

ADULT MENTAL HEALTH TRACK

COORDINATOR: Dr. Bonnie Purcell

NMS Code Number: 181514

Three (3) Resident Positions are available

Number of applications in 2017: 56

The Adult Mental Health Track is designed to prepare residents for eventual autonomous practice in clinical psychology, through broad-based and intensive exposure to adult mental health. Several rotations serve a broad range of inpatient and outpatient populations and allow residents to focus on specific patient groups or on specific assessment or therapeutic modalities.

Residents create an individualized, broad-based training program by selecting relevant experiences within Major Rotations. To allow for an adequate breadth of training, clinical experiences within the rotations should include at least one experience focusing on assessment and consultation while another should focus on intervention. Intervention experiences should include individual and group psychotherapies, as well as inpatient and outpatient experiences. Exposure to research as a guiding principle, as well as a systematic method for evaluating clinical outcomes and programs, is emphasized. Using a professional developmental approach of clinical and scientific inquiry, residents apply skills in prior and current training to assess and treat patients according to best practices and sound clinical judgment.

Within each rotation, supervisors will provide opportunities for individualized training experiences that meet the specific needs of the resident. Supervisors assure well-rounded experience by assigning cases to residents that reflect patient diversity in terms of ethnicity, socio-economic status, age, and other individual differences, as much as possible.

Competence in assessment and intervention skills is emphasized, integrating theoretical, ethical, research, and professional perspectives. While psychologists provide the bulk of supervision, residents are encouraged to work with other professionals as well, including psychiatrists, social workers, nurses, occupational therapists, and therapeutic recreation specialists. Supervision styles vary across supervisors. Several supervisors emphasize training in specific skills (e.g., empirically-supported treatments) while other supervisors emphasize the development of strong interpersonal and therapeutic process skills.

To be considered, applicants must have the following requirements by the application deadline:

- a minimum of 600 hours of direct mental health 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 AAPI
- at least 100 hours of assessment experience (as indicated by the number of assessment hours in the "Summary of Practicum Experience" section of the AAPI) as well as at least five integrated adult psychological assessment reports
- completed their core required doctoral coursework
- defended their dissertation proposal, and
- experience with a range of psychotherapeutic modalities

Please note that applicants who do not meet these criteria will not be considered.

Major Rotations available:

London Health Sciences Centre: Victoria Hospital; Riverview

St. Joseph's Health Care London: Parkwood Institute

St. Joseph's Health Care London: Southwest Centre for Forensic Mental Health Care

London Health Sciences Centre: Victoria Hospital

Adult mental health at London Health Sciences Centre's (LHSC) Victoria Hospital provides a range of acute care mental health services for adult inpatients and outpatients in London. As well as 108 inpatient beds for acute crisis stabilization and treatment for adults 18 years of age and older, adult mental health at Victoria Hospital also provides general ambulatory mental health services as well as some specialized adult services. Residents working in this rotation will be able to select from a variety of potential experiences and work in one or two of the following programs.

Cognitive-Behavioural Therapy (CBT)

The cognitive-behavioural therapy team at LHSC Victoria Hospital provides CBT to adults who have a primary diagnosis of depression and/or anxiety. Personality factors and comorbid mental or physical health concerns may also be present. Within this interdisciplinary team residents will be responsible for providing comprehensive individual therapy to adult clients. Skills in diagnostic assessment, case formulation, and treatment planning will also be emphasized. Observation and/or direct involvement in skills-based group therapy is a possibility, as is some accommodation of resident preference with respect to factors such as client diagnostic status, level of comorbidity, and presenting problems.

Supervisor: Dr. Brendan Guyitt

Dialectical Behaviour Therapy (DBT)

Although DBT is an evidence-based therapy for individuals with borderline personality disorder, at LHSC, we are providing this treatment to outpatients with serious mental illness. These patients usually have several comorbid diagnoses such as mood disorder, posttraumatic stress disorder, panic disorder, generalized anxiety disorder, somatic disorder, and personality disorder, as well as significant difficulties with affect management and interpersonal regulation. DBT interventions include mindfulness, emotion regulation, interpersonal effectiveness, and distress tolerance. These interventions are implemented in skills training groups and individual therapy. Residents in this service provide both individual and group therapy. They consult with the interprofessional DBT team on a weekly basis in regard to patient and therapist progress, as well as DBT training. The minimum time commitment for residents in the DBT program is two days per week and three days is recommended.

