

HEALTH/REHABILITATION TRACK
COORDINATOR: Dr. Steven Orenczuk

NMS Code Number 181515

2 Resident Positions are available

The Health/Rehabilitation Track is designed to provide residents with broad-based clinical training combined with specialization in the integration of the knowledge and techniques of health, behavioural, and biomedical sciences. The Track also allows interested residents the opportunity to receive training across the lifespan.

The primary goals of the Health/Rehabilitation Track are twofold:

- 1) to provide an understanding of the relationship between psychosocial issues, health, physical illness, and disability; and,
- 2) to apply clinical and research skills and knowledge to the prevention, diagnosis, treatment, and rehabilitation of a wide variety of medical disorders and conditions.

Supervisors and clinical services are available in a number of different rotations with different medical populations and presentations. There is an opportunity to work with inpatients and outpatients, both in an individual and group format, and with a variety of assessment and intervention approaches.

To be considered for the Health/Rehabilitation Track, resident applicants must have the following credentials:

- A minimum of 200 hours of assessment, intervention, consultation, and/or supervision experience involving health, physical illness, and disability, and
- For those seeking a lifespan approach to their training, practicum experience with a range of age groups (children, adults, older adults) is an asset.

Major Rotations Available:

London Health Sciences Centre: Children's Hospital
London Health Sciences Centre: South Street Hospital/Victoria Hospital
London Health Sciences Centre: University Hospital
St. Joseph's Health Care, London: Parkwood Hospital
St. Joseph's Health Care, London: St. Joseph's Hospital

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

Residents may choose to work in the General Behavioural Medicine Service. This clinical setting provides residents with a more broad-based experience in the psychological assessment and treatment of medical conditions. Patients are referred from a wide variety of hospital programmes, including anaesthesiology, neurology, internal medicine, psychiatry, nephrology, and psychiatry. Patients on this service often present with comorbid physical (e.g., chronic pain, head injury, diabetes, and renal insufficiency) and psychological conditions (e.g., depression, posttraumatic stress disorder, and personality disorders). Because of significant medical repercussions, most patients present with significant changes in quality of life and experience difficulties with coping and acceptance. Assessment measures usually include indices of personality, emotional distress, quality of life, and coping. Residents provide individual and group interventions (structured treatment protocols and open-ended psychotherapy groups) on an outpatient basis. Residents also provide consultation services on a limited basis to hospital clinics (e.g., pain clinic, total parenteral nutrition clinic). When available, the residents also have the opportunity to supervise practicum level students.

Residents also have the capacity in this major rotation to emphasize the assessment and management of difficult chronic pain cases, including individuals with lumbar and cervical back pain, headaches, complex regional pain syndrome, and neuralgia. Most of the resident's time is devoted to outpatient assessment and treatment. Treatment approaches include relaxation training and imagery techniques, social skills training, problem-solving, goal-setting, contingency management, and exposure-based techniques. Interventions may also include marital therapy and family therapy when needed. Approximately 20% to 25% of the resident's time is spent in consultation-liaison activities.

Another option for residents is to work with the LHSC Cardiac Rehabilitation and Secondary Prevention Program (CRSP). The psychologists in this clinical service treat patients who present with a wide range of mental health issues. The psychologists also deliver psychosocial and behavioural risk factor modification interventions for chronic cardiac and vascular disease. The population served by CRSP includes adults of a variety of ages. Most patients have cardiac conditions, including coronary artery disease, cardiomyopathy, heart failure, congenital heart problems, valve dysfunction, arrhythmias, and may have undergone open heart surgery, angioplasty and stenting, or medical management. In addition, the program has accepted patients following TIAs or mild strokes, in the context of clinical research trials. Opportunities include the screening of large numbers of cardiac patients in an interprofessional clinic setting, formal psychological assessment, and treatment, which includes individual therapy, and group therapy (co-leading cognitive behavioural stress management, women's support, or smoking cessation groups). Residents will have the opportunity to interact with members of the cardiac rehabilitation team, which includes cardiologists, kinesiologists, dietitians, and nurses. There are research opportunities within the rotation, as CRSP maintains an active research program, supported by an integrated electronic patient management system and a multi-site cardiac rehabilitation registry.

