

# SickKids®

THE HOSPITAL FOR  
SICK CHILDREN

## Pre-Doctoral Residency in Pediatric Psychology

2019-2020



Department of Psychology  
The Hospital for Sick Children, Toronto, ON, CANADA

*The Hospital for Sick Children Pre-Doctoral Internship in Paediatric Psychology is accredited with the Canadian Psychological Association (2011/2012-2017/2018).*

## Overview

**Three pre-doctoral residency** positions in pediatric psychology are offered through The Department of Psychology at the Hospital for Sick Children in Toronto, Ontario. The one-year, full-time training position begins on **September 3, 2019**. Employment is contingent upon meeting the Hospital for Sick Children's Occupational Health Requirements.

The full-year pre-doctoral internship program was initially accredited with the Canadian Psychological Association<sup>1</sup> (CPA) in 2001, and in 2012, was awarded a re-accreditation term of six years. We completed our re-accreditation process and are awaiting a decision from the CPA Accreditation panel. The internship standards from CPA for application, rotations and delivery of the program are followed.

Our overall goal is to prepare the resident for the varied demands of professional practice in psychology -- skills that are readily transferred to a wide range of community settings. To learn more about our department and residency program, please visit: [www.sickkids.ca/Psychology/Education-and-learning/Predoctoral-internship-program/index.html](http://www.sickkids.ca/Psychology/Education-and-learning/Predoctoral-internship-program/index.html).

The philosophy of the residency mirrors that of The Hospital for Sick Children with the needs of the patient and family being central. An evidence-based/best practice approach is used and clinical research is closely integrated with patient care activities. Conceptualizing the child's cognitive and psychosocial needs and challenges within a developmental framework is integral to practice.

The Department of Psychology at SickKids exists as an independent department within a Child Health Services cluster model of service provision, and includes approximately 28 psychologists made up of individuals specializing in neuropsychology, clinical and health psychology, 10 psychometrists, and numerous research staff providing services and conducting research within the hospital. In addition to clinical training at the residency level (3 positions, accredited by the Canadian Psychological Association), the Department offers clinical training at the post-doctoral level in Pediatric Neuropsychology (2 positions), Pediatric Health Psychology (1 position) and graduate practicum level.

## Goals of the Residency

The goal of our program is to prepare developing professionals with the skills, abilities and knowledge base to work within the scientist-practitioner model. Residents will gain experience

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<sup>1</sup> CPA Office of Accreditation  
Canadian Psychological Association  
141 Laurier Avenue West, Suite 702  
Ottawa, Ontario K1P 5J3  
1-888-472-0657

with children of all ages who present with psychological problems related to congenital, perinatal, or acquired medical conditions, or mental health issues. Residents are exposed to a wide array of patient populations in both inpatient and outpatient settings. Graduates of our program have entered into post-doctoral fellowship positions, positions in academic medical centers, academic settings, school boards, multi-disciplinary community clinics, and private practice

Through their residency, trainees develop an increased awareness of, and acquire skills with respect to diagnosis, assessment, consultation, treatment, and professional and ethical issues. These general goals are met through weekly supervision within each rotation, and meetings with the director of training and selected staff.

Specifically, over the course of the residency, residents will be exposed to the following:

I. Ethical considerations and professional conduct. Discussions will refer to the Canadian Code of Ethics for Psychologists, the APA Ethical Principles of Psychologists, and the Standards of Professional Conduct to explore real and hypothetical situations that challenge health care professionals.

II. Jurisprudence. Psychologists in Ontario are regulated by legislation that governs the practice of psychology. These laws and their regulations will be reviewed with special consideration given to how they affect professional practice. Situations in which the law and the code of ethics might conflict will also be discussed.

III. Role and unique contribution of psychologists in a pediatric medical setting. Ways in which psychologists can work effectively within the culture and behavioural expectations of a tertiary/quaternary care pediatric medical setting will be addressed. This will provide a contrast to the ways in which psychologists work within mental health and adult settings.

IV. Effective communication with medical staff, colleagues, patients and families. Different types of communication are required when dealing with various parties: professional staff, patients, families and other 'consumers'. Methods for communicating information appropriate for different parties will be addressed.

V. Evidence-based care within a scientist-practitioner model. The best care is that which is proven to be most effective and cost efficient. Residents will be taught to determine the best methods for assessment and intervention, based on valid research and outcome studies.

