

CLINICAL TRAINING PROGRAM

A CLINICAL RESIDENCY WITH AN EMPHASIS IN PEDIATRIC AND CHILD CLINICAL PSYCHOLOGY**

PROGRAM DESCRIPTION

For 2012-2013 Residency Year

****Formerly Internship**

**Department of Psychology
BC Children's Hospital
4480 Oak St.
Vancouver, B.C.
V6H 3V4**

**Updated
August 2011**

**An agency of the
Provincial Health Services Authority**

CONTENT OF PROGRAM DESCRIPTION

BC Children’s Hospital Vision	3
Department of Psychology	3
BC Children’s Hospital	4
Sunny Hill Health Centre for Children	4
Residency Program Outline	
Structure	6
Supervision	8
Research	8
Staff	8
Residency Philosophy & Goals	
Mission Statement	10
Philosophy & Objectives	10
Goals	11
Professional and Educational Programs	12
Specifics of Rotations	
BC Children’s	16
Sunny Hill	18
Residency Specifications	
Duration and Stipend	20
Qualification Criteria for Resident Applicants	20
Application Information	22
Staff Descriptions	
BC Children’s	25
Sunny Hill	33

BC CHILDREN'S HOSPITAL

Vision

Better health for children and youth, achieved with partners who work together to ensure access to the best care in the best setting.

Children's & Women's Health Centre of British Columbia is comprised of BC Children's Hospital, including Sunny Hill Health Centre for Children, and BC Women's Hospital & Health Centre. We are agencies of the Provincial Health Services Authority (PHSA). The mission for our integrated health facility for children is to:

Mission

- **Be a provincial and regional resource providing child and youth health care and services.**
- **Integrate our role as an academic health centre so that excellence in care is driven by learning and applying new knowledge; this quest for new knowledge is driven by clinical questions, and continual learning is driven by passion for what we do.**
- **Provide provincial and regional leadership in assessing and meeting health care needs by working with partners to ensure children and youth throughout B.C. have access to excellent care.**
- **Support, respect and value our people, recognizing they are the heart and soul of the work we do.**

BC Children's Hospital is a teaching hospital affiliated with the University of British Columbia and has a strong research orientation and extensive community involvement. BC Children's is a tertiary care facility which is the main referral centre for children from birth to 19 years with complex medical problems from British Columbia and the Yukon. BC Children's is located in the heart of Vancouver on the Oak Street campus, a landscaped complex that includes BC Children's, the Child & Family Research Institute, and BC Women's Hospital & Health Centre. Sunny Hill Health Centre for Children offers specialized services to children with disabilities and their families from across the province. It is located approximately 15 minutes from the Oak Street campus by car.

DEPARTMENT OF PSYCHOLOGY

The Department of Psychology at BC Children's Hospital was established in 1974 and now manages Psychology Services at BC Children's, Sunny Hill, and BC Women's. We provide a wide range of clinical activities, training, teaching opportunities, and research options. We have approximately 45 full time and part-time Registered Psychologists and Psychometrists working on the two sites. Ours is an independent department affiliated with the three provincial universities, University of British Columbia (UBC), Simon Fraser University (SFU), and University of Victoria (UVIC).

BC CHILDREN'S HOSPITAL SITE

At BC Children's, our department includes over 30 Registered Psychologists and Psychometrists. As a department in a major teaching hospital, we have pursued an integrated mix of clinical services, training, teaching, research, and community partnerships. We provide clinical services, including assessment, treatment and consultation, to the children and families of the province who have major medical or mental health problems. In addition, each year we provide direct clinical training and clinical research opportunities for three to five psychology graduate students from the three provincial universities and other universities across North America and Europe. About 20 of our psychologists work in the area of pediatric psychology. About 14 of our psychologists work in the area of child and youth mental health.

As psychologists, we function as consultants and/or as members of interdisciplinary teams. Over the past 30 years, we have expanded our mandate from providing a small range of assessment activities to offering a wide range of services including: 1) differential diagnosis; 2) assessments for children with complex problems – this may include psycho-educational, neuropsychological and/or socio-emotional assessment, 3) consultations with care teams in the hospital and in the community; 4) short-term therapeutic interventions; 5) longer term psychotherapy as well as 6) research and education/training. In each of the last two years we have provided seven to nine thousand patient visits each year.

SUNNY HILL HEALTH CENTRE FOR CHILDREN SITE

Sunny Hill is a provincial resource providing specialized tertiary care services to children with disabilities, including physical disabilities, sensory disabilities such as hearing loss and visual impairment, and developmental disabilities such as autism spectrum disorder and fetal alcohol spectrum disorder. In collaboration with families and community service providers, Sunny Hill provides leadership in clinical services, research and education. It is a referral centre for children and youth up to 19 years of age who require interdisciplinary assessment, treatment and follow-up. Services complement but do not duplicate those offered in the community and exclude acute health care services. There are 7 permanent staff in Psychology at Sunny Hill.

Psychology is involved in a number of specialty teams under the umbrella of the Child Development and Rehabilitation Program, including the BC Autism Assessment Network (BCAAN), Complex Developmental and Behavioural Conditions Team (CDBC), Visual Impairment Program (VIP), Hearing Loss Resource Team, the Neuromotor Team, and the Brain Injury Resource Team. The mandate of each team includes multidisciplinary assessment, diagnosis, recommendations, and referral to community services, as well as a leadership role in training, education and research for professionals working in this area across the province. Most children are seen on-site, as outpatients. Some outreach services are provided, primarily to northern British Columbia. A small ward provides inpatient rehabilitation services for children with central nervous system injuries. Psychologists at Sunnyhill are involved in research, with recent investigations including long-term outcome for individuals receiving a very early diagnosis of autism spectrum disorder, desensitization

to dental procedures for children with autism, and consumer evaluation of innovative formats for psychology reports. Educational programs are provided to community groups on request.

RESIDENCY PROGRAM OUTLINE

BC Children's Hospital is proud of its long tradition of providing quality internship training (now referred to as a residency). We are presently beginning (2011) our thirtieth year of a continuously operating psychology residency program. Many of our former residents have gone on to successful psychology careers in B.C., other Canadian provinces and the U.S., and most have maintained close ties with our Department. Beginning with the 1992 academic year, this internship was expanded to two interns and included the opportunity to work at Sunny Hill Health Centre for Children and the G.F. Strong Rehabilitation Centre. Beginning with the 2002 academic year, the internship expanded to three interns. Since 2008, our internship has included only two sites; BC Children's and Sunny Hill. Our program is a broad based clinical psychology residency designed to build competence in pediatric and child clinical psychology, including medical psychology, mental health, and developmental disabilities. The primary focus of the training is on children and youth as well as their families.

There is a strong emphasis on specialized assessment skills across the developmental spectrum and on short-term therapeutic interventions. Some trainees may choose to emphasize specialized areas related to their academic backgrounds, but our program ensures that all trainees obtain a broad base of skills, so that they are prepared to practice with a broad range of ages and presenting problems, in a variety of settings.

Residents have access to an extremely varied menu of seminars and outside lectures. They are free to attend relevant seminars and rounds at BC Children's plus those presented by Sunny Hill. In addition, the Psychology Departments at both the University of British Columbia and Simon Fraser University have colloquia and other invited addresses open to our residents.

