

# Edmonton Cross-Specialty Psychology Residency Consortium

CPA-Accredited | APPIC-Member

## Brochure

2025-2026



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# INTRODUCTION

The Edmonton Cross-Specialty Psychology Residency Consortium (ECPRC) is delighted to offer a clinical and counselling psychology residency training program that is hosted by The University of Alberta, Millard Health (WCB Alberta), the YWCA Edmonton, and Cross Cancer Institute (Alberta Health Services). Our main areas of training focus on clinical and counselling psychology across the lifespan, including specialized training in interventions, formal assessment, and health psychology.

The ECPRC is located within the greater area of Edmonton, Alberta, Canada – a large city with a metropolitan population of over 1.4 million people. Edmonton is the fifth largest city in Canada and is situated in central Alberta along the North Saskatchewan River.

It is critical for us to acknowledge that we live, learn, work and play here as uninvited guests on traditional Indigenous lands of the Treaty 6, 7 and 8 Peoples, including the Metis, Cree, Blackfoot, Iroquois, Dene, Nakota Sioux, Ojibway, Saulteaux/Anishanaabe. These lands are a sacred gift from the Creator, which have been taken from the Indigenous Peoples forcibly through Canada's sordid history of colonialism. As psychologists and psychologists-in-training, we make an active anti-racist commitment to supporting the First Peoples of this land with humility and to reconcile the harms psychology has perpetuated. This includes supporting autonomy and cultural continuity, incorporating indigenous ways of knowing and honouring and incorporating indigenous healing methods.

**We have been accredited for a 6 year term by the Canadian Psychology Association**, starting 2023-2024 and lasting until 2029-2030. For any questions about CPA Accreditation, please contact the [CPA Accreditation Office](#):

Stewart Madon, Ph.D., C.Psych.

[accreditation@cpa.ca](mailto:accreditation@cpa.ca)

Tel: 613-237-2144 ext. 333

All of our consortium sites have a long history of providing resident-level training. Millard Health previously maintained an independent CPA Accredited Doctoral internship program and each other site has been training PhD-level students and residents for decades. Our recent CPA-Accreditation affirms the high standard of training and organization that has sustained these institutions for years.

In addition to being CPA Accredited, we are also members of the Canadian Council for Professional Programs in Psychology (CCPPP) and the Association of Psychology Post-Doctoral and Residency Centers (APPIC). We participate in the APPIC Computerized Matching Program and adhere to APPIC guidelines.

## Residency Overview

We have six residency spots across four sites, resulting in five tracks:

- **Cross Cancer Institute - Health Psychology** (1 position)
- **Millard Health - Health Psychology** (2 positions)
- **UofA Clinical Services - Lifespan Community Mental Health** (1 position)
- **UofA Clinical Services - Early Lifespan School and Community Mental Health** (1 position)
- **YWCA - Community Mental Health** (1 position)

Our residency is a 1600-hour commitment, which is full-time over 12-months from September to August. This meets the registration requirements for the College of Alberta Psychologists and CPA Accreditation (6th Ed.) standards.

Track	Cross Cancer Institute	Millard Health	UofA Lifespan Community Mental Health	UofA Early Lifespan School and Community Mental Health	YWCA
<b>Population</b>	Adults	Adults	Lifespan	Early Lifespan	Lifespan/Early Lifespan
<b>Setting</b>	Medical Center (Inpatient & Outpatient)	Medical Center	Community Mental Health Center	Community Mental Health Center School System	Community Mental Health Center
<b>Service Delivery</b>	In-Person	Virtual/In-Person (depending on client needs)			
<b>Presenting Problem(s)</b>	Cancer care, Grief & Loss, Adjustment, Palliative care	Rehabilitation Disability Traumatic Injury	Generalist Intervention Psychoeducational Psychodiagnostic Therapeutic Assessment Supervision		Domestic & Family Violence, Human Trafficking, Trauma, Women's Health
<b>Length of Service</b>	Brief	Brief/Moderate-term	Brief/Long-term	Brief/Long-Term	Brief/Long-term

