

TRACKS AND MAJOR ROTATIONS

CHILD/ADOLESCENT TRACK

COORDINATOR: Dr. Esther Goldberg

NMS Code Number 181513

3 Resident Positions are available

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.

Residents have the opportunity to choose major rotations in community mental health facilities as well as academic teaching hospitals. Also, residents can choose training that emphasizes inpatient and residential care or training that emphasizes outpatient and community care. Residents also have the option of choosing mental health care experiences or a balance of mental health and behavioural medicine experiences.

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

- Course work in child assessment, child development, and child psychopathology,
- A minimum of 100 hours of child and/or adolescent assessment practica, and
- A minimum of 100 hours of child and/or adolescent therapeutic practica.

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 Parent Resource Institute (CPRI)
Madame 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, respiratory, 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: South Street Hospital/Victoria Hospital

The Child and Adolescent Mental Health Care Program is currently located on two sites of London Health Sciences Centre (although it is expected that, by the fall of 2010, all of these services will be located at the Victoria Hospital location). At the South Street Hospital location, the program currently provides outpatient services to children and their families through an interprofessional team specializing in crisis and urgent 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. On this site, psychological services are concentrated within the Mood and Anxiety Disorders Program. 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.

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. This location includes potential experiences for a resident with the Child and Adolescent Inpatient Unit, the Day Treatment Program, and the Child and Adolescent Eating Disorders Program.

The Child and Adolescent Inpatient Unit specializes in tertiary care assessment and stabilization of mental health crises spanning a wide range of presenting issues. Residents have exposure to interprofessional team care planning and outcome monitoring. This inpatient unit treatment team has extensive expertise in child development, internalizing disorders, and crisis stabilization. The resident also acts as primary therapist for several patients, conducting individual therapy, parental interventions, and case management.

The Day Treatment Program of the Adolescent Mental Health Care Program involves an interprofessional team working with adolescents, ages 10–17 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.

The Child and Adolescent Eating Disorders Program is an interprofessional team specializing in the assessment and treatment of eating disorders in children and adolescents through to the age of 17. 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.

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.

Supervisors:

Dr. Kerry Collins
Dr. Julie Eichstedt
Ms. Monique Pressé
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 Charlton-Case

Child 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 around children with significant disturbances of attachment or reactive attachment disorder. Comprehensive relational assessments, as well as more standard psychological assessments and community and caregiver consultations are expected, with the option of family or individual therapy involvement.

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 psycho-educational therapy, and in addition, a separate group for the parents is offered. Individual therapy is also available to clients.

The Brake Shop provides service to children and adolescents diagnosed with a tic disorder; clients typically present with complex combinations of neurodevelopmental disorders including Tourette Syndrome, Obsessive-Compulsive Disorder or other anxiety disorders, Attention-Deficit/Hyperactivity Disorder, sensory processing dysfunctions, or 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 and/or behavioural treatment groups, individual therapy, consultations (client or consultee-based), and knowledge transfer activities such as community presentations or school assemblies. Attendance at multidisciplinary rounds, conducting literature reviews, student supervision, or receiving supervision in creating a highly-specialized clinical service are additional opportunities. For more detailed information please go to www.cpri.ca, click on "Clinics, Brake Shop".

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 and assessment and treatment within our Pervasive Developmental Disorders team.

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.

The Home Visiting Program for Infants (HVPI) provides services for infants and young children, birth to 5 years, with developmental delays, medical fragility, and/or who are at risk for developmental delays. A transprofessional model is utilized, with a very strong team approach. The role of psychology within the team includes developmental assessments, feeding assessments and consultation, behavioural consultations, parent-infant therapy, and consultation around the impact of parental mental health challenges or other stressors in infant development.

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 anxiety.

Residents may also choose to work in Residential 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:

Dr. Gani Braimoh
Dr. Susan Bryant
Dr. Jennifer Crotogino
Dr. Carey Anne DeOliveira
Dr. Karin Gleason
Dr. Louise LaRose
Dr. B. Duncan McKinlay
Dr. Jeff St. Pierre
Dr. Niki Rielly
Dr. Shannon Stewart
Dr. Richard Zayed

Madame 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 primary focus is on services to pre-school and pre-adolescent children and residents can expect to work with a younger population. Clients typically meet criteria for externalizing behaviour disorders (attention deficit / hyperactivity disorder, oppositional defiant disorder, conduct disorder), compounded by internalizing and family problems.

A variety of services are 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 Vanier, 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 individual therapy with client's parents, and ongoing research, program evaluation, and quality improvement initiatives.

Residents at Vanier will be exposed to residential treatment. They will also provide psychological services for Intensive Family Services (IFS) clients. IFS is an alternative to residential treatment for most clients. 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). The IFS strives to help the family find solutions to their own problems, empower the parents, and build on strengths. The IFS program is also based on the belief that community resources are important to total family success and that access to these resources needs to be further developed. Its intervention strategies generally are cognitive behavioural with an emphasis on problem-solving and practical "hands-on" teaching. Psychology's primary role in IFS is to provide assessments with a view toward treatment recommendations. Residents may also be assigned to provide consultation services regarding early years clients in a rural setting.

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

Supervisors:

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