We are a CPA accredited** clinical psychology residency and we abide by the rules and deadlines established by these professional organizations. We **will** be taking part in the APPIC computer match on selection day and consequently all student applicants must also be registered for the match (please see specific information on this in our information package). Potential applicants can also read about the application process on the APPIC website.

**** We were previously a CPA and APA accredited residency. In February 2007, the Council of Representatives of the APA voted to cease accrediting doctoral and internship programmes in Canada. Concurrent CPA/APA accreditation for all programs will cease as of September 2015 and as of January 1, 2008, the APA no longer accepts new applications for accreditation of Canadian programmes. Given this situation, we did not apply for APA re-accreditation for the 2012-13 year. For further information please refer to the Accreditation sections of both the CPA and APA websites.**

STRUCTURE

The residency seeks to develop a balance of both assessment and therapy skills across a broad range of patient populations. BC Children's offers experiences both in specialized assessments and various forms of short term intervention and therapies (see our Department Programs List later in this document). Residents carry some longer term therapy cases and learn the skills required for short term inpatient therapeutic interventions.

In order to meet the goal of a broad-based residency with both assessment and therapy experience, the resident and the Director of Training will meet and review the specific strengths and weaknesses of the individual and devise an individual program that is mutually satisfactory to both the student and the program. Goal-setting and evaluation reflect a competency-based approach to training.

Students begin with a two week orientation at Children's and continue with didactic activities and group supervision at BC Children's on Mondays and Fridays throughout the year. This consistent Monday and Friday placement allows for peer support among the residents, and also makes it possible to carry one or two longer term therapy cases throughout the year. The month of August, at the end of the residency, is also spent together at BC Children's working on the completion of all tasks.

Tuesdays, Wednesdays, and Thursdays are devoted to major and minor rotations. Major rotations occur within three training blocks: (1) Pediatric Psychology (based at BC Children's), (2) Child and Youth Mental Health (based at BC Children's), and Developmental Disabilities (based at Sunny Hill). At any given time, there is one resident working in each of these three areas; each resident cycles through all three blocks over the course of the year. Because there is only one trainee working in a given area of practice at one time, residents are not competing for rotation supervisors, and if two residents request experience in the same specific area in the same year, we are usually able to accommodate their wishes.

At the beginning of each block, the resident will meet with the Director of Training and the Site Supervisor to set mutually agreed upon goals and to design a plan that most closely meets the needs and interests of the student and the site. At the end of the block, the goals will be reviewed and adjustments made prior to the next rotation. The resident meets weekly with the Site Supervisor and participates in group supervision with the Director of Training. Group supervision is seen as an essential component of our residency, bringing continuity and coherence to the experience of working with different rotation supervisors throughout the year. This also allows us to fine tune and refine the goals and experiences of the resident as we go along. We can be flexible and adjust case loads or modify the training depending on the day-to-day experience of the resident.

In addition, the residents are expected to attend and present at weekly Case Consultations and bi-weekly Clinical Rounds at BC Children's where specific cases and therapeutic issues are discussed. A requirement of the residency is that each resident will present at least once

at Clinical Rounds at BC Children's and once at Sunny Hill. Seminars on Ethical Issues, Therapy, Assessment, Supervision, and Diversity plus other topics of interest are arranged with staff psychologists and scheduled on a regular basis for the benefit of the residents. Please see the description of typical course offerings included in this package.

Vancouver is one of the most culturally diverse and ethnically mixed communities in North America. Consequently, the population the hospital serves is equally diverse. Thus, for example, the hospital has provided interpreters in over 35 different languages. This gives a sense of the opportunities residents have to practise psychology within a positive, multicultural milieu. We are equally committed to training and experience in the area of multicultural issues. While the sessions vary from year to year, past years' residents have had the opportunity to attend sessions on: First Nations Health Care Issues, Understanding Your Chinese Patient: An Introduction to Cantonese Language and Culture, and American Sign Language. These courses are offered site-wide exclusively for health workers who wish it.

We are committed to the idea that this is a training year for the residents where they can get exposure to a wide range of skills and work with a very diverse population. This also implies the luxury of time to proceed at a slower pace or at a more in-depth level in working on a case (either therapy or assessment) than the staff psychologists may normally do. This allows the residents to be more confident in making the judgement of when they have met the point of diminishing returns in their work with a client. By the end of the year, however, we would expect the residents to be carrying a more realistic case load in order to be better prepared for the day-to-day experience of working as registered/licensed psychologists.

Psychologists have their offices located throughout the hospital depending on their function. The residents have assigned offices fully equipped with testing and training materials and a computer. They also have direct access to separate play/assessment and family interview rooms equipped with one way mirrors and video equipment.

SUPERVISION

The resident's rotations and experiences are coordinated through the Director of Training at BC Children's, who also acts as the BC Children's Site Supervisor. Sunny Hill also has a Site Supervisor responsible for day-to-day administration and supervision and who also coordinates with the Director of Training. Group supervision occurs weekly at BC Children's with the Director of Training. Case-by-case supervision is with the individual psychologists managing the cases. Direct individual supervision is guaranteed to meet the minimum requirement of 4 hours per week and in fact, when all types of supervision are considered, the total is more like 5 – 6 hours.

Our program places emphasizes thoughtful supervision, based on the model below:

THE FIVE STEP MASTERY MODEL

The residency is based on a mastery model with the following training steps:

1. Observation (Resident of staff).
2. Joint assessment/treatment (Shared responsibility for case management).
3. Observation (staff of Resident) – the observation is direct, requires the staff to be in the room and prepared to intervene if necessary.
4. Resident solo – staff pre- and post-sessions planning and debriefing with the resident (may use audio, video or one way mirror if necessary or appropriate).
5. Arms length supervision – resident carries a case load and goes over each case at regularly scheduled supervision sessions.

It is the individual psychologist's responsibility to select an appropriate teaching case to work with the resident and to monitor and record the progress directly. It is not expected that the resident would reach the highest levels in the first block of rotation, unless they had prior experience in the area.

RESEARCH

The Department of Psychology at BC Children's Hospital is actively involved in research. Graduate students, post-doctoral fellows and psychologists participate in various projects often in collaboration with medical colleagues in their programmes. Topics addressed in recent or current projects include:

- Effectiveness of a parent training program specifically designed for parents with ADHD
- Treatment outcome in children with complex chronic and recurrent pain
- Cognitive functioning in children with chronic kidney disease

- Risk factors for children referred for investigation of suspected child abuse and neglect
- Longitudinal follow-up and case study reports of children with various rare metabolic disorders
- Multi-site studies of the safety and treatment effects of sapropterine dihydrochloride for treatment of phenylketonuria
- Cognitive and behavioral outcomes of children with congenital heart disease
- Infant self-regulation predicts executive functions at preschool age in children born very preterm
- Pain and distress recovery as early predictors of temperament in toddlers born preterm
- Neonatal pain-related stress in relation to neurodevelopment and behavior in children born preterm
- Understanding the psychosocial needs of youth with concurrent mental health and substance use disorders: Informing evidence-based treatment and management

In keeping with the scientist-practitioner model that serves as the basis for residency training, each resident is expected to present a paper at the end of the residency year, applying some theoretical or research model to the practical setting. Research is defined in its broadest terms and includes everything from creating an annotated bibliography of books that deal with common hospital situations to program evaluation. This might involve, for example, doing a literature search and the work leading up to a formal research proposal on some applied, hospital relevant topic. Alternatively, it could also take the form of an in-depth case study tied to how different therapy approaches would predicate different interventions and different therapeutic outcomes. Designated time is available for this project.