<b>Branch of Psychology</b>	<b>Clinical/Counselling</b>				
	Health & Rehabilitation			Educational/ School	
<b>Psychological Activities &amp; Experience</b>					
<b>Individual Intervention</b>	Major Area (50%+)				
<b>Group Intervention</b>	Experience (21-30%)	Experience (21-30%)	Exposure (1-20%)	Experience (21-30%)	Experience (21-30%)
<b>Couple Intervention</b>	Experience (21-30%)		Experience (21-30%)	Experience (21-30%)	
<b>Consultation</b>	Emphasis (31-49%)	Emphasis (31-49%)	Exposure (1-20%)	Exposure (1-20%)	Exposure (1-20%)
<b>Interdisciplinarity</b>	Emphasis (31-49%)	Major Area (50%+)			Exposure (1-20%)
<b>General Assessment</b>	Major Area (50%+)				
<b>Formal Assessment</b>		Emphasis (31-49%)	Major Area (50%+)	Major Area (50%+)	
<b>Supervision</b>	Exposure (1-20%)	Experience (21-30%)	Major Area (50%+)	Major Area (50%+)	Exposure (1-20%)

## Philosophy of Residency Program

The shared goal of the ECPRC consortium is to support residents to develop competency in clinical, counselling, and health psychology. We also offer opportunities for specialized training in the professional activities of diagnosis, treatment and intervention, psychological assessment, consultation, and program evaluation. We aim for residents to experience diverse training in the public sector and community focused settings with clients across the lifespan.

We believe the designation of a practitioner-scientist model best encompasses learning opportunities for residents. We value the scientist-practitioner model and believe most residents come into residency with extensive exposure to the science of the profession. While we believe psychologists should be proficient in both research and clinical practice, our program provides more exposure to the latter. We have found success training residents from both Ph.D. and Psy.D. programs.

## Training Goals of the ECPRC Consortium Program

In our consortium, we support our residents as they develop into competent independent practitioners. To that end, our goals are to help our residents:

- 1) Develop competency in clinical, counselling, and health **psychology interventions** such as general assessment and counselling, and apply them to a broad range of individuals from across the lifespan from young children to older adults.
- 2) Develop competency in **formal assessment** including potential experiences with neurocognitive, psychoeducational, vocational, and personality testing as well as therapeutic assessment.
- 3) Develop **clinical supervision** skills by providing mentorship (meta-supervision) to junior students while receiving supervision related to these activities.
- 4) Develop competency **working in multidisciplinary settings** where residents will have regular opportunities to consult with a range of health professionals.
- 5) Function as exemplar Practitioner-Scientists by participating in **program evaluation** activities.
- 6) Function as exemplar Practitioner-Scientists by **integrating research into practice**.
- 7) Develop appropriate **interpersonal relationships** with clients, supervisors, colleagues, community members, and administration.
- 8) Develop awareness, knowledge, and skills needed to **apply the ethical principles** with the Canadian Code of Ethics for Psychologists and adhere to the standards, guidelines, and legislation relevant for practice in Alberta.
- 9) Develop awareness and knowledge of **issues of individual differences and diversity**.
- 10) **Socialize to the aspects of the profession of psychology** including developing residents' professional identity, promoting reflective practice, and achieving a sustainable work-life balance.

More specifically, our objectives by the end of the residency year can include:

### **Assessment/consultation:**

Residents are expected to achieve competence in the following skills and judgments required for psychological assessment and consultation: interviewing; selecting psychological tests; administering and scoring psychological tests; interpreting test results; integrating findings from various sources; conceptualizing cases; diagnosing psychological disorders; formulating treatment recommendations;

writing assessment/consultation reports; and giving feedback to clients/patients, families, and other professionals.

**Treatment:**

Residents are expected to achieve competence in the following skills and judgments required for psychological treatment: evaluating treatment needs, working with clients to set realistic treatment goals, selecting interventions, operating effectively within the chosen theoretical orientation(s), responding flexibly to clients' needs as they arise, managing crises, recognizing the need for consultation, and managing termination.

**Sensitivity to differences:**

Residents are expected to demonstrate sensitivity to individual and group differences by including relevant cultural, ethnic, gender, and sexuality differences when conceptualizing and diagnosing, and adjusting assessment and treatment approaches to meet the needs of patients representing various cultures, lifestyles, and levels of functioning.

