SickKids Centre for Community Mental Health

Doctoral Internship in Clinical Developmental

Child and Adolescent

Psychology

For 2024-2025

Toronto, Ontario, Canada



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About SickKids CCMH



The Gary Hurvitz Centre for Community Mental Health at SickKids (GH-CCMH) is a multi-professional, not-for-profit, children's mental health centre located in Toronto, Ontario, Canada. *GH-CCMH* provides primary prevention, early intervention, and clinical treatment services to infants, children, and youth (from birth to 18) and to their families and communities. On 21st September 2021, the SickKids Foundation announced a transformative donation from philanthropist Garry Hurvitz for brain and mental health across the SickKids mental health enterprise and the Centre has been renamed The Garry Hurvitz Centre for Community Mental Health at SickKids (GH-CCMH) in honour of his generous gift. You may occasionally see us referred to as SickKids Centre for Community Mental Health – this remains our legal name. For the purposes of this brochure and your application, we will use GH-CCMH.

The programs offered to families at GH-CCMH are housed in two main facilities within the city of Toronto, and include prevention & early intervention programs, outpatient programs, day treatment programs and intensive treatment programs for children and youth. Treatment services to clients include specialised assessment, individual therapy, family therapy, group therapy, and parent-child therapy, as well as liaison and consultation with community caregivers (e.g., day care providers, schools, physicians, and other external systems).

Affiliated with the University of Toronto and accredited by Accreditation Canada, GH-CCMH is also a member of Children's Mental Health Ontario. We are pleased to announce that the GH-CCMH Doctoral Internship Program in clinical developmental child and adolescent psychology has been accredited by the Canadian Psychological Association (CPA).

Our new Strategic Plan 2025 is comprised of six directions that will ensure we deliver on our mission to achieve transformative outcomes in child and youth mental health through collaborations, innovations, and partnerships. This work is now emboldened by the transformational gift from Garry Hurvitz that not only rebrands our organization but enables us to bring this plan to life. This plan highlights the important opportunity we have as a child and youth mental health provider partnered with The Hospital for Sick Children (SickKids) to develop new, innovative treatment options for our clients who are dealing with serious and complex mental health needs – and reduce the time families wait to access these options.

It challenges us to enrich the skill set of our staff to enable them to provide even more effective – and personally customized – treatments for our clients. It enables our growing research enterprise and strengthens our commitment to clinical measurement and evaluation to guide our response to the present and future needs of our clients.

Finally, our plan defines our commitment to embrace and understand the diversity of the communities we serve and of our staff in everything we do, enabling safe, accessible, and responsive services.

With the needs of our clients and families at the centre of all that we do at GH-CCMH, our new Strategic Plan 2025 positions us to collaborate effectively with our SickKids colleagues and our

cross-sectoral partners to enable the building of more effective services and a better system of care.

GH-CCMH has approximately 200 staff members. This includes full-time, part-time, and contract staff; consultants; trainees from a variety of disciplines (early childhood education, child and youth care, psychiatry, psychology, social work, and art/expressive arts); and volunteers. More detailed information about GH-CCMH's programs and services are at www.sickkidscmh.ca.

GH-CCMH has a rich history of teaching and training interns and practicum students across multiple disciplines including psychology, social work, psychiatry, and art therapy stemming back to when the agency was referred to as The Hincks Dellcrest Centre and even prior. Because of this decades-long pride in student teaching and training, GH-CCMH tends to attract staff who are highly invested in prioritizing the development and supervision of new and upcoming clinicians. Psychology staff at GH-CCMH are especially proud of the assessment, intervention, and training we do, and we encourage you to explore this brochure carefully and with curiosity. For those of you who attend an interview for an upcoming internship, we will look forward to learning more about you, responding to your questions, and sharing our pride in what we do.