STAFF

In total, there are approximately 45 psychologists working across the sites that are involved in the training program. All are doctoral-level fully registered members of the College of Psychologists of B.C. or are in the process of obtaining registration in British Columbia and have extensive experience in the health care field gathered over a number of years. Please see the attached staff description lists for further details.

As would be expected in such a large group, approaches to assessment and therapy are extremely varied so at our site no one specific school of psychology or therapeutic perspective prevails. Consequently, emphasis for the residents is on developing their own therapeutic style and in acquiring a broad base of skills that can be applied in a range of settings. The opportunity to observe and work with psychologists with unique expertise in various health and mental health areas is one of the main assets of the program.

RESIDENCY PHILOSOPHY & GOALS

MISSION STATEMENT

The mission of our residency program is to provide excellent clinical, ethical and professional training to enable residents to become highly competent, caring clinical psychologists able to function in complex, interdisciplinary health and mental health settings.

PHILOSOPHY AND OBJECTIVES

In keeping with our commitment to the scientist practitioner model of our residency, we are committed to training exemplary clinical psychologists. That is, we are training psychologists who base their practice on knowledge and research, and who provide care that is respectful and appropriate to the needs of the client (i.e. taking into account such things as their developmental level, age, gender, cultural background and other characteristics). Their practice as psychologists is based on clinical judgment drawn from direct experience and expertise with a number of different assessment and therapy techniques. In other words, we are committed to training psychologists who will meet or exceed the national and provincial standards of practice for professional psychologists. Our training model is broad based and experiential and we are committed to the belief that this is an opportunity for the students to get exposure to, and training in, a wide range of skills and in working with a very diverse population. It is a *training* year where the emphasis is on learning rather than on simply increasing department productivity.

These values are in concert with those developed for BC Children's Hospital as an institution, as articulated in the following statement:

“In our daily efforts we will: strive for excellence in providing the best possible quality patient care, education, and research; demonstrate respect for each other’s unique qualities; be open and honest; work cooperatively and collaboratively with each other, those we serve and our other partners; act with compassion and empathy; be optimistic, courageous and innovative; be accountable; and be just and fair with people and act with a social conscience.”

In addition, the hospital has a strong commitment to treatment, teaching and research in child health. Advancing knowledge has been identified as a specific aspect of the strategic plan, defined as:

“maximizing collaboration with UBC and the Research Institute as well as other academic institutions in the province to optimize the research and educational opportunities focused on the health needs of children and youth”.

Following directly from our philosophy and values are a number of specific goals and objectives for our residency program.

GOALS

Based on Fouad et al (2009). Competency benchmarks: A developmental model for understanding and measuring competence in professional psychology. Training and Education in Professional Psychology. Vol 3 (4, Suppl), S5-S26.

Goal 1: Competence in Professionalism

Goal 2: Competence in Reflective Practice, Self-Awareness, and Self-Care

Goal 3: Competence in Scientific Knowledge and Methods

Goal 4: Competence in Relationships

Goal 5: Competence in Individual and Cultural Diversity

Goal 6: Competence in Ethical-Legal Standards and Policy

Goal 7: Competence in Interdisciplinary Systems

Goal 8: Competence in Assessment

Goal 9: Competence in Intervention

Goal 10: Competence in Consultation

Goal 11; Competence in Research/Evaluation

Goal 12: Competence in Supervision

Goal 13: Competence in Teaching

Goal 14: Competence in Management/Administration

Goal 15: Competence in Advocacy

PROFESSIONAL AND EDUCATIONAL PROGRAMS

CASE CONSULTATION

Psychologists on staff meet weekly on an informal basis to talk about particular cases that they find difficult or puzzling. The emphasis is on a supportive, problem solving approach to what are often very complex cases. Ethical issues and issues of psychologists working in a medical setting are frequently discussed in the context of particular cases.

CLINICAL ROUNDS and PROFESSIONAL DEVELOPMENT

The Psychology Department as a whole meets bi-weekly. Sessions focus on discussions of recent research and/or theoretical or ethical issues which might be relevant to members of the department. Usually one member of the department is responsible for each session and may include a staff presenter and/or speakers from the community. Particularly interesting or difficult cases may also be presented. The student is required to present at least once during their time in the department. The Psychology department each year puts on a series of education presentations for the benefit of any hospital personnel or interested individuals from the community. Each year usually has a theme and both in-house and outside speakers are used.

Selected Topics from Professional Development Series & Clinical Rounds

Presenters	Topics
Dr. Sam Doesburg Child Health Research Inst	Altered cortical processing in children born very pre-term revealed by magneto encephalography (MEG)
Dr. Michael Catchpole Anxiety BC	DVD Screening of <u>A Parent's Guide to Separation Anxiety Disorder</u> , Produced by Dr. Catchpole
Dr. Barbara Rosen BC Children's Hospital	Clinical Hypnosis for Anxiety and Symptom Management: A Review of Relevant Aspects from a workshop with Dr. Gary Elkins
Dr. Andrea Chapman Dept of Psychiatry UBC	Clinical Perspectives in Prescribing Psychotropic Medications to Children and Youth
Dr. Teresa Newlove Sunnyhill Hospital	Improving Communications between the Assessment Networks and the School System
Dr. J. Chung & Dr. J. Lessard BC Children's Hospital	Initiatives in Paediatric Palliative Care
Dr. Chris Gibbons BC Children's Hospital	Two Year Outcomes of children treated in the ADHD Clinic

In addition to the above professional and educational programs, the student is free to attend any of the various Medical or Allied Health Professional rounds presented at either of the hospital sites.

SEMINARS

I ETHICAL ISSUES

This seminar has been offered as either a full day workshop for residents, staff, and psychologists in the community or as a series of in-house seminars for residents and staff. The focus is on ethical issues in working with children and youth and each year we have included both internal staff and outside speakers. There are also opportunities to attend ethics workshops hosted by the British Columbia Psychological Association, the College of Psychologists of British Columbia, and other institutions.

COORDINATORS/INSTRUCTORS: Dr. Sandra Clark & Dr. Ann Robson

Sample Topics :

- Informed Consent & Confidentiality
- Models of Ethical Decision Making
- Provincial and National Codes of Ethics/Standards of Practice
- Balancing Professional, Regulatory, and Institutional Policies
- Ethics & Supervision
- Ethics around the use of Social Media and Social Networking

II. PLAY THERAPY

This seminar consists of didactic training coupled with a therapy case to ensure experiential training. The Play Therapy seminars are jointly offered as an Interprofessional Educational opportunity with psychology and psychiatry.