Supervisor: Dr. Danielle Bedard

Geriatric Mental Health Program (GMHP)

The GMHP consists of an interprofessional team designed to provide outpatient geriatric psychiatry consultation, assessment and treatment to seniors, 65 years of age and older, and their families living in the London-Middlesex region. Our mandate includes providing 1) quality clinical care that recognizes the unique psychiatric and medical needs of older adults, 2) education for physicians and professionals training to care for the elderly, and 3) collaboration with community agencies and partners in specialized geriatric services. Both clinic and home visits in the community and in long-term care settings are provided in this service for senior individuals who experience mental disorders of late life, including dementia and related disorders, mood disorders, addictions, and psychotic disorders. Residents will work closely with a team consisting of nurses, psychiatrists, social workers, occupational therapists, and therapeutic recreation specialists. The psychologist provides psychosocial and diagnostic assessment, further cognitive/personality assessment, and psychotherapy (primarily cognitive-behavioural therapy) within the program. A cognitive-behavioural therapy group for depression is often offered yearly, which the resident may co-lead, if interested.

Psychology consultations are also provided as part of the Behavioural Response Team (BRT), which is a newer facet within GMHP, that provides consultations and short-term follow-up addressing urgent referrals for responsive behaviours related to mental health or addictions (although primarily dementia) in the community and long-term care. Teaching opportunities are also available to provide in-services to long-term care homes on topics such as addictions, senior mental health, and personality disorders. Residents may participate in assessment, psychotherapy (individual or group-based), consultations, and teaching during their rotation in this program.

Supervisor: Dr. Bonnie Purcell

Prevention and Early Intervention Program for Psychoses (PEPP)

The Prevention and Early Intervention Program for Psychoses (PEPP) provides comprehensive medical and psychosocial intervention for adults presenting for the first time with a psychosis-spectrum disorder (<http://www.pepp.ca>). Most clients are in their teens or early twenties when they enter PEPP and there is a high incidence of concurrent mood, anxiety, and substance use problems. The PEPP team includes nurses, psychiatrists, social workers, vocational counselors, education specialists, and a psychologist, plus clinical researchers. Treatment and rehabilitation is specifically tailored to meet the needs of young adults, and particular attention is paid to early intervention that is youth-friendly, recovery-oriented, and compassion-focused. The psychologist typically consults to the case manager-patient dyad, providing assessment (cognitive functioning, personality assessment) and intervention services (individual and group therapy) for anxiety, depression, and persistent psychotic symptoms (e.g., hearing voices, delusions). Treatment is grounded in cognitive behavioural, interpersonal, and motivational-enhancement therapies. Interventions are typically provided individually, but there are opportunities to be involved in group psychotherapy such as the Voice Hearers Group. Supervision methods are flexible and individually-tailored. Co-therapy and long-term psychotherapy experiences are often available.

Supervisor: Dr. Maya Gupta

Traumatic Stress Service

The Traumatic Stress Service at LHSC provides treatment to adult outpatients who have psychological and emotional difficulties as a result of interpersonal traumatic experiences. The majority of clients are adult survivors of repetitive trauma that began in early childhood. Clients are typically complex in presentation, carrying several comorbid diagnoses including posttraumatic stress disorder, mood disorder, anxiety disorder, somatic disorder, and/or personality disorder. We use a stage-based treatment protocol with an initial focus on stabilization and emotional regulation, followed by repair and reprocessing work. The program is founded in the latest research in the fields of trauma theory, attachment, and interpersonal neurobiology. Treatment is delivered in both group and individual formats. Residents will have the opportunity to engage in both forms of treatment as well as psychological assessment with an emphasis on differential diagnosis and treatment planning. As well, residents will engage in weekly consultation with our interdisciplinary team. Theoretical orientation: Interpersonal Neurobiology, Emotion-Focused Therapy (EFT), Psychodynamic, and Cognitive-Behavioural Therapy (CBT)