Please, note the internship is based mainly within **GH-CCMH Individual and Family Services** (formerly Outpatient Services) at our 440 Jarvis St. site in downtown Toronto and there are typically three available positions. However, interns may be asked to take on clinical work (assessment and/or treatment) at our 1645 Sheppard Ave. West site one day a week based on client and program needs. Both sites are accessible by car as well as by public transportation. For those electing to drive, parking is free at the Sheppard site. Those driving to the Jarvis site will have their choice of several nearby parking facilities, although there are daily costs associated with those.

Available Doctoral Internships at SickKids CCMH



Internships are 12-month full-time equivalent positions. The internship begins on the first Wednesday following Labour Day in September and ends on the last working day of August of the following year. Internship full-time equivalency means an intern will complete a minimum of 35 hours per week and attain a minimum of 1,600 hours as required by the program. Interns are provided with shared office space at GH-CCMH's downtown office building (the Jarvis site) and desk space at our north Toronto site (the Sheppard site).

The stipend for the 2024-25 year is set at C\$35,000 paid twice per month. In addition, interns receive the following benefits: 3 weeks (15 days) of vacation, 5 professional development days, sick days, 10 statutory holidays, and health benefits.

The internship program is a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC) and the Canadian Council of Professional Psychology Programs (CCPPP). The internship program is managed by a doctoral staff psychologist as Director of Training.

Canadian Psychological Association (CPA) status

We are pleased to announce that the GH-CCMH Doctoral Internship Program in clinical developmental child and adolescent psychology has been accredited by the Canadian Psychological Association (CPA).

COVID-19 Pandemic Information



Vaccination Policy

As a health care centre, our highest priority is the safety of our clients, patients, families, staff, and students. As a result, we have adopted all prevention measures to ensure the safety of our clients, families, staff, and students. Therefore, any offer of employment or educational placement is conditional upon proof of full vaccination with a Health Canada or World Health Organization (WHO) approved COVID-19 vaccination no later than fourteen (14) calendar days prior to the effective start date or obtain an approved exemption based on disability (medical), creed (religion), or other grounds enumerated in the Ontario Human Rights Code. Should there be an exemption of vaccination based on a medical or human rights reason, proof will need to be provided, in addition to participation in regular COVID-19 testing based on exposure risk as well as participation in vaccine education. All offers of employment and educational placement are conditional on meeting these minimum requirements; failure to comply will lead to the offer of employment or educational placement being immediately rescinded.

The impact of COVIS-19 on the 2024-25 internship cycle continues to be unknown at this itme. Please, be advised that some of the descriptions in this brochure may be affected by COVID-19 disruptions and restrictions within GH-CCMH. At the time of writing this brochure, the COVID-19 endemic continues. Since August 2021, intern training experiences have taken place both remotely through video-conferencing technology and in-person on-site although, more recently, there has been a move toward more time spent on-site. Interns can likely be expected to be on-site three to four days a week, if not more, depending upon client and training needs.

This brochure describes the intended program structure and experiences, which may require modification depending on limitations imposed by the COVID-19 pandemic. Should adjustments be required, potential and actual interns will be notified as soon as information becomes available. Our program has thus far navigated the uncertain landscape with flexibility and creativity, and we will continue to honour our commitment to achieve program competencies in the upcoming academic cycles as well. We cannot predict with any degree of certainty how the pandemic may impact future training cycles, but we can commit to being transparent with information, collaborating with interns to develop disruption contingency plans guided by intern training goals, and to expressly document adjusted goals and expectations (including supervision arrangements). Even with any new potential pandemic-related disruptions, we are confident that we can continue to provide the necessary training experiences to allow our interns to achieve program goals and competencies.

Interns are expected to comply with all federal, provincial, and GH-CCMH organization regulations including but not limited to vaccination policies, wearing PPE, maintaining appropriate physical distancing, abiding by travel restrictions, quarantining, and other Infection Prevention and Control procedures within the context of providing clinical services, or otherwise. physical distancing, abiding by travel restrictions, quarantining as regulated, and other Infection Prevention and Control procedures within the context of providing clinical services, or otherwise. Although wearing PPE is currently optional, masks and face shields are provided to any staff members, trainees, or clients who request such.

