evaluation and clinical research through active collaborations with the division of Applied Research and Education. Opportunities include contributing to knowledge dissemination of ongoing residential and outpatient program evaluations, as well as designing and implementing new research protocol.

Supervisor: Dr. Shannon Stewart

Vanier Children's Services

Vanier is a community based children's mental health centre which accepts referrals for children and youth with emotional and behavioural problems up to their 18th birthday. The new agency will work with youth up to age 21 years. The primary focus currently at Vanier is on services to pre-school and pre-adolescent children. Clients typically meet criteria for externalizing behaviour disorders (attention deficit / hyperactivity disorder, oppositional defiant disorder, conduct disorder), compounded by internalizing and family problems. In April 2012, Vanier is scheduled to become part of a new amalgamated agency. Please see <http://www.TheBest4Kids.org/> for the latest information about the new amalgamated agency.

A variety of services are currently provided, including prevention/outreach, outpatient, day treatment, intensive family services, and residential (group and foster) treatment. Several orientations inform clinical work, such as cognitive behavioural, solution-focused, emotion-focused, and attachment theories.

While at the new agency, residents can expect to gain experience in comprehensive assessment, diagnosis and clinical formulation, consultation to interprofessional teams, and possibly also various types of therapy. Additional training opportunities may include ongoing research, program evaluation, and quality improvement initiatives.

Residents at Vanier will most likely provide services to both Early Years and Intensive Services clients. Residents might also be assigned to assist with community mental health, such as family therapy, Francophone, and group only programs. Vanier clients typically present with complex needs, usually including a combination of behavioural problems and mood or anxiety problems, cognitive processing concerns, and family issues (such as abuse, neglect, domestic violence, and separation and divorce). Psychological services to Early Years clients (age birth to six years) include assessment of individual children who are receiving other services (e.g., family therapy, day treatment) and consultation to staff. Intensive Services include both residential and Intensive Family Services (IFS). Residents typically provide assessment and consultation services within the residential programs, primarily in the short-term (typically about 3 months in residence) and medium-term (typically 6-12 months in residence) programs. IFS is an alternative to residential treatment in which a Child and Youth Counselor works with the family in their own home. Psychology's primary role in IFS is to provide clinical support to the Child and Youth Counselor, including assessments with a view toward treatment recommendations. Currently, the primary focus of psychology services at Vanier is assessment. Residents have also provided staff consultation, treatment interventions, or both, as well as assisting with program development and evaluation. Depending on resident interests and supervisor availability, other opportunities at the new agency may include consultation to Early Years or Intensive Service clients in rural settings, work in Youth Justice and in long-term maturational settings, long-term residential treatment for clients with complex trauma histories, crisis work, and quality improvement and program evaluation activities.

Further information about Programs at Vanier can be found at <http://www.vanier.com/>

Acceptance into this major rotation is dependent on the successful completion of a police record check and medical clearance. Same-day travel within the region may be required.

Supervisors: Dr. Jeff Carter
Dr. Carla Smith
Dr. Esther Goldberg