COORDINATORS: Dr. Sarina Kot, Dr. Emily Piper & Dr. Marilyn Ransby

INSTRUCTORS: Staff within Psychiatry and Psychology

Sample Topics:

- Theoretical Approaches
- Developmental Issues
- Therapeutic Responses
- Experiential
- Case Examples
- Interdisciplinary Collaboration

III. ASSESSMENT

COORDINATORS: Dr. Christine Lilley & Dr. Ann Robson

INSTRUCTORS: Staff at Sunny Hill and BC Children's

Sample Topics:

- Eligibility for Provincial Services with the Ministry of Education and Community Living Services
- Assessing Children with Prenatal Substance Exposure
- Assessing Children on the Autism Spectrum
- Panel Discussion: Nonverbal Assessment Tools
- New Measures for Cognitive Assessment in Young Children:
- Infant and Preschool Assessment

IV. DIVERSITY

COORDINATOR/INSTRUCTOR: Dr. Tina Wang

Sample Topics:

- Diversity, Self-Awareness, and Self-Assessment
- Awareness of Client Worldview
- Skill Development, Consolidation and Application to Clinical Practice
- Culturally Competent Health Care
- First Nations Advocacy
- Key Considerations in Cross-Cultural Mental Health

V. SUPERVISION

COORDINATORS: Dr. Ann Robson & Dr. Christine Lilley

Sample Topics:

- Theories and Methods of Clinical Supervision
- Competency Benchmarks
- The Process of Supervision & Supervisory Relationships
- Supervision Contracts and Paperwork
- Evaluation of Trainees
- Ethical and Legal Issues in Supervision

When available, residents may also participate in a co-sponsored workshop (BC Children's Hospital, Vancouver Coastal Health and Providence Health). In 2008, we had Dr. Carol Falender as the keynote speaker, who presented a full-day workshop on "Enhancing Competencies in Clinical Supervision". In 2009, we participated in a joint session sponsored by the BC Psychological Association and the College of Psychologists to hear the APA Director of Ethics Dr. Steven Behnke present ethical dilemmas with interpretations from both the American and Canadian Codes of Ethics.

Our residents are also involved in supervision for our Practicum level students who begin their training in the spring. This allows our residents to practice skills learned in the didactic sessions and to develop their own supervision style.

SPECIFICS OF ROTATIONS

BC CHILDREN'S

In the roughly eight months that the resident spends on site at BC Children's, they will gain experience in both assessment and therapy. Depending on the specific skill set of assessment tools and experience with various populations that the resident brings to the training experience, specific assessment goals will be set for the time that the resident is at BC Children's. In addition, subsets of therapy, such as group work with anxious pre-adolescents will be identified. These are based on discussion between the Director of Training and the student in order to meet our goals of broad based experience as well as to match the student's pre-existing interests. The resident's time commitments at BC Children's will be prioritized based on these goals. There is a great deal of flexibility in working out exactly what any one resident's schedule would look like. Thus, for example, if a resident identified working with Eating Disordered clients as a preference, the best plan would likely involve total immersion in their program for a number of months, followed by carrying a case load of this population while gradually adding in other populations or skill sets as the year progressed. For other residents, they might be better served by being involved in one assessment program for two days a week and then simultaneously also being involved in a therapy program on a different service. Throughout the rotations, residents will observe psychologists in all aspects of their work that may include assessment, therapy, consultation, multi-disciplinary team functioning, report writing, and community/school liaison. The focus will be on developing skills leading to increasingly independent practice.

Residents have the opportunity to work with the psychologists on a wide variety of psychology services. Residents will be involved in a combination of major and minor rotations organized into a Pediatric Psychology block and a Child and Youth Mental Health block. Both blocks include assessment and therapy. Both blocks may involve inpatients and/or outpatients.

Within the Pediatric Psychology block, residents may complete assessments focused on the cognitive impact of premature birth, genetic or metabolic disorders, epilepsy, or medical treatments such as chemotherapy or surgery to remove a tumour. Assessment and therapy may address the social-emotional impact of chronic pain, differences in one's physical appearance related to a medical condition, or dietary and lifestyle changes required by a chronic illness. Residents may also work with family members around grief and coping in relation to a sudden traumatic event or a chronic condition, or with children who have experienced abuse or neglect.

Within the Child and Youth Mental Health block, residents may consult with families and other professionals regarding issues of differential diagnosis and treatment planning for children with ADHD, mood or anxiety disorders, neuropsychiatric disorders, or concurrent mental health and substance abuse disorders. They may provide intensive treatment in a group milieu for eating disorders. They may specify the contributing factors and differential

diagnoses involved in complex psychiatric conditions or assist with crisis intervention and planning for youth admitted with suicidal or psychotic symptoms.

A detailed list of psychology services at BC Children’s begins on the next page. Sample rotations from previous years are also included, but please keep in mind: *there is a great deal of flexibility in working out exactly what any one resident’s schedule/rotations would look like.*

BC CHILDREN’S PSYCHOLOGY DEPARTMENT SERVICES: ASSIGNMENTS

<p><u>Inpatient Medical Consultation Service</u> Intensive Care Unit Transitional Care Unit Adolescent Care Unit Cardiac Care Burns Surgical Patients Neurosciences Pain Management Multi-organ Transplant Cochlear Implant</p>	<p><u>Mental Health</u> Consultation & Teaching Clinic Mood & Anxiety Disorders Clinic Infant Psychiatry ADHD Neuropsychiatry Eating Disorders Inpatient Adolescent Unit Inpatient Child Unit Youth Concurrent Disorders Program Child & Adolescent Psychiatric Emergency Unit</p>
<p><u>Follow-up Programmes: Infant and Child</u> Neonatal Follow-up Program Complex -Invasive Paediatric Treatment Follow-up Cardiac Surgery Follow-ups (TGA’s)</p>	<p><u>Neuro Sciences</u> Epilepsy Meningomyelocele & Spina Bifida Clinical Non-Epileptic Seizures</p>
<p><u>Oncology</u> Inpatient/Outpatient Treatment Neuropsychological Assessment</p>	<p><u>Paediatrics</u> Biochemical Diseases Child Protection Service Unit Shapedown Program</p>
<p><u>Psychology Assignments for Hospital Wide Services</u> Neuropsychological Service Outpatient Medical Psychology Service Complex Pain Management Program Assessment & Consultation Service to Community (VCH)</p>	

SUNNY HILL

The resident completes a series of activities which lead to increasingly independent practice. Residents have the opportunity to observe the multi-disciplinary assessment/consultation team, which may include paediatric medicine, occupational therapy, physiotherapy, social work, speech/language pathology, and psychology. Residents initially observe psychology assessments/consultations. Subsequently, residents perform part and then all of assessments/consultations including psycho-diagnostic testing and interpretation, report writing, presenting results to families and community teams, and follow-up telephone calls. Most cases focus on differential diagnosis of developmental disabilities. However, there is considerable variety in age and presenting problem. For example, a resident would learn to determine whether an autism spectrum disorder is present in a preschool-aged child with developmental delays, and to describe the complex interaction of prenatal alcohol exposure and traumatic life experiences in contributing to the difficulties of a teenager with poor school performance and many risk-taking behaviours. Opportunities for developing more specialized assessment skills (e.g. visually and hearing impaired children) may become available later in the rotation as the resident's skill level grows. Sunny Hill offers residents experiences in communicating across disciplines as a multidisciplinary team attempts to integrate information and reach consensus on a diagnosis, and in communicating across systems so that programming in schools and community agencies is well-suited to a child's developmental needs.