VI. Continuing education as an ongoing component of professional practice. Residents will learn the responsibility of self-directed learning as a life-long process. They will be encouraged to seek additional educational opportunities throughout their careers.

### **Program Structure**

Clinical training will consist of assessment, intervention and consultation for a wide range of pediatric disorders and illnesses seen in a tertiary health care centre (ages 0-18 years). Each resident selects 3 or 4 supervised rotations during the year, one from each of 3 thematic areas of Pediatric Psychology:

- **Assessment:** *Neuropsychology: Assessment and Programming OR Diagnostic/Learning and Academic Interventions*
- **Intervention:** *Pediatric Clinical and Health Psychology*
- **Clinical Research**

**Each rotation comprises 20 hours per week for 6 months.** The resident will choose to emphasize either **intervention** or **assessment** by working in that rotation two days a week for the entire year. If the resident elects to emphasize intervention, they will *typically* work in the same intervention rotation for the entire year and will have a total of 3 rotations. This allows the resident to carry longer term cases and to attain a higher level of independence in their therapy skills over the training year. Should a resident elect to emphasize assessment, they will change rotations mid-year in order to gain experience with different populations, different assessment techniques and different supervisors resulting in a total of 4 rotations.

Within each rotation, residents are offered an appropriate degree of independence in meeting the clinical demands so that their current skills will be broadened and enhanced and their knowledge base increased.

Residents meet with the Residency Coordinator on a regular basis. In this setting, there is an opportunity to share and discuss ethics and experiences within the context of specific rotations, and to deal with individual issues as they arise. Over the course of the residency, the types of issues dealt with in these joint meetings will reflect the increasing autonomy and responsibilities expected of the developing trainee. The goal of these meetings is to enhance the professional growth and development of residents.



### **Rotations**

Clinical training will consist of assessment, intervention and consultation for a wide range of pediatric disorders and illnesses seen in a tertiary health care centre (ages 0-18 years). Rotations are offered to allow the resident to work with a diverse range of patients under the supervision of various staff psychologists, to provide service across multiple programs, and to participate in focused research.

### **Assessment**

All assessment rotations offered include the following common learning objectives. The resident will gain experience in:

- Administering a broad range of assessment tools, including cognitive, academic, psychosocial, behavioural, and functional measures

- Conducting comprehensive patient and family interviews
- Integrating and communicating information from the history, observed and reported behaviour, test results and school performance in the context of brain-behaviour relations through report writing and clinical feedback
- Providing consultation to members of the multidisciplinary team, families, schools, and other community agencies
- Developing recommendations for effective treatment management strategies, educational planning, and advocating for appropriate community-based resources
- These objectives are also facilitated through directed reading, structured supervision based on clinical cases and developmental neuropsychological principles, as well as attendance at team meetings, outpatient clinics, and multidisciplinary clinical and research rounds

Rotation-specific details are also indicated below:

<b><i>Neuropsychology: Assessment and Programming</i></b>	<b>Patient Populations Served</b>	<b>Age</b>	<b>O/P Ax</b>	<b>I/P Ax</b>
<b>Epilepsy Surgery &amp; Epilepsy Classroom</b>  Dr. Elizabeth Kerr	<ul style="list-style-type: none"> <li>• Epilepsy patients being considered for surgery</li> </ul>	4-18	✓	✓
<b>Epilepsy Surgery &amp; Metabolic/Genetics</b>  Dr. Eva Mamak	<ul style="list-style-type: none"> <li>• Epilepsy patients being considered for surgery</li> <li>• Genetic/Metabolic disorders</li> </ul>	2-18	✓	✓
<b>General Neurology</b>  Dr. Katia Sinopoli	<ul style="list-style-type: none"> <li>• Non-surgical epilepsy</li> <li>• Neuroinflammatory diseases (e.g., multiple sclerosis, CNS vasculitis)</li> <li>• Neurofibromatosis Type1</li> </ul>	4-18	✓	
<b>Haematology/Oncology</b>  Dr. Sharon Guger Dr. Laura Janzen	<ul style="list-style-type: none"> <li>• Cancer (largely acute lymphoblastic leukemia, brain tumours)</li> </ul>	3-18	✓	
<b>Neonatal Neurology</b>  Dr. Tricia Williams	<ul style="list-style-type: none"> <li>• Neonatal brain injury or disruptions in neurodevelopment (e.g., prematurity, hypoxic-ischemic encephalopathy, infectious disease)</li> </ul>	3-18	✓	
<b>Stroke</b>  Dr. Robyn Westmacott	<ul style="list-style-type: none"> <li>• Arterial ischemic stroke, cerebral sinovenous thrombosis or other neurovascular conditions such as moya moya disease</li> </ul>	3-18	✓	