Internship philosophy and objectives



The primary orientation of the internship training is a developmental and theoretically integrated approach to the assessment and treatment of children and families within the context of child & family community mental health. In addition, an interprofessional approach is integral to the clinical practices of GH-CCMH and provides interns with the opportunity to work with mental health professionals with a broad range of interests, knowledge, and skills.

A. Training goals:

- 1. Develop and enhance skills in assessment, diagnosis, and formulation that, while including the DSM, focus just as extensively on underlying developmental, biological, family, and larger system factors that produce vulnerability to symptoms and difficulties in children and youth.
- 2. Develop and enhance the ability to communicate assessment and diagnostic information clearly and sensitively to clients, families, teams and programs within the agency, and external systems (e.g., school personnel, family physicians) both verbally and in writing.
- 3. Develop and enhance skills in establishing and maintaining therapeutic rapport with children, youth, and families across different therapeutic modalities.
- 4. Develop skills in the selection and implementation of appropriate psychotherapeutic interventions with children, youth, and their families. Because of the integrative approach used by psychology staff at GH-CCMH, interns will learn how to integrate elements of theory and practice from a multitude of theoretical orientations including but not limited to contemporary relational psychodynamic approaches, learning and cognitive theories, third-generation behaviour therapies (e.g., Dialectical Behaviour Therapy, Acceptance and Commitment Therapy), Humanistic-informed experiential approaches (e.g., person-centered, existential, and emotion-focused therapies), post-modern approaches (e.g., solution-focused and narrative therapies), and family systems theories (e.g., structural, attachment-based, emotion-focused).
- 5. Develop and enhance skills in intervention primarily individual therapy (talk and play-based) and family therapy. Opportunities to co-facilitate therapy groups are very limited. Although it is possible to arrange for a group therapy experience for interested trainees, this is not a major focus of the internship.
- 6. Develop and enhance awareness of and competence with working with individuals from many diverse backgrounds, (e.g., socio-economic status, migration, sexuality and sexual orientation, language, and educational differences) and the ability to discuss these issues and differences with sensitivity and compassion.

- 7. Encourage respect for and critical thought regarding research/program evaluation in the area of children's mental health. Interns will be expected to complete a program evaluation project during the year. This will be a supervised experience that interns can undertake individually, or as a group.
- 8. Develop the skills needed to work collaboratively in an interprofessional and organizational service-delivery environment, including an understanding of and respect for the contributions of various disciplines to children's mental health.
- 9. Develop skills in applying relevant ethical, legal, and professional standards to clinical work.
- 10. Active participation in didactic seminars to support ongoing training.
- 11. Active participation in supervision with two registered clinical psychologists.
- 12. Develop skills in the supervision of colleagues, if possible.

B. Main components

The internship in clinical developmental child and adolescent psychology is comprised of the following main components that generally run for the entire duration of the internship.

- 1. Provision of individual, family, parent-child dyadic therapy and/or parent work to a caseload of seven nine clients ranging in age from zero to eighteen years of age. Please, note that most clients tend to fall within the six-to-eighteen-year range.
- 2. Completion of a minimum of four comprehensive psychological assessments throughout the year as a member of the Psychological Assessment Team.
- Membership on one of two Individual & Family Services (outpatient) Interprofessional Clinical Teams. Individual & Family Services team clients with a wide range of ages, stages of development, and presenting issues cases will be presented at these weekly meetings and the interns will function as psychologist consultants to the team along with a staff psychologist.
- 4. Offering of one hour of consultation time per week to CCMH staff. Staff may consult with a psychology intern for a number of reasons, including interpreting psychological assessment reports in order to better understand the report and its recommendations, determining whether a referral for a psychological assessment would be appropriate, seeking assistance with formulation, and/or seeking guidance about 'stuckness' in treatment, to name but a few.
- 5. Participation in didactic seminars.
- 6. Meeting with both staff supervisors, each for one hour a week for supervision.
- 7. Completion of a program evaluation project.