Residents have the opportunity for discussion of general professional issues, ongoing research projects, and psychologists' special interests. Residents also have the opportunity for discussion with other professional disciplines and to attend departmental meetings, program meetings, and Health Centre rounds.

More specifically, as the majority of children served through Sunny Hill have Developmental Disabilities, there is an expectation that residents will develop a general knowledge base in the field of Developmental Disabilities and residents will be encouraged to select a specific area to learn about more intensively. Residents will also gain knowledge and experience in the demands of working within a multidisciplinary team, including how to communicate effectively and how to integrate multiple perspectives into a coherent conclusion. Residents will become familiar with the resources available to children in systems outside of health care, including education, child protection, and various social service agencies. Residents will gain knowledge of ethical and practical considerations around the sharing of information in order to best support a child.

EXAMPLES OF ROTATIONS AND BLOCKS: Flexibility Emphasized

These sample rotations reflect what a resident *might* do over the course of the year at the BC Children's Hospital Residency. Note that the depiction of major and minor rotations here is oversimplified; while a major rotation usually occupies about two-thirds of the time in each block, and one or more minor rotations fill in the rest of the time, these proportions are for the block as a whole and are not rigidly assigned to days of the week. Depending on

the nature of the work, a minor rotation might be best scheduled as three days a week for four weeks, one day a week for twelve weeks, or two mornings a week for twelve weeks. ***This sample of rotations is meant to provide some understanding of how blocks and rotations at BC Children’s might work, but there is a lot of flexibility to meet each resident’s training goals, including having more than one resident working on the same clinical service.***

Block One – October to December: BCCH Child and Youth Mental Health

Monday	Tuesday	Wednesday	Thursday	Friday
a.m. Long-term therapy cases and/or research time	Major Rotation: ADHD	Minor Rotation: Eating Disorders	Major Rotation: ADHD	a.m. Group supervision
p.m. Seminars				p.m. Long-term therapy cases and/or research time

Block Two – January to March: BCCH Pediatric Psychology

Monday	Tuesday	Wednesday	Thursday	Friday
a.m. Long-term therapy cases and/or research time	Major Rotation: Inpatient Medical Psychology	Major Rotation: Inpatient Medical Psychology	Minor Rotation: Complex Pain Service	a.m. Group supervision
p.m. Seminars				p.m. Long-term therapy cases and/or research time

Block Three – April to June: SHHC Developmental Disabilities

Monday	Tuesday	Wednesday	Thursday	Friday
a.m. Long-term therapy cases and/or research time	Major Rotation: Autism	Major Rotation: Autism	Minor Rotation: Genetic Syndromes	a.m. Group supervision
p.m. Seminars				p.m. Long-term therapy cases and/or research time

RESIDENCY SPECIFICATIONS

DURATION AND STIPEND

There are three fulltime CPA accredited residencies being offered. They are for one full year, starting the Wednesday after Labour Day in September. Benefits include: paid sick leave and holiday time (4 weeks). There is also a comprehensive benefits package which includes extended medical benefits and dental coverage.

The stipend is based on a formula tied to the wages of staff psychologists and this is presently about \$33,000.00 (CDN).

We are an equal opportunity employer and have a strong commitment to maintaining a culturally diverse Psychology Department (both students and staff).

PLEASE NOTE:

***** We were previously a CPA and APA accredited residency. In February 2007, the Council of Representatives of the APA voted to cease accrediting doctoral and internship programmes in Canada. Concurrent CPA/APA accreditation for all programs will cease as of September 2015 and as of January 1, 2008, the APA no longer accepts new applications for accreditation of Canadian programmes. Given this situation, we did not apply for APA re-accreditation for the 2012-13 year. For further information please refer to the Accreditation sections of both the CPA and APA websites.***

QUALIFICATION CRITERIA FOR APPLICANTS

Please note that we have created the following list of criteria in response to questions frequently asked by resident applicants and in order to help clarify our decision making process. However, it is important to note that failure on any one criterion does not necessarily "doom" you as a candidate. Of particular importance in the selection process is the fit between an applicant's interests and goals and our program's model of training. Candidates should refer to the Canadian Council of Professional Psychology Programs' (CCPPP) document "Guiding Principles in the Preparation and Selection of Applicants for Internships" (see www.ccppp.ca for a copy), which describes the pre-residency preparation that we believe is optimal for applicants to have. No one candidate is likely to meet all of the required and preferred criteria listed below:

General Academics

- 1) Required: All requirements for the doctoral degree in *Clinical Psychology* except the dissertation must be completed.
The dissertation proposal must be successfully defended prior to the November application deadline.
- Preferred: Data collection at least begun and ideally completed by the beginning of the residency year in September.

- 2) Required: From a CPA/APA accredited *Clinical Program*.
Preferred: Added focus or emphasis on child and adolescent psychology

Course Requirements

In addition to the course outline required by clinical programs generally, the following additional course/training is important:

- 1) Required: Assessment course or equivalent experience.
Required: Additional child assessment course or equivalent experience.
Required: Graduate level developmental psychology course.
- 2) Required: Therapy course and or equivalent experience.
Preferred: Therapy course/experience with children.
- 3) Required: Ethics course.
Preferred: Broad-based course that includes experience based dilemmas and scenarios.

Experience

- 1) Required: At least 600 total hours and at least 300 hours of direct practicum experience that has been approved by your graduate program. Trainees should have some experience with both assessment and therapy.
Preferred: Approximately 1000 total hours and 500 direct hours of practicum experience. It has been our experience that any hours more than 1200-1400 hours do not substantially increase your chance of being selected as an resident, nor do they necessarily improve the quality of your residency once your arrive. We value a diversity of practicum experience, particularly any that included working with children, youth and families and/or working with in hospitals or multidisciplinary treatment centres

Citizenship and Language

- 1) Canadian citizens or those with landed immigrant status will be given preference but Non-Canadian citizens will be considered subject to Immigration Canada requirements.
- 2) Fluency in English is required.

Criminal Records Check

The provincial government has legislated that all people who will be working with children must undergo a criminal records check prior to commencing employment. The check is for any conviction which might make you a danger to children. The hospital receives no specific details of the record (these remain confidential) only that the person does or does not pass the screening.

APPLICATION INFORMATION

Application deadline is **NOVEMBER 15th**. Application and acceptance procedures follow the guidelines provided by the Association of Psychology Post-Doctoral and Internship Centres (APPIC). We will notify applicants whether or not they have been selected for an interview, on or before our interview notification date of **DECEMBER 15th**. On-site or telephone interviews are typically arranged for mid-December through early January. We will take part in APPIC's computerized matching on selection day. You must fill out an application and be registered with APPIC to take part. You can also obtain information about our Residency program on the APPIC website and the CCPPP website (www.cppp.ca).

Note: This residency site agrees to abide by the APPIC policy that no person at this facility will solicit, accept or use any ranking-related information from any applicant.