**Professional identity and functioning:**

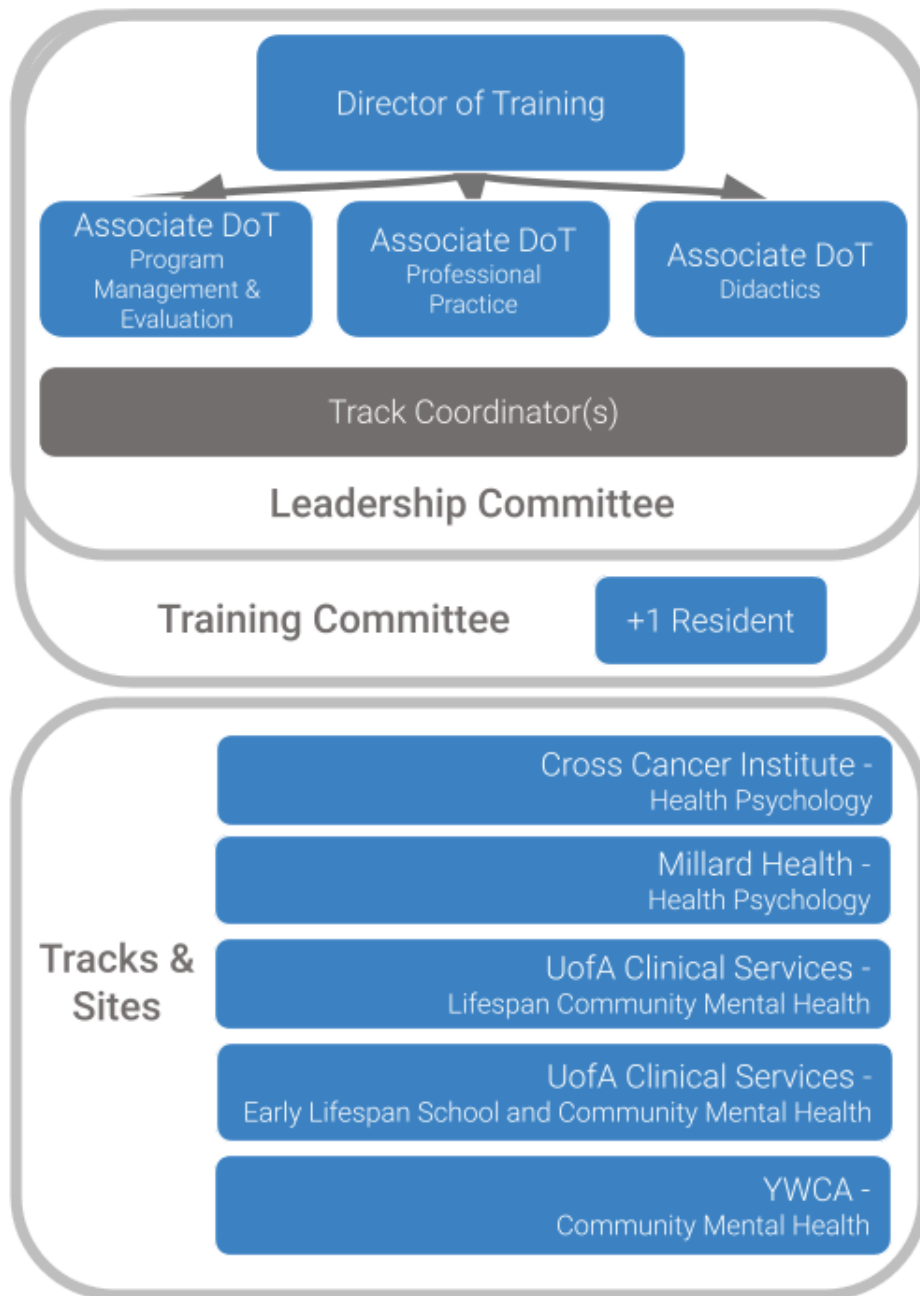
Residents are expected to demonstrate identification with the psychologist's professional role and values by understanding the psychologist's role on the multidisciplinary clinical team; participating actively in multidisciplinary clinical teams; participating in activities specific to psychologists; interacting respectfully with other disciplines; understanding the roles of other disciplines; showing awareness of ethical standards of psychological practice; showing awareness of mental-health and other relevant legislation; behaving ethically toward patients, colleagues, and other staff; managing workload responsibly; completing work promptly; integrating readings and research findings into clinical practice; and interacting with community partners (e.g., schools, probation, physicians) to facilitate client care.