<b>Transplant &amp; Regenerative Medicine</b> Dr. Anna Gold	<ul style="list-style-type: none"> <li>Children with congenital or acquired organ deficits (heart, lung, liver, kidney) or intestinal failure</li> </ul>	2-18	✓	✓
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<i>Diagnostic/Learning and Academic Interventions</i>	<b>Patient Populations Served</b>	<b>Age</b>	<b>O/P Ax</b>	<b>I/P Ax</b>
<b>Attention Deficit - Hyperactivity Disorder and related disorders</b> Dr. Jennifer Crosbie	<ul style="list-style-type: none"> <li>Children with suspected attention-deficit/hyperactivity and related disorders</li> </ul>	6-18	✓	
<b>Cardiology</b> Dr. Renee Sananes	<ul style="list-style-type: none"> <li>Children with complex congenital and acquired heart conditions</li> </ul>	3-18	✓	

### **Intervention**

Intervention rotations in clinical/health will all include the following core learning objectives. The resident will gain experience in:

- Formal diagnostic interviewing, report writing, and feedback to patients and families.
- Treatment with individual clients, family, and parenting sessions
- Treatment of comorbid conditions
- Learning to integrate psychological data with questionnaires and parent interview data, case formulation, feedback and report writing
- Working within an interdisciplinary team
- Being supervised through role-modelling, demonstrate, coaching, case conceptualization
- Actively participating in clinic rounds, seminars and case presentations

Therapeutic orientations include:

- Cognitive Behavioural Therapy
- Motivational Interviewing
- Behaviour Modification
- Play and Art Therapy
- Acceptance and Commitment Therapy
- Mindfulness
- Family psycho-education, parent skills

<b><i>Intervention: Clinical/Health Psychology</i></b>	<b>Patient Populations Served</b>	<b>Age</b>	<b>O/P Ax</b>	<b>I/P Ax</b>
<b>Chronic Pain</b> Dr. Danielle Ruskin Dr. Catherine Munns	<ul style="list-style-type: none"> <li>Children and adolescents with chronic pain conditions (e.g., neuropathic pain after injury, headache, neuromuscular disease), with disability problems secondary to pain, and pain as a presenting sign of depressive, anxiety, or somatoform disorders</li> </ul>	3-18	✓	✓
<b>Eating Disorders</b> Dr. Margus Heinmaa Dr. Melissa Lieberman Dr. Brooke Halpert	<ul style="list-style-type: none"> <li>Children and adolescents experiencing eating disorder psychopathology</li> </ul>	6-18	✓	✓
<b>Haematology/Oncology</b> Dr. Maru Barrera	<ul style="list-style-type: none"> <li>Children, siblings and caregivers coping with cancer treatment and/or bereavement</li> </ul>	2-18	✓	✓
<b>Pediatrics/Oncology/ Cystic Fibrosis</b> Dr. Joel Tourigny	<ul style="list-style-type: none"> <li>Children and adolescents experiencing mental health issues in the context of their chronic health conditions</li> <li>Children presenting with somatic disorders or behaviours interfering with medical treatment</li> </ul>	2-18	✓	✓
<b>Suspected Child Abuse and Neglect (SCAN)</b> Dr. Jasmine Eliav Dr. Lana DePatie	<ul style="list-style-type: none"> <li>Children and adolescents who may have been maltreated or neglected</li> </ul>	0-18	✓	
<b>Team Obesity Management Program</b> Dr. Elizabeth Dettmer Dr. Andrea Regina	<ul style="list-style-type: none"> <li>Children and adolescents with complex obesity</li> </ul>	6-18	✓	

## Research

SickKids Centre for  
Research and Learning  
Be part of it.