Several of these components are described further below. A sample weekly schedule can be

1. Provision of Psychotherapy - Direct Client Contact

Although the exact number of hours spent in direct, face-to-face client contact may vary from week to week, on average seven - nine hours are spent providing therapy to clients of diverse ages and presenting problems. This amount of patient contact typically begins following a two-week orientation period and the assignment and review of possible cases. Although interns' training backgrounds and training gaps vary, interns are expected to provide treatment services to a broad range of clients with increasing independence, but always with supervisory support and oversight. Clients seen are primarily from Individual and Family Services (formerly Outpatient Services), however, interns may have an opportunity to see children and youth from our Intensive Services for Youth and our Intensive Services for Children programs for assessment, consultation, and/or intervention.

As a community mental health agency, GH-CCMH is focused on removing as many barriers as possible for those children, adolescents, and families seeking clinical services. As such, there is an expectation placed upon all staff, including interns, to be available to see families in the late afternoons and early evenings twice a week. Time can be flexed for those interns wanting to sustain the typical 35-hour work week. However, interns are also encouraged to keep in mind that the internship year is still primarily considered to be one of learning and, as such, interns are encouraged to keep their training goals in mind and seek whatever opportunities they deem relevant to their training, even if it extends beyond the standard 35-hour work week. Interns will never again have the level of support and supervision that the staff psychologists at GH-CCMH provide so willingly and, therefore, interns are encouraged to take advantage of whatever training opportunities may be of interest while having the luxury of considerable supervisor support and availability.

2. Psychological Assessment Team

All psychology interns are required to participate in this service and to complete a minimum of four comprehensive psychological assessments during their internship year. This service provides comprehensive assessments to children generally aged six to eighteen years. Interns are provided with two-and-a-half to three hours per week of group supervision to discuss their assessment cases and to receive guidance on administering, scoring, and interpreting standardized tests (e.g., cognitive, academic) and social-emotional measures (e.g., projective tests, symptom-based questionnaires, and personality inventories). Clinicians from most GH-CCMH programs/teams are free to avail themselves of this service, meaning that interns may have an opportunity to assess children and youth from our intensive services programs (e.g., Intensive Services for Youth program, Intensive Services for Children) as well as clinets seen through Individual and Family services.

The group supervision includes didactic training and assigned readings. Readings are more general at the beginning of the year and are focused on broader assessment procedures, clinical interviewing, multi-perspective formulation, and providing feedback to children and families. Time is also spent learning assessment tools (e.g., MACI, D-KEFS) as well as projective assessment methods (e.g., TAT, CAT) with which many interns are often less familiar. Furthermore, the *Learning Disability Association of Ontario* standards are reviewed regarding the diagnosis of Learning Disabilities.

3. Individual & Family Services Interprofessional Clinical Team

Interns will be a member of one of two Individual and Family Services Clinical Teams. Individual and Family Services staff is split into two clinical teams (Jarvis and Sheppard) and each team meets weekly for one hour. The teams are interprofessional in nature and generally include social workers, art therapists, psychotherapists, occupational therapists, psychologists, and a psychiatrist. Individual & Family Services staff present complex and challenging clients at these weekly meetings. The staff member is encouraged to ask a specific question or questions of the team. The team is there to provide support, help clarify case formulation, and make recommendations concerning treatment and assessments needs. The interns will function as psychologist consultants to the team along with a staff psychologist.

4. Didactics/Seminars

All psychology interns are required to participate in the seminar *Integrative Individual Psychotherapy with Children*. As noted previously, all interns are also required to participate in the weekly seminar associated with the Psychological Assessment Service. Any interns involved with infant & preschool cases are encouraged to take the *Assessment and Treatment with Infancy and Preschool Children Seminar*. Interns who have not received significant training/experience in family therapy are encouraged to consider attending the weekly *Family Therapy Seminar*. Weekly seminars typically run from late-September to April or May and, in some cases, even into June or July. Some of the more popular seminars (including the two which are required) are highlighted below:

- a. Assessment & Treatment with Infancy and Preschool Children Seminar: This weekly seminar will introduce participants to assessment, intervention, and psychotherapy with young children (0 6) and their families through readings, discussion, and videotaped material. This seminar is meant to complement and enhance the clinical work that trainees will undertake with infant and preschool-aged clients and their families. Working with young children and their families often necessitates the use of methods and theory to which trainees, typically, have not been exposed. As presenting problems of young children are often developmental and/or relational in nature, interventions need to be designed specifically with these aspects in mind. Since the young child's primary means of relating is non-verbal, emphasis will be on understanding the use and theory of observation, play, attachment, development, and experiential components of intervention, especially those that more fully include the young child as a participant.
- b. **Integrative Individual Psychotherapy with Children and Adolescent Seminar:** This seminar will provide an introduction to psychotherapy with children. The seminar conceptually integrates contemporary relational psychoanalytic approaches with those of developmental psychology, cognitive science, and behaviour therapy. The intent is to provide students with a beginning ability to understand clinical material from these multiple, integrated perspectives in order to mitigate disabling presenting problems and the underlying structures which produce them as well as to facilitate a therapeutic process.

- c. Seminar in Therapeutic Process: This is a group reflection opportunity offered only to psychology interns. Although this is not a mandatory seminar, the expectation is that those who choose to attend, will do so weekly. Seminar content will be generated by the students every week. The objective of this seminar is for students to consider session content and, also, to begin focusing on everything else that is occurring in the therapy room, including affect, non-verbal behaviours, relational dynamics among dyads and families, transference, countertransference, resistance, and the therapist's own experiences in his/her work with clients and in his/her life. Unpacking and discussing students' strengths and challenges as developing therapists will be at the core of this seminar. The hope is that students will learn that "what to do" in therapy is rarely a case of right or wrong, and that the therapist as a person, not a technician, can provide meaningful and powerful interventions.
- d. Family Therapy Seminar: Reflective practices are a central component of clinical work. This seminar combines theory with practice, with a special emphasis on how theory shapes and influences the way a clinician views, engages, and intervenes within the therapeutic relationship. This seminar will be both interactive and experiential. Although different models of family therapy will be highlighted, this course will not be 'model specific'. Instead, students will be encouraged to contemplate, as well as practice, the clinical skills necessary for working effectively with families. Weekly readings will supplement theoretical discussions.

In addition, interns are required to attend:

- a. **GH-CCMH Monthly Rounds:** These are held on the first Friday of every month at noon. Recent topics have included: *ASD and children's mental health: Working with domestic violence, Dialectical Behaviour Therapy with individuals and families, Understanding cannabis and health,* and *Signs and Symptoms of Suicide in Teens.*
- b. **The Greater Toronto Area (GTA) Psychology Seminars:** GH-CCMH belongs to a Greater Toronto Area psychology training committee whose goal is provide didactic and networking opportunities to interns across the GTA as they move into their early professional careers. There are typically five three-hour seminars per internship year. Topics include: *Tricky ethical issues; Supervision; Early careers; The registration process*

and year of supervised practice, Program evaluation, and Clinical practice with 2S+LGBTQ clients.

c. Monthly Psychology Trainee Meetings: These one-hour-long Friday morning meetings are held on the fourth Friday of every month and are mandatory for Psychology Interns. These informal meetings led by the staff psychologists provide an opportunity to discuss issues related to practice such as ethics, privacy and confidentiality, record keeping, matters related to the internship, and updates from the College of Psychologists of Ontario. There are specific themes pre-selected for each month, although any of these topics can be bypassed if there is more pressing material to discuss.

5. Supervision and performance evaluation

Supervision is provided in both an individual format as well as in a small group format (e.g., on the Psychology Assessment Team and live supervision/co-therapy when possible). Throughout their internship, interns report to two doctoral registered psychologists who guide their internship experience as their primary and secondary supervisors. Interns meet with each of their supervisors weekly for a minimum of one hour. The only difference between the two supervisors is that the primary supervisor is responsible for compiling information for the intern's mid-term and final evaluation. The primary and secondary supervisors will meet with the intern together to deliver the feedback personally and engage the intern in reflection and discussion.