Supervisor: Dr. Erin Ross

London Health Sciences Centre: Riverview

Adult Eating Disorders Service

The Adult Eating Disorders Service (www.lhsc.on.ca/aeds) is a community based program that provides comprehensive medical and psychosocial treatment along a full continuum of care to adults with anorexia nervosa, bulimia nervosa, and other specified feeding or eating disorders. Services provided include comprehensive assessments, psychoeducation, outpatient, day-hospital and residential treatment as well as family education and support. The psychologist works within the multidisciplinary team to provide psychotherapy and program development and evaluation. Therapy is delivered both in group and individual formats. Residents will work towards developing a comprehensive knowledge of these complex disorders that involve both psychological and physiological sequelae. The focus for residents will be on the assessment and treatment of eating disorders; however, there will be opportunities for program development and assisting with ongoing program evaluation projects. The only theoretical modality utilized is eating disorder specific cognitive behavioural therapy.

Supervisor: Dr. Philip Masson

St. Joseph's Health Care London: Parkwood Institute

Operational Stress Injury (OSI) Clinic

Adult Mental Health residents working at Parkwood Institute have the opportunity to work in the Operational Stress Injury (OSI) Clinic for veterans and members of the Canadian Forces and the RCMP. Opened in 2004, the Parkwood Hospital Clinic is part of a national network of OSI clinics funded by Veterans Affairs Canada. These clinics help patients who suffer from a number of conditions that can result from being exposed to military trauma. In addition, the network of OSI clinics is helping to develop new standards of OSI treatment through education and research.

Psychology provides assessment and treatment to currently serving and veteran members of the Canadian Forces and the RCMP. Common clinical issues include post-traumatic stress disorder, anxiety, depression, relational difficulties, and addictions resulting from, or aggravated by, service-related trauma. Educational programs as well as individual, group, and family counselling are also available.

Residents will work as part of an interprofessional team of health professionals that includes psychiatrists, nurses, and clinical social workers who work together to develop treatment plans tailored to the individual needs of each client. Residents complete assessments for treatment planning and disability-award purposes, typically involving clinical interviews, structured diagnostic interviews (i.e., the SCID-IV and the CAPS), and self-report symptom-focused and personality measures. Intervention training experiences can be tailored to the interests of the resident. All residents are expected to conduct individual psychotherapy. Opportunities to co-facilitate a psychoeducation or treatment group (e.g., a cognitive behavioural depression group) are sometimes available.

Supervisors: Dr. Anna Arcuri
 Dr. Rod Balsom
 Dr. Jason Carr
 Dr. Tevya Hunter
 Dr. Mustaq Khan
 Dr. Alexandra McIntyre Smith
 Dr. Amanda R. Levine
 Dr. Maya Roth

Adult Inpatient Psychiatry

Adult Inpatient Psychiatry is comprised of four inpatient units and provides inpatient assessment and treatment for adults (18 years of age or older). Patients present with various challenges such as severe and persistent mood and/or anxiety disturbances, psychosis, personality difficulties and co-morbid illnesses such as physical health disorders and substance use disorders. The interprofessional service also aims at relapse prevention, recovery from mental illness and transition back into community. In this service, residents would be able to provide psychological assessment to adults, particularly cognitive, personality, and diagnostic assessments. Residents would also be able to provide short-term intervention.

Supervisor: Dr. Stephanie Dubois

Adult Ambulatory Services

Adult Ambulatory Services provides mental health services to adult outpatients with a wide range of psychiatric disorders, primarily to those with more serious and chronic psychopathology (Psychosis, Affective, and Anxiety). Personality and comorbid mental or physical health disorders may coexist with any of the above. Referrals are accepted from Coordinated Intake. These include patients who are referred by London Health Sciences Centre (LHSC) and the community. Treatment is provided with interprofessional involvement (including psychiatry, nursing, social work, therapeutic recreation, occupational therapy, and psychology). The interprofessional service also aims at relapse prevention and recovery from mental illness. In this service, residents would be able to provide psychological assessment to adults, particularly cognitive, personality, and diagnostic assessments. Residents would also be able to provide psychotherapeutic intervention services from a variety of approaches, including cognitive-behavioural therapy, supportive and mentalization-based therapy, depending on supervisor availability. Interventions provided by residents would be primarily in the context of individual psychotherapy.