The Hospital for Sick Children is an active and exciting research environment. Research in Psychology at SickKids includes:

- Characterizing the impact of various adverse insults on development
  - Understanding the core deficits associated with medical and neurodevelopmental disorders
  - Program development of evidence-based intervention for children treated with acute or chronic medical conditions
  - Program development and evaluation to optimize transition to adult medical care
  - Identifying relationships between neuroimaging measures of brain structure/function and neurocognitive outcome
- and more...*

*Most Staff Psychologists at SickKids are actively engaged in clinical research as well as clinical practice, and research-based rotations are arranged individually.*

## Other Training Opportunities

Additional training opportunities may include:

- Family Therapy
- Psychological intervention and/or parenting training with medically-complex patients
- Lectures and presentations within the hospital or for community groups
- Providing supervision to more junior trainees (practicum and/or graduate students) during the latter half of the residency to develop competency in the supervisory role.

## Supervision

In accordance with CPA Accreditation Standards (2011), residents will have a primary supervisor in each rotation and will receive **at least 3** hours of individual face-to-face supervision and 1 hour of shared supervision per week. Regularly scheduled, one-to-one supervision will involve case review, setting and monitoring of training goals, and professional development. Supervision follows a developmental model and fellows will work with a variety of faculty members throughout the fellowship for broad exposure to different styles of clinical practice and supervision. Group professional support/supervision meetings with the Residency Coordinator also takes place on a regular basis to address topics in professional/ethical standards, professional practice issues, cultural and individual differences, and diversity.



## Didactics

A variety of formal and informal educational opportunities exist. A monthly Advanced Psychology Seminar day has been developed to provide residents with protected time to develop and enhance their clinical skills. Rotation-specific readings will be suggested by individual faculty. Sample format below:

<i>TIME</i>	<i>TOPIC</i>
9:00-10	Health Psychology Rounds
10:00 -11:30	Case Consultation/Practice
12:00 – 1:00	BREAK
1:00 – 3:00	Professional Practice Issues
3:00 – 4:00	Didactic (e.g., assessment, research)

In addition, residents will be expected to attend:

- Psychology Department Rounds (monthly)
- Quarterly Greater Toronto Area (GTA) Psychology Seminars. The goal is provide didactic and networking opportunities to residents/interns across the GTA with a view toward providing connections as they move into their early professional careers.

### Optional

- Directed Neuropsychology Readings
- Clinical Health Evaluative Science (CHES) Rounds
- Brain and Behavior Cross-Talks
- Neuroscience and Mental Health Program (SickKids Research Institute) Symposia
- Pediatric Grand Rounds
- Clinical and research rounds associated with individual rotations (e.g., Neurology, Neurosurgery, Hematology/Oncology, Psychiatry)

## Evaluation

The evaluation process is designed to be dynamic and proactive. The goals of the evaluation process are to optimize the residency experience for each trainee, to provide constructive feedback, and to ensure that all residents attain their personal goals and the goals of the program.

In an effort to monitor the Residency Program and to ensure its excellence, we also strive to obtain feedback from each resident. In addition to the scheduled meetings outlined below, *ad hoc* meetings will be arranged as necessary. The Residency Coordinator provides leadership in the evaluation process and is responsible for its integrity. Formal written progress evaluations are prepared by the training faculty staff at the mid-point and conclusion of each rotation. Residents whose performance is not at an expected level of competence will be advised regarding the problem areas in their performance, and a specific plan to remediate those weaknesses will be developed.



### Facilities

Despite our large numbers, the department has sufficient office and testing space for all its members. Residents share a large office, but have individual desk space, computers and access to secretarial support. They also have access to bookable office space can be reserved for individual assessments or therapy. Other resources in the department include an observation/interview room with a one-way mirror for training purposes, a group therapy room and test library. Residents have access to individual computers with internet connection, a private phone line and access to electronic medical journals through the University of Toronto Library.

### Stipend and Benefits

**The stipend for the 2019-2020 year is set at \$31,500 CAD.** Residents are eligible for the modified SickKids benefits package (health and dental), 2 weeks paid vacation, 9 statutory holidays recognized by the hospital, 2 paid “float” days, and 5 days paid professional development leave. A \$500.00 professional development fund is provided for each resident to be used for attendance at scientific conferences or professional development activities.