Supervision received by interns is focused on the psychological services rendered directly by the intern, as well as on their ongoing professional development and identity as an emerging psychologist.

Interns may also provide some clinical supervision to one-another informally, as well as more formally during the co-therapy experience, offered by one of the psychology staff members once a week. Opportunities to learn how to observe sessions for content and process-based material, to scaffold someone's skills, and to provide positive and constructive feedback will be a big focus of this co-therapy experience, as will tracking how clients and therapists benefit from such feedback over time.

Formal performance evaluations are completed at the end of January and again at the end of August each year, using the Centre's Competency Assessment form and the University's evaluation form, if required. Evaluations are filed in the intern's personnel record. The intern's primary supervisor and the Director of Training provide the link between GH-CCMH and the intern's university, ensuring that specific university internship expectations are met with regard to training objectives, experience, supervision, and performance evaluation. All interns are asked to complete GH-CCMH's "Student/Trainee Exit Interview" upon completion of their internship and an evaluation of the internship program and its components.

C. Program evaluation

The emphasis in the clinical developmental child and adolescent psychology internship program is on clinical practice rather than research or program evaluation. However, a goal of the program is to provide a training for interns which facilitates interns' integration of research and best practices into their professional roles. Most didactic seminars involve readings and discussion from current literature and interns are encouraged to evaluate practice-related research and integrate readings and research findings into clinical practice. Interns are expected to base decisions about their work (assessment, intervention, consultation) with clients on current findings and discussions with their supervisors.

Interns are also required to develop and/or participate in a program evaluation project. These projects are supervised by a psychologist at the Centre who is a clinician-scientist. These program evaluations projects are presented to staff towards the end of the year, e.g., at Grand Rounds or a Lunch & Learn. A short, two-page summary of the program evaluation project must be submitted. Interns may choose to work separately on unique pieces of a project or on separate projects, or they can choose to collaborate and complete a program evaluation as a team.

Any involvement of GH-CCMH clients or personnel in an intern's doctoral research must be approved by GH-CCMH's Research Review and Ethics Committee, and there must be proof of approval by the intern's university REB. Although some internship training programs allocate some time during the week wherein an intern can either complete research or focus on completing their dissertation, the internship experience at GH-CCMH is one that prioritizes clinical work and expects that the majority the intern's time with be spent delivering clinical services either directly or indirectly. Interns are given five educational days during the internship year and may choose to use this time for their research and dissertation work.

D. Policies and procedures

GH-CCMH's Policies and Operational Procedures apply to all personnel associated with GH-CCMH, including psychology interns. As part of the contracting process, interns receive copies of, and are required to sign an acknowledgment of having read GH-CCMH policies, including but not limited to the following: Personnel Code of Ethics; Client Privacy and Confidentiality; Infection Prevention and Control: Use of Technology and other relevant policies. Advance copies of these policies will be provided on request. Interns receive orientation regarding centre policies and operational procedures at the beginning of their placement, which also includes working with human resources policies/operational procedures (e.g., Personnel Code of Ethics, Workplace Harassment Prevention, Supervision, Performance Management, Conflict Resolution, Disciplinary Action, Use of Technology). Any offer for an internship position at GH-CCMH is contingent upon the applicant providing a *Vulnerable Sector Screen* and *Criminal Reference* and/or background check satisfactory to GH-CCMH.