The office of Accreditation for CPA is:

Accreditation Office
Canadian Psychological Association
141 Laurier Avenue West, Suite 702
Ottawa, Ontario K1P 5J3
1-888-472-0657

A completed application includes:

- 1. Completed common APPIC Application for Psychology Internship (AAPI), and the "Academic Program's Verification of Internship Eligibility and Readiness". As of August of 2009, the APPIC application and academic verification process has been available on their website (<http://www.appic.org/>).**

THE APPLICATION WILL BE COMPLETED AND SUBMITTED ONLINE AT THE APPIC WEBSITE and include:

- 2. A cover letter indicating student's plans and special interests (e.g. Preferred Rotations) at our site (part of the on-line AAPI).**

3. **Current curriculum vitae (part of the on-line APPI).**
4. **Three letters of reference, one of which should be from either the Director of Training or the dissertation supervisor. Note, the program may contact referees directly to get further information (part of the on-line APPI).**
[We prefer that students requesting letters of reference from clinical supervisors ask them to follow the CCPPP guidelines for letters of recommendation. These guidelines and the CCPPP standardized format letters of reference can be accessed on the CCPPP website under the heading CCPPP Form/Guidelines for Letters of Recommendation to Canadian Pre-Doctoral Internship Settings.]
5. **Official university transcripts of your graduate record (part of the Supplemental Materials section of the on-line APPI) and an unofficial copy of your undergraduate transcripts to be submitted in the on-line APPI Supplemental Materials section (official transcripts may be requested at a later time for short-listed candidates).**
6. **Dissertation Abstract (part of the Supplemental Materials section of the on-line APPI).**
7. **Document Checklist & Summary (can be downloaded from our website) (part of the Supplemental Materials section of the on-line APPI).**

Note: Any requirement that does not have a specific form on the APPIC website can be submitted under their SUPPLEMENTARY category.

Deadline

It is the applicant's responsibility to ensure all of the above documentation is submitted to the APPIC site before the deadline of **November 15**.

Contact Information

Address all enquiries to: Dr. Marilyn Ransby, Director of Training
Department of Psychology (K3)
BC Children's Hospital
4480 Oak Street
Vancouver, B.C. V6H 3V4

Phone: (604) 875-2147

Fax: (604) 875-3230

E-mail: mransby@cw.bc.ca

**BC CHILDREN'S HOSPITAL
DEPARTMENT OF PSYCHOLOGY
Staff List: June 2011**

**AKDAG, Sare, Ph.D. [University of Massachusetts Boston]
Neurosciences**

Neuropsychological assessment of children and adolescents with seizure disorders and other neurological conditions. Consultation to neurologists and other health care professionals regarding cognitive, developmental, and psychosocial factors associated with epilepsy and other neurological conditions of childhood. Research interests include cognitive, developmental, and psychosocial outcomes of paediatric epilepsy surgery and neuropsychological sequelae of seizure disorders in childhood.

**BEACH, Barbara, Ph.D. [Simon Fraser University]
Eating Disorders Program**

Family-based therapy (Maudsley) and Multi-Family Group Therapy with families with youth with eating disorders, as well as individual psychotherapy with adolescents suffering from anorexia nervosa and/or bulimia nervosa, using Cognitive Behaviour Therapy for Eating Disorders and Acceptance and Commitment Therapy (ACT). Research interests include the importance of body image to self esteem and the motivation to change eating disordered behaviour.

**BENNETT, Susan, Ph.D. [University of British Columbia]
Complex Pain Service**

Psychologist on the Complex Pain Service, an interdisciplinary team providing assessment and treatment of children and youth with severe and disabling chronic pain syndromes. Adjunct Professor, Psychology, The University of British Columbia. Research interests include: evaluation of "costs" of chronic pain, treatment outcome evaluation, and developmental factors involved in coping with pain.

**BURGESS, Leah, Ph.D., R. Psych. [Lakehead University]
Inpatient Adolescent Psychiatry**

Child & Adolescent Psychiatric Emergency Unit (CAPE)

Comprehensive assessments, brief consultations, and individual treatment to inpatient adolescents presenting with complex mental health and/or behaviour concerns. Emphasis is on clarification of differential diagnosis, behaviour management and treatment planning while in hospital, and recommendations for community based follow-up. Research interests include assessment of personality/disorders and cognition.

**CATCHPOLE, Rosalind, Ph.D. [Simon Fraser University]
Provincial Youth Concurrent Disorders Program**

Outpatient assessment and treatment of adolescents and young adults aged 12-24 with concurrent mental health and substance use problems. Consultation and teaching to trainees and hospital and community professionals on concurrent disorders in youth. In collaboration with other team members, research to better understand the psychosocial characteristics and

treatment outcomes among youth who attend the program. Research interests include the intersection between attachment, trauma, and problematic functioning among young people.

CHUNG, Joanna, Ph.D. [University of Guelph]

Inpatient & Outpatient (Haematology/Oncology/Bone Marrow Transplant)

Clinical work involves inpatient and outpatient medical psychology services with a focus on assessment and intervention of children and their families coping with the diagnosis and treatment of various types of childhood cancers and hematology disorders. Collaboration with and consultation to the health care team and community supports are completed as necessary to the clinical work. Interests include adjustment and coping issues for children and adolescents diagnosed with cancer or other hematology conditions and their families; group therapy for siblings of children with cancer; social skills groups for survivors of brain tumours; and educational planning for children with cancer.

CLARK, Sandra, Ph.D. [Memorial University]

Head of Psychology (Acting)

Director of Training (temporarily reassigned to Dr. Marilyn Ransby)

Mood and Anxiety Disorders Clinic (temporarily reassigned to other psychologists)

Currently serving as the Acting Head of Psychology. Usual role is as director of multi-site, CPA accredited residency program offering supervision and program organization for psychology fellows, residents, and practicum students. Provision of assessment and intervention to children with psychiatric (primarily mood and anxiety disorders), cognitive, behavioural, and emotional issues. Co-facilitation of therapeutic groups for anxious preadolescents. Research interests include treatment interventions for anxious, obsessive, perfectionistic children and anxiety and language functioning in children with selective mutism.

DAVIS, Cynthia, Ph.D. [University of Guelph]

Biochemical Diseases Clinical Service

Outpatient Pain and Symptom Management

Outpatient Psychology Assessments

Clinical responsibilities include providing outpatient health psychology services to children and adolescents with metabolic disorders and their families, and to children with medical conditions with related pain or anxiety-based difficulties. Services include assessment, individual/play/group therapy, parent support/education, and consultation with health team members, school staff, mental health professionals and other community supports. Areas of special interest include play therapy, resilience and positive psychology.

FEDOROWICZ, Anne, Ph.D. [Simon Fraser University]

Inpatient Psychology (Surgery, Pediatric Trauma, Chronic Illness)

Outpatient Psychology Assessments

Consultation to inpatient medical wards for brief intervention and psycho-education with children and families coping with traumatic injuries, burns, and chronic illness. Outpatient assessments of children with cognitive difficulties related to chronic medical conditions. Research on the effects of chronic kidney disease on cognitive functioning. Interests include

children's coping and resiliency with major life events, traumatic events, and child maltreatment.

GIBBINS, Christopher, Ph.D. [Queens University]

ADHD Clinic

On Parental Leave until May 2012

Assessment of children and adolescents with attention problems to aid in differential diagnosis, treatment planning and identification of learning and cognitive deficits. Research in ADHD in children and adults. Consultation and collaboration with parents, teachers and multidisciplinary team. Particular interests include attention and executive functioning, autism spectrum disorders, and multivariate statistics.