Residents may seek to work with the Consultation-Liaison Service which serves Victoria Hospital. This is an interprofessional service involving psychiatry, psychology, and mental health nursing. Opportunities for training are very broad, reflecting the diversity inherent in the overlap of physical and mental health care. Patients seen in this rotation typically have complex medical and psychiatric symptom presentations. The rotation involves training experiences in inpatient consultation to medical/surgical units as well as outpatient management. Participation in interprofessional rounds, including bedside visits, is expected. Clinical activities include mental status/diagnostic interviewing, treatment planning, bedside psychological intervention, and efficient communication to health care professionals. Behavioural and cognitive behavioural interventions are delivered within a rehabilitation or biopsychosocial framework.

There is also the opportunity to provide psychological services to the sleep disorders service. Residents will have an opportunity to provide assessment and treatment to patients with insomnia. A cognitive behavioural conceptualization of insomnia is used. Intervention consists of cognitive, behavioural, and educational components. Patients in this service often present with other medical conditions, allowing the resident to gain experience with a variety of behavioural medicine issues.

Supervisors:

Dr. Judith Francis
Dr. Tony Iezzi
Dr. Ann McDermid
Dr. Felicia Otchet
Dr. Peter Prior
Dr. Naomi Wiesenthal

London Health Sciences Centre: University Hospital

In this rotation, residents will work with a variety of interprofessional patient care teams. In some services, psychology provides an important consultative role. In other services, psychology is an integral part of long-standing interprofessional patient care services. The clinical care provided by psychology in these services would focus both on inpatient and outpatients for assessment, intervention, and consultation services.

Residents have the opportunity to work in The Fertility Clinic. In this clinical service, the resident provides psychological services primarily to the In Vitro Fertilization and Intrauterine Insemination programs, but also to programs involving egg donation, gestational surrogacy, and insemination using a sperm donor. Pretreatment interventions may include implications counselling, short-term therapy for adjustment disorder, anxiety management training, relationship counselling, and behavioural treatment for male sexual dysfunction. Post-treatment interventions include crisis intervention, short-term therapy for anxiety and/or depression, couples counselling, and specific issues of infertility counselling including facilitating decision making, acceptance, and resolution after treatment failure.

The resident can also work to provide clinical psychology services to the Epilepsy Unit. Persons with epilepsy are referred with problems of mood, relationships, personality, and adjustment. Consultation to the interprofessional inpatient unit involves assessments (interviews, psychological testing, report writing) of surgical candidates. The assessment may lead to short-term intervention while the patient is in hospital (e.g., stress management, brief therapy). Outpatient assessments and psychotherapy are also conducted and involve individual, family, and marital interventions. Most therapy will be relatively focused and problem-oriented, often being cognitive behavioural and/or skills-oriented.

The resident may also work with the Consultation-Liaison Psychiatry Service at University Hospital. This service is an interprofessional team (psychiatry, psychology, and mental health nursing) that provides mental health services to the inpatient medical-surgical units of the hospital. Patients seen by this service often present with complex physical and mental health issues (e.g., depression following liver transplantation). Some patients are seen for outpatient follow up. This rotation provides opportunities for the resident to further develop his/her skills in the areas of assessment, treatment, and interprofessional consultation. Treatment is typically short-term, problem-focused therapy that is cognitive behavioural in orientation.

Supervisors:

Dr. Paul Derry
Dr. Christopher Newton
Dr. Sandra Ulch

St. Joseph's Health Care, London: Parkwood Hospital

The Psychology staff at St. Joseph's Health Care, Parkwood Hospital provide services to two distinct areas: 1) the long term care program for Canadian war veterans, and 2) to the inpatient and outpatient regional specialty rehabilitation programs serving southwestern Ontario. Participation alongside members of interprofessional treatment teams is an important component of this setting.

The Veterans Care Program (VCP) at Parkwood Hospital provides inpatient long term care for Canadian war veterans. Psychology often provides program development services, specifically identifying and addressing care gaps through a combination of systems analysis, applied research, staff development, and clinical consultation. In recent years, Psychology has facilitated numerous quality improvements initiatives at the team, program, and cross-program levels. Psychology residents can become involved in consultation with this program in geriatric issues such as end of life care, pain management, behavioural challenges, and enhancing care delivery.