### Eligibility

Applicants must be enrolled in a doctoral program in clinical psychology accredited by the Canadian and/or American Psychological Associations. By the time of application, students should have completed a master’s degree (or equivalent), all compulsory doctoral course work, comprehensive examinations, dissertation proposal approved, and at **least 600 hours of supervised practica**. Applicants with academic and practical experience in child assessment and treatment are stronger candidates. As well, those applicants who are further along in their dissertation are also considered stronger candidates. A broad range of exposure and experience is preferred. Applicants who bring diversity to the program (e.g., fluency in French or experience with under-served populations) are especially encouraged to apply. In accordance with Canadian immigration requirements, preference is given to applicants who are Canadian citizens, or permanent residents of Canada.

The residency begins on the first working day of September and ends on the last working day in August of the following year.

## Application

Our program uses the APPIC standard application, available on-line at <http://www.appic.org/>. The application package includes a form entitled "Verification of Internship Eligibility and Readiness" which must be completed by the Graduate Program Director of Training and submitted as part of the application.

### Required supporting materials include:

- Cover letter stating applicant's professional plans and special interest in the Sick Kids Residency Program (or refer to APPIC application essays)
- Curriculum Vitae
- Official transcripts of graduate transcripts
- APPIC Verification of Internship Eligibility and Readiness form
- Three (3) letters of reference (using the standardized APPIC reference form). At least two (2) letters should be from supervisors familiar with the applications clinical skills.

**Deadline for submission of applications is 11:59 p.m., EST on 1<sup>st</sup> of November each year.**

The Psychology Residency Program at SickKids conforms to the guidelines of the Association of Psychology Postdoctoral and Internship Centers (APPIC) and is also a member of the Canadian Council of Professional Psychology Programs (CCPPP). We participate in the Computer Matching process sponsored by APPIC. All applicants must register with the National Matching Services ([www.natmatch.com/psychint](http://www.natmatch.com/psychint)) and/or APPIC ([www.appic.org/](http://www.appic.org/)) to be considered. Complicated applications are rated independently by members of the Residency Committee and are ranked. This residency site agrees to abide by the APPIC Policy that no person at this training facility will solicit, accept or use any ranking-related information from any applicant.

**Copies of the APPIC application forms can be downloaded from: [www.appic.org](http://www.appic.org)**

**The Hospital for Sick Children Program Code Number: 181811.**

- Candidates will be notified on the *CCPPP Universal Notification Date* - <https://ccppp.ca/> regarding whether or not they are being offered interviews (on site or by telephone).
- Interviews will be conducted with selected applicants during the 2<sup>nd</sup> and 3<sup>rd</sup> weeks of January 2019. While on-site interviews are not required, all candidates are invited to visit the hospital and meet with staff if possible.
- The matching process is completed through the National Matching Service.

In accordance with federal privacy legislation (*Personal Information Protection and Electronics Documents Act* – <http://laws.justice.gc.ca/en/P-8.6>), only information that is required to process your application is collected. This information is secured and is shared only with those individuals involved in the evaluation of your residency application.

**Contact:**

Sharon L. Guger, Ph.D., C. Psych.,  
Director of Clinical Training/Residency Coordinator  
Department of Psychology, Room 6294C Black Wing  
Hospital for Sick Children  
555 University Avenue, Toronto, ON M5G 1X8  
Tel: 416-813-6784 / Fax: 416-813-8839  
[sharon.guger@sickkids.ca](mailto:sharon.guger@sickkids.ca)

**Information about SickKids and Toronto**

The Hospital for Sick Children (SickKids), affiliated with the University of Toronto, is recognized as one of the world’s foremost paediatric health-care institutions. It is Canada’s leading centre dedicated to advancing children’s health through the integration of patient care, research and education. With a staff that includes professionals from all disciplines of health care and research, SickKids provides the best in complex and specialized care by creating scientific and clinical advancements, sharing knowledge and expertise and championing the development of an accessible, comprehensive and sustainable child health system. The Peter Gilgan Centre for Research and Learning is a hub where researchers and learners can congregate and share ideas to transform the current state of child health care since its 2013 opening.

SickKids is located in downtown Toronto, Canada’s largest city. Toronto lies on the shore of Lake Ontario, the easternmost of the Great Lakes. Over 4 million people live in the Greater Toronto Area (GTA). Toronto is a clean, safe, cosmopolitan city with a wonderful network of parks, recreational, and cultural facilities. For more information: [www.seetorontonow.com](http://www.seetorontonow.com)