E. Complaints and performance concerns

Responses to interns' concerns about their supervisor or about their internship experience, and supervisors' concerns about psychology intern performance, are guided by the principles of fairness, transparency, and due process, as well as by GH-CCMH policies and procedures related to Supervision, Performance Management, and Conflict Resolution. In addition, GH-CCMH has written Trainee Rights and Responsibilities, Evaluation, Due Process Procedures and Grievance Procedures that are discussed and distributed to each intern at their first orientation session in September. While complaints related to supervisor or intern performance are rare occurrences, it is important for interns to know that GH-CCMH staff endeavour to address any performance issues as opportunities for further growth and development rather than for blame and criticism. Any complaints will be handled with the utmost respect for all involved. Moreover, interns should be mindful that psychologist supervisors will be tracking interns' progress as soon as the internship begins and any issues observed will be discussed clearly and respectfully with the intern as soon as they become evident, with the initiation of a formal complaints procedure being the last resort, after other attempts to support and intervene have proven unsuccessful. GH-CCMH also familiarizes itself with and respects the specific requirements of interns' universities with regard to dealing with such matters, including involvement of the university's internship field supervisor/director of clinical training when warranted.

Eligibility and application process



Applicants must be enrolled in a doctoral program in 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, at least 600 hours of supervised practica, and their dissertation proposal must be approved.

Preferably, this would include, at least, 300 hours in face-to-face patient/client contact (interviewing, assessing, or intervention with clients directly) and at least 150 hours of supervision. *However*, given the COVID-19 pandemic, some flexibility in the composition of those hours will be considered as long as there is a minimum total of 600 hours in direct contact, supervision, and support activities combined.

Applicants with academic and practical experience in child assessment and treatment are stronger candidates. Although applicants from a predominantly adult clinical program may apply, they should only consider doing so if they have accumulated experiences in assessment and intervention with children, adolescents, and families through coursework and practica. Moreover, those applicants who are further along in their dissertation are also considered stronger candidates. Prospective interns who are in the earlier stages of their dissertation (e.g., data collection or preliminary data analysis) are encouraged to apply with the awareness that time to complete their dissertation during the 35-hour work week will not be allocated. A broad range of exposure and experience is preferred. In accordance with Canadian immigration requirements, preference is given to applicants who are Canadian citizens or permanent residents of Canada. Applicants should have considerable interest in a rigorous, theoretically integrated, and developmental approach to assessment and treatment of children and families, as this is the predominant orientation of GH-CCMH.

As a participant in the APPIC Match program, GH-CCMH requires that all applicants use the APPIC standard application form available on the APPIC website (www.appic.org).

Any offer from GH-CCMH is contingent upon the applicant providing a *Vulnerable Sector Screen* and *Criminal Reference* and/or background check satisfactory to GH-CCMH.

As stated, our highest priority is the safety of our clients, patients, families, staff, volunteers, and students. Therefore, any offer of employment or educational placement is conditional upon proof of full vaccination with a Health Canada or World Health Organization (WHO) approved COVID-19 vaccination no later than fourteen (14) calendar days prior to the effective start date. Should there be an exemption of vaccination based on a medical or human rights reason, proof will need to be provided, in addition to participation in regular COVID-19 testing based on exposure risk as well as participation in vaccine education. All offers of employment and educational placement are conditional on meeting these minimum requirements; failure to comply will lead to offer of employment or educational placement being immediately rescinded.

Required supporting materials on the AAPI will include:

- A cover letter outlining the applicant's interest in the GH-CCMH internship program and their training goals
- A current curriculum vitae
- Graduate transcripts (one copy from each institution within which graduate work was completed)
- Three letters of reference from professionals who can address academic and applied psychology qualifications. One of these must be from either the graduate program Director of Training or the applicant's dissertation supervisor. CCPPP format for reference letters is preferred but not required. These guidelines can be obtained from http://www.ccppp.ca/en/letters-guidelines.html.

*** If you had placements and/or requirements that were negatively affected by the COVID-19 pandemic, please, request that your Director of Clinical Training highlight these implications clearly in their portion of the APPIC application. If you had placements that were cancelled or prematurely terminated, please describe the training and hours that were anticipated in your cover letter. The COVID-19 context will be taken into consideration.

Deadline for submission of applications is 11:59 p.m., EST on November 1 each year, that is, ten months prior to when the internship would begin (September 1 the following year).