GILBERT, Merv, Ph.D. [Simon Fraser University]

Inpatient Child Psychiatry

Clinical duties include cognitive, emotional, behavioural and interpersonal diagnosis, consultation and assessment of school-aged children admitted to the inpatient psychiatric unit because of substantive functional and mental health concerns. Additional clinical duties include program development and evaluation. Current research interests include cognitive-behavioural treatment of anxiety and depression, social problem solving and Autism Spectrum Disorders.

GRUNAU, Ruth Eckstein, Ph.D. [University of British Columbia]

Newborn Care

Neonatal Follow-up Programme

Senior Scientist in Developmental Neurosciences and Child Health, Child and Family Research Institute. Multidisciplinary research on stress and pain in neonatal intensive care, and effects of neonatal pain-related stress on bio-behavioural regulation, cognitive and behavioural development in preterm infants and children, funded by the National Institutes for Health (NIH, USA), and the Canadian Institutes for Health Research (CIHR). Clinical interests in the neurodevelopment of children born extremely premature or with major medical complications in the neonatal period.

HANNA, Cindy, Ph.D. [University of Manitoba]

Neonatal Followup Program, Clinical Psychology

Assessment of the cognitive and early academic functioning of preschool children born prematurely and/or with medical complications in the neonatal period. Consultation to the team, with parents, schools, and other community agencies. Additional interests include post-traumatic stress disorder, abuse and neglect, and play therapy.

KAPLAN, Charles, Ph.D. [Columbia University]

Inpatient Child Psychiatry

Clinical responsibilities include cognitive, social-emotional, developmental, and educational assessments of children and adolescents, as well as consultation with parents and community agencies, and short-term therapy for children around self-regulation and "theory of mind" issues. Research interests include clinical validity and reliability of "test session behavioural

observations,” and the impact of working memory and other executive functioning deficits on everyday life.

KATES, Marja, Ph.D. [University of Toronto]

Neonatal Follow-Up Program

Primary responsibilities include assessment of the cognitive and early academic functioning of preschool children born prematurely and/or with medical complications in the neonatal period. Other duties include consultation with parents, schools, and other community agencies.

KOT, Sarina, Ph.D. [University of North Texas]

Child Protection Service Unit

Assessment of children and adolescents referred to the Child Protection Service Unit. Research interests include play therapy as a treatment modality for abused and neglected children and child witnesses of domestic violence.

LESSARD, Jocelyne, Ph.D. [Simon Fraser University]

Oncology Service

Service includes in- and out-patient assessment and treatment of children with cancer and their families. Consultation and collaboration with health care team members and with community service providers is also regularly provided. Special interests include the impact of attachment relationships on coping and adjustment, especially with respect to managing grief, loss, and trauma. A related clinical focus is helping parents understand their child's development as well as the role of temperament in responding to their children.

LIMBOS, Marjolaine, Ph.D., R.Psych [University of Toronto]

Nephrology and Multi-Organ Transplant Programs

Comprehensive assessment and treatment of children with complex medical, developmental, and learning difficulties. Additional interests include cognitive-behavior and family therapy, genetic syndromes, and developmental disabilities. Research interests in quality of life, risk factors and developmental screening of children with chronic kidney disease. Consultation, assessment and treatment services to the nephrology and multi-organ transplant team patients and their families.

McALLISTER, Mona, Ph.D. [University of Victoria]

Neuropsychology Service

Neuropsychological assessment and consultation for children with a wide range of neurological conditions, primarily children with spina bifida and hydrocephalus.

McCONNELL, Dina, Ph.D. [York University]

Haematology/Oncology/Bone Marrow Transplant

Neuropsychological assessments of children with cancer, primarily leukaemia and brain tumours. Evaluations include assessment of learning disabilities, developmental disabilities, and the late effects of treatment (e.g. Chemotherapy and Radiation). Research interests include neurocognitive sequelae of radiation in very young children.

McCONNELL, Melanie, Ph.D. [University of Vermont]

Neuropsychiatry Clinic

Psychological assessment and consultation for children with neurodevelopmental conditions (e.g., autism spectrum disorders, fetal alcohol spectrum disorders, intellectual disability and co-morbid mental health concerns, tics/Tourette syndrome). Behavioural intervention for tics/Tourette syndrome. Cognitive-behavioural therapy for anxiety in children with autism spectrum disorders. Research interests: assessment and treatment of anxiety in children with neurodevelopmental conditions. Also involved with training psychology and psychiatry trainees.

MANLEY, Ronald S., Ph.D. [Queen's University]

Eating Disorders Program

Assessment and treatment of adolescents suffering from anorexia nervosa and/or bulimia nervosa. Clinical and research interests include treatment of the athlete with an eating disorder, the treatment of exercise abuse in eating disorder patients, psychotherapy processes, and boundary issues. Interests also include the applicability of mindfulness to the treatment of eating disorders and the treatment of trauma using a somatically-based psychotherapy.

MANLY, Patricia, Ph.D. [University of British Columbia]

Inpatient Child Psychiatry

Clinical duties include cognitive and psychosocial assessment, consultation, and short-term therapeutic intervention for school-aged children admitted to the inpatient psychiatric unit because of severe functional and mental health concerns. Interests include developmental sequelae to early childhood trauma and attachment disruption, community psychology, integrated case management, and program development.

MURRAY, Candice, Ph.D. [University of British Columbia]

Provincial ADHD Program

Clinical responsibilities include providing assessment and intervention to children and adolescents with attention problems and/or difficulties with hyperactivity/impulsivity. Parenting interventions include group cognitive-behavioural therapy for parents of children with ADHD and a specialized parenting group for parents who have ADHD. Research interests include the impact of parental ADHD on family functioning and evaluating cognitive-behavioural group interventions for adolescents and adults with ADHD.

NARANG, Pam, Psy.D. [Illinois School of Professional Psychology]

Centre for Health Weights: Shapedown B.C. [Covering maternity leave]

Working with children/adolescents and families to achieve healthy lifestyles. Services include psychosocial assessment and family-based group intervention for children/adolescents referred for weight management. Additional interests in assessment and treatment of children/adolescents with a history of trauma, psychiatric, emotional, cognitive, and behavioural issues.

NEWLOVE, Theresas, Ph.D. [University of British Columbia]

Neurosciences

Clinical Psychology

Inpatient psychology services, including working with children, adolescents, and their families coping with a child with an acute neurological condition, trauma or chronic conditions. Outpatient differential diagnosis, assessment and treatment services to children and adolescents coping with chronic physical symptoms from stress and/or illness. Research interests include conversion disorders, non-epileptic seizures and pain management.

O'BRIEN, Karina, Ph.D. [University of Manitoba]

Eating Disorders Program

Provision of treatment services in the Outpatient and Inpatient areas of the Eating Disorders Program, including Family-Based Therapy (FBT) for children and youth with eating disorders, individual therapy (mostly CBT and DBT informed approaches), multi-family group therapy, and group skills training. Particular interests in anxiety disorders, and providing treatment for children and youth with these comorbid concerns. Provision of education through consultation services and presentations.