On the rehabilitation service, which more broadly includes the Spinal Cord Injury, Stroke, Amputee, and Acquired Brain Injury programs, two options are available.

Residents may participate in the Regional Spinal Cord Injury (SCI) Rehabilitation Service. This program has a 15-bed inpatient component for individuals who have had a spinal cord injury, either traumatic (e.g., from a motor vehicle accident or fall) or non-traumatic in etiology (e.g., spinal metastases or transverse myelitis) or other neurological disorder (e.g., Guillain Barre Syndrome). Supportive counselling and psycho-educational groups are available as experiences to the residents working on the spinal cord service. There is a cognitive behavioural emphasis to the treatment interventions that focus on adjustment of the patient to his or her disability. Evaluations frequently include the psychometric assessment of cognitive functioning. Services often are consultative in nature. Participation in a community injury prevention program is also available.

Placements are also available on the Acquired Brain Injury Rehabilitation Program. This in- and outpatient service provides care to patients referred for assessment or intervention during post-acute rehabilitation. Acquired brain injury may be due to traumatic physical injury sustained in falls, assaults, and motor vehicle collisions, or to medical conditions that affect the central nervous system, such as anoxia, stroke, brain tumour, or meningitis. Concomitant mood disorders and pain complaints are prevalent. Residents may obtain experience in a variety of clinical interventions including cognitive, behavioural, and vocational rehabilitation.

Supervisors:

Dr. Maggie Gibson
Dr. Steven Orenczuk
Dr. Margaret Weiser

St. Joseph's Health Care, London: St. Joseph's Hospital

At the St. Joseph's Hospital site of St. Joseph's Health Care, Psychological Services are provided through the Rheumatology Day Programs, the Comprehensive Pain Program, and a psychology specific, pain management service for patients referred from the Department of Physical Medicine and Rehabilitation (PM&R) and from the Hand and Upper Limb Clinic (HULC).

Rheumatology Day Programs (RDP) (3 to 4 days/week) are intensive, interprofessional, 2 to 4 week outpatient treatment programs for patients with inflammatory arthritis (e.g., rheumatoid arthritis, psoriatic arthritis, ankylosing spondylitis), osteoarthritis, systemic lupus erythematosus, scleroderma, and fibromyalgia. Participants in this program learn disease self-management skills for improved symptom control, productivity, emotional functioning, and quality of life.

Residents working in the Rheumatology Day Programs would provide the following services: preadmission assessments, patient education, group and individual treatment interventions, and treatment follow-up services. Education sessions focus on chronic pain, pain management, the impact of chronic pain on psychosocial functioning, and sexual dysfunction. Treatment interventions include: cognitive therapy skills for mood, relaxation training, EMG biofeedback, assertive communication, and relapse prevention.

Residents may also be involved in our Multidisciplinary Clinic Days, which are one-day educational sessions that are held on a monthly basis for individuals with rheumatic diseases. All patients in rheumatology are asked to attend these sessions as part of their care plan.

Residents will also have an opportunity to participate in interprofessional team rounds, and provide consultation / interventions to promote adherence to medical, physiotherapy and occupational therapy treatment approaches.

Residents may also provide cognitive behavioural group therapy through the RDP's Depression Treatment Group, a 10-session treatment program for individuals who are struggling with depression as a result of their chronic rheumatological condition.

The Comprehensive Pain Program (1 day per week) offers interprofessional services for outpatients diagnosed with a range of persisting pain conditions. Psychological services include assessment, consultation, and group-based stress, pain and mood management strategies. Residents would conduct psychological assessments and co-lead pain management groups based on psychoeducational, cognitive behavioural, and acceptance based approaches. To a limited degree, residents may provide individual therapy with patients who are unable to make use of group treatment. Resident training opportunities in this program are dependent on staff availability.

Physical Medicine and Rehabilitation (PM&R)/Hand and Upper Limb Clinic (HULC) (1 to 2 days per week) patients are referred to psychology for assessment and combined group and individual treatment. The treatment integrates more traditional cognitive behavioural approaches to pain management with mindfulness meditation training and Hayes' Acceptance and Commitment Therapy (ACT).

Supervisors:

Dr. Heather Getty
Dr. Marilyn Hill
Dr. Warren Nielson
Dr. Allan Shapiro