Supervisors: Dr. Farida Spencer
Dr. Jeremy Harrison

Concurrent Disorders Services

Psychology is also an integral part of Concurrent Disorders Services. This service provides specialized outpatient tertiary care to individuals who suffer from both severe psychiatric disorders as well as severe substance use disorders. Residents involved in this rotation treat patients with a wide range of substance use and mental health issues, attempting to address both aspects therapeutically. Treatment is individualized to meet the specific needs of these often challenging patients, and includes Motivational Interviewing and CBT techniques for the addiction, and an integrative approach involving CBT, interpersonal and psychodynamic elements for the psychiatric disorders. Psychological assessment and group psychotherapy experiences are also opportunities in this rotation.

Supervisor: Dr. David LeMarquand

***St. Joseph's Health Care London:
Southwest Centre for Forensic Mental Health Care***

The Southwest Centre for Forensic Mental Health Care, located in St. Thomas, provides specialist inpatient and outpatient services to individuals who are in the forensic mental health system. Residents may have the opportunity to provide psychological assessment, diagnostic, consultation, and intervention services for individuals with mental illness while working with interprofessional teams in a unique clinical care setting.

Psychology plays an important role in the Southwest Centre for Forensic Mental Health Care. This facility provides specialized mental health services to adults with a mental disorder who have committed a criminal offence, with an emphasis on the high risk and high need patient. The Forensic Program is comprised of 80 beds including assessment, treatment, and rehabilitation units as well as an Outreach Team. At all times the interprofessional teams working with our patients must balance the needs of each patient with the need for public safety. Patients present with a broad range of diagnostic categories such as schizophrenia, mood disorders, and personality disorders. A significant proportion of patients also have an addiction to drugs and/or alcohol. The Forensic Unit serves individuals who are on Court Ordered Assessments, are found either Unfit to Stand Trial or Not Criminally Responsible, or have been transferred from correctional facilities requiring treatment under conditions of security. Residents on the service could participate in forensic psychological assessments as well as diagnostic psycholegal assessments. Forensic assessments can include comprehensive psychosocial assessment, assessment of criminal responsibility, assessment of fitness, and/or assessment of risk. Residents could also be involved in a range of appropriate psychotherapies, gain experience with an interprofessional treatment team, and treatment planning.

It may also be possible for the resident to obtain experience with Ontario Review Board hearings.

Supervisors: Dr. Laura Fazakas-DeHoog
Dr. Tracy Desjardins

Additional Adult Mental Health Track

Supervisors: Dr. Paul Frewen
Dr. Marnin Heisel

London Clinical Psychology Residency Consortium 2019-2020

TRACK	Adult Mental Health (see p. 45)			
ORGANIZATION	London Health Sciences Centre (LHSC)		St. Joseph's Health Care London (SJHC)	
SITES	Victoria Hospital (see p. 46)	Riverview (see p. 48)	Parkwood Institute (see p. 49)	Southwest Centre for Forensic Mental Health Care (see p. 51)
MAJOR ROTATION/ SERVICE *See list of Minor Rotation options (p. 77- 86)	- Cognitive-Behavioural Therapy (CBT) - Dialectical Behaviour Therapy (DBT) - Geriatric Mental Health Program (GMHP) - Prevention and Early Intervention Program for Psychoses (PEPP) - Traumatic Stress Service	- Adult Eating Disorders Service	- Operational Stress Injury (OSI) Clinic - Adult Inpatient Psychiatry - Adult Ambulatory Services - Concurrent Disorders Services	Inpatient and Outpatient Services, including assessment, treatment, rehabilitation units and Outreach Team

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
Adult Mental Health	Prevention and Early Intervention Program for Psychoses (PEPP) (LHSC) (4 days)	Operational Stress Injury Clinic (SJHC) (3 days)	Paediatric Medical Clinics (LHSC) (1 day)
Adult Mental Health	Traumatic Stress Service (LHSC) (2 days) Cognitive Behavioural Therapy (LHSC) (2 days)	Southwest Centre for Forensic Mental Health (SJHC) (3 days)	Spinal Cord Rehabilitation (SJHC) (1 day)