PIPER, Emily, Psy.D. [The California School of Professional Psychology]

Child Psychiatry Teaching and Consultation Clinic

Clinical duties include assessment and consultation to school-aged children experiencing severe behavioural problems and psychiatric disorders. Additional clinical duties are specific to the teaching and supervision of Psychiatry and Psychology Residents. Current research interests include child psychotherapy and play therapy.

PETRIE THOMAS, Julianne, Ph.D. [University of British Columbia]

Infant and Early Childhood Educational & Developmental Consultant

Neonatal Follow-up Program

Member of multidisciplinary team that assesses children born extremely prematurely as well as children born with medical conditions and/or who undergo intensive interventions that increase their risk for problems in neurodevelopment. Research interests include maternal interaction style as a regulator of infant attention and physiology and subsequent development of behaviour, cognition and executive functions in children born extremely prematurely. Other interests include parent stress, family factors and early development of children born with congenital heart abnormalities.

RANSBY, Marilyn, Ph.D. [UBC & California School of Professional Psychology]

Director of Psychology Training

Neurosciences

Director of our multi-site CPA (Canadian Psychological Association) accredited residency programme and practicum training programmes. Training responsibilities include supervision, programme organization and co-ordination with the Departments of Psychology at UBC and SFU. Clinical services include assessment, treatment and consultation for patients with Epilepsy and Non Epileptic Seizures (NES). Also involved in clinical research

with the Neurosciences Programme for children with Non-Epileptic seizures and their siblings.

ROSEN, Barbara, Ph.D. [University of Alberta]

Medical Consultation Service to Cardiac Science Program & Inpatient General Paediatrics; Outpatient Medical Psychology Program; ICU

Responsible for providing clinical consultation, assessment, and treatment to inpatients and outpatients with cardiac defects as well as other general paediatric medical conditions.

Assessment and treatment is primarily focused on pain, anxiety management, patient and family psychological adjustment issues, and cognitive/education issues where relevant. Also provides staff support throughout BC Children's and BC Women's and disaster response training regarding the psychosocial needs of healthcare workers in the event of a disaster or pandemic. Research interests include the impact and adjustment to serious illness on the child and family unit.

SIMPSON, Anna, Ph.D. [University of Toronto]

Infant Psychiatry Clinic

Clinical duties include: assessment of cognitive, academic, behavioural, and psychosocial functioning of pre-school aged children; consultation with parents, teachers, and multidisciplinary team; parent training for parents of young children with challenging behaviours. Particular interests include prevention and early intervention of anxiety problems in young children.

SNEDDON, Penny, Ph.D. [Utah State University]

Centre for Healthy Weights: Shapedown BC.

Cochlear Implant

On Parental Leave until February 2012

Centre for Healthy Weights: Member of an interdisciplinary team that helps children, adolescents and families achieve healthy weights. Services include psychosocial assessment and family-based intervention for children and adolescents referred for weight management. Cochlear Implant: Member of interdisciplinary cochlear implant team. Clinical work includes outpatient assessment, diagnosis and program planning for children with cognitive/learning and socio-emotional difficulties. Assessment is focused on differential diagnosis of cognitive/learning and socio-emotional issues related to hearing loss and those related to other learning and/or medical factors.

STEWART, Laura-Lynn [University of Toronto]

Child Protection Service Unit, Cochlear Implant Services (temporary), Mood and Anxiety Disorders Clinic (temporary)

Child Protection: Assessment of children and adolescents referred for abuse, neglect, and complex issues related to suspected maltreatment. Research interests include parenting, trauma, and family violence. Cochlear Implant: Consultation, assessment, and program planning for children with cognitive/learning and socio-emotional difficulties related to hearing loss. Mood and Anxiety Disorders: Assessment and intervention for children and adolescents with psychiatric (primarily mood and anxiety disorders), cognitive, behavioural, and socio-emotional issues.

WANG, Tina, Ph.D. [University of British Columbia]

Child Protection Service Unit

Assessment of children and adolescents who have been exposed to and/or experienced neglect and/or abuse. Research interests include play-based assessment, trauma, psychosomatic medicine, and pain.

WEXLER, Audrey, F., Ph.D. [University of Ottawa]

Inpatient Adolescent Psychiatry

Clinical duties include cognitive and socio-emotional assessments, consultations, group therapy, and individual therapy with adolescents (aged 12 to 19 years) admitted to a psychiatric inpatient unit because of severe functional and mental health concerns. Interests include developmental sequelae to early childhood trauma and attachment disruption, sexual aggression, and domestic violence.

SUNNY HILL HEALTH CENTRE FOR CHILDREN
DEPARTMENT OF PSYCHOLOGY
Staff List: June 2011

ELFERS, Carla, Ph.D. [University of British Columbia]

Hearing Loss Resource Team

On Parental Leave until January 2012

Assessment and program planning for children with bi-lateral hearing loss with and without neuromotor impairments. Special interests in program planning for children with late identification of hearing loss and delayed exposure to language. Current research interests include social cognition in children with bi-lateral hearing loss, as well as parental decision-making regarding management of attention and self-regulatory difficulties in children with and without hearing losses.

ENGLE, Jennifer, Ph. D. [University of Victoria]

Complex Developmental Behavioural Conditions & Neuromotor Program

Neuropsychological assessments for children with developmental and acquired disabilities. Particular interest in Fetal Alcohol Spectrum Disorders, epilepsy, acquired brain injury, and cognitive rehabilitation.

HEAVEN, Roberta, Ph.D. [McMaster University]

Visual Impairment Team

Assessment and program planning for children with neuromotor disabilities and visual impairment. Special interests in social impairments and peer interactions and cognitive behavioural interventions in developmental disabilities. Research interests currently in visual impairment.

KLAR, Sandy, Ph.D. [Central Michigan University]

Provincial Autism Resource Centre

Assessment and program planning for children and youth with learning and developmental disabilities. Special interests in the assessment and treatment of paediatric feeding disorders and food refusal behaviours.

LILLEY, Christine, Ph.D. [University of British Columbia]

Residency Site Co-Supervisor

Complex Developmental Behavioural Conditions Team

Assessment and program planning for children and youth with developmental disabilities and learning problems. Special interests in assessment, intervention, and policy development for children and youth prenatally exposed to alcohol and drugs, and in improving inter-ministerial communication and cooperation for children with complex disabilities.

McALLISTER, Mona, Ph.D. [University of Victoria]

Acute Rehabilitation Team

Clinical support and neuropsychological assessment for children and adolescents admitted for inpatient rehabilitation services.

**MAH, Janet, Ph.D. [University of British Columbia]
Complex Developmental Behavioural Conditions Team
Provincial Autism Resource Centre**

Assessment and program planning for preschoolers, children, and youth with complex developmental and behavioural conditions, including autism spectrum disorders, genetic/medical conditions, intellectual and learning disabilities, and prenatal substance exposure. Special clinical and research interests include behavioural parent training, behavioural pediatrics, and cultural factors associated with parental cognitions.

**ROBSON, Ann, Ph.D. [University of Western Ontario]
Clinical Co-ordinator
Residency Site-Co-Supervisor
Provincial Autism Resource Centre
Complex Developmental Behavioural Conditions Team**

Assessment and program planning for young children with learning and developmental disorders. Special interests in development during infancy and early childhood, and implications of attachment theory and research for clinical practice.