In accordance with APPIC guidelines, applicants will be contacted by December 15 and informed as to whether they will be invited for an interview. Interviews are scheduled in early- to mid-January. Due to the COVID-19 pandemic, the *Canadian Council of Professional Psychology Programs* has strongly recommended that internship sites offer exclusively virtual interview for the 2023-24 application cycle. **GH-CCMH will be following this recommendation and all interviews will be conducted virtually.**

As an APPIC member, GH-CCMH offers all its internship positions through the APPIC Match and all participants shall abide by their agreements with APPIC for participation in the APPIC Match. It is essential that all applicants to our program register for the matching process in order to be eligible. This internship 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 intern applicant. Applicants may register for the Match at www.natmatch.com/psychint. Results of the match will be communicated to applicants and training directors on match day.

SickKids Centre for Community Mental Health (GH-CCMH) Program Code number for the APPIC Match is 185411.

Selection process:

Applications are reviewed in a two-stage process.

Firstly, the Director of Training completes an initial screening of applications to ensure the minimum criteria are met. Secondly, two to three Ph.D. level psychologists who serve as clinical supervisors review the online application of each candidate and rate it according to a predetermined set of criteria. Based on these ratings, approximately 17 to 19 candidates are invited to an interview. Our interviews are almost all held in the second and third weeks of January, the dates set in accordance with the informal agreement amongst Canadian internship programs (CCPPP). Candidates being interviewed will meet with two to three psychologists who serve a clinical supervisors. Each interviewee is offered the opportunity meet with one or more current interns, although it is more likely that a group format will be used. It is important to emphasize that meetings between applicants and current interns are strictly confidential, and that no information about this meeting is solicited or accepted by the Internship Training Committee.

As stated, in accordance with APPIC guidelines, we do not solicit or accept any information from candidates about their ranking choices. In order to ensure adherence with this APPIC directive, we do not contact candidates following their interview. However, the Director of Training remains willing to respond to any additional questions from candidates about the training program.

General inquiries should be directed to:

Suventhini Thamotharampillai

Education Coordinator

The Gary Hurvitz Centre for Community Mental Health at SickKids

416-924-1164 ext.4243

sthamotharampillai@sickkidscmh.ca

Psychology personnel



The following registered clinical psychologists are assigned to provide direct supervision to one or more psychology interns each year.

Susan Yabsley, Ph.D., C. Psych. Anna Freud Centre; University College London.

Psychology Director of Training; Director, Specialized Services and Academic Leadership; Psychology Intern Supervisor

Lorne Sugar, Ph.D., C. Psych. York University.

Psychologist, Individual & Family Services Psychology Intern

Alan Rokeach, Ph.D., C.Psych. University of Toronto: Ontario Institute for Studies in Education

Psychologist, Individual & Family Services Psychology Intern

Amanda Uliaszek, Ph.D., C.Psych. Northwestern University (Illinois).

Psychologist & Clinician Scientist; Supervises Internship Program Evaluation Projects

Appendix A: Sample weekly schedule for Doctoral Psychology Interns



	Monday	Tuesday	Wednesday	Thursday	Friday
9 – 10 am	Developing	Infant & preschool client	Psychological		Relational Psychotherapy Seminar
10 – 11 am	Psychological assessment		Assessment testing session		
11 – 12 noon	testing session	Consultation		Clinical Team Meeting	Individual Supervision
12 – 1 pm	Lunch Break	Lunch Break	Infant &	Report writing	Lunch Break/Monthly Rounds
1 – 2 pm	Psychological Assessment	Individual Supervision	Preschool Seminar Lunch Break	Lunch Break	Report Writing
2 – 3 pm	Team	Report & Contact Notes Writing	Seminar in Therapeutic Process	Report writing and reading for seminars	
3 – 4 pm	Follow -up e.g., scoring and calling collaterals	Individual Therpay	Individual Play Therapy	treatment planning and preparation	Family Therapy
4 -5 pm	Individual Therapy	Family Therapy	Family Therapy	Co-Therapy Experience	
5 – 6 pm				Co-Therapy Experience	
6 – 7 pm				Co-Therapy Experience	
7 – 8 pm					