**Research grounding:**

Residents will be comfortable in evaluating practice-related research and will base decisions about their work (assessment, intervention, consultation) with clients on current findings. They will be able to evaluate the quality of evidence used to support clinical decisions.

# STRUCTURE OF THE CONSORTIUM

The consortium is composed of four partners, each having a representative (site coordinator) participating in the Leadership Committee.





Our leadership committee consists of:

<b>Director of Training</b> Track Coordinator of Millard Health	Dr. Kyle Schalk	kyle.schalk@millardhealth.com
<b>Associate Director of Training,</b> Professional Practice Track Coordinator of Cross Cancer Institute	Dr. Kim Crosby	kimberly.crosby@albertahealthser vices.ca
<b>Associate Director of Training,</b> Program Management and Evaluation Track Coordinator of UofA Clinical Services (Lifespan)	Dr. Jonathan Dubue	jdubue@ualberta.ca
<b>Associate Director of Training,</b> Didactics Co-track coordinator of YWCA	Megan England	m.england@ywcaedm.org
Co-track coordinator of YWCA	Ashley Lim	a.lim@ywcaedm.org
Track Coordinator of UofA Clinical Services (Early Lifespan)	Dr. Karen Cook	kcook@ualberta.ca

For any inquiries about our program, please contact our Director of Training.

# OVERVIEW OF TRACKS

Each week, residents will be expected to spend a minimum of 20 hours and maximum of 25 hours per week in face-to-face service delivery. Direct time will not exceed two thirds of training time.

ECPRC Schedule					
	Monday	Tuesday	Wednesday	Thursday	Friday
AM	Major Rotation	Minor Rotation	Major Rotation	Major Rotation	Major Rotation
PM	Major Rotation	Minor Rotation	Didactics (online or in-person)	Major Rotation	Major Rotation

**Major rotations** are 12 months from Sept-Aug  
**Minor rotations** are 6 months from Sept-Feb (#1) and Mar-Aug (#2)  
**Didactics** include professional development seminars, peer support, group supervision, resident meetings.

## Rotation Structure

Residents will spend 3.5 days/week at their major rotation (0.7 FTE) with an opportunity to specialize. Residents will also have access to the other consortium sites through minor rotations (0.2 FTE), increasing their exposure to skill development or select populations. Each resident will have an opportunity to participate in at least two different minor rotations, spanning 6 months each. Residents will be given the last Friday of each month to work on dissertation, professional registration, or other forms of professional development.

## Rotation Selection Process

**Applicants should clearly indicate which track(s) they are interested in on their cover letter.** During the APPIC match process, each rotation track will appear as a separate site, meaning you will be able to rank order all of our rotations in concert with your other interviewed sites. Once the APPIC Match process is complete, we will work closely with the successful applicants to determine their minor rotations. During this time, successful applicants will complete site appropriate Human Resources paperwork as well as required documentation to all for placement at the minor rotation sites.

## Track Details

### ***Cross Cancer Institute - Health Psychology***

Provides one-to-one counselling for inpatients, outpatients and families impacted by cancer. Services are offered to people of all cultures, spiritual beliefs, and life orientations, including people who are:

- in distress and wanting one-to-one counselling and/or group counseling
- struggling with meaning in life and death
- living with experiences of loss, self-worth, being in the hospital, or feelings of being isolated
- coming to terms with bad news or with a future which has become more uncertain

Services predominantly focus on counselling about how to deal with difficult emotions, loss, grief, stress and adjustment.

This rotation focuses primarily on Health and Clinical Psychology. This entails providing services to inpatients, outpatients and families impacted by cancer. These services are provided in a multidisciplinary setting that includes numerous health professionals. Activities include the provision of individual and group counselling, as well as general assessment of relevant clinical and counselling issues. General assessment activities may include the use of clinical interviews, background information and self-report questionnaires. Residents may also have an opportunity to provide mentorship to doctoral practicum students placed at the site. Non-clinical activities may include participating in program evaluation research and providing education/seminars to other health professionals.

<https://www.albertahealthservices.ca/findhealth/Service.aspx?serviceAtFacilityId=1081971>

### ***Millard Health - Health Psychology***

The Millard Health Centre delivers a full continuum of rehabilitation and disability management services. Located in Edmonton since 1952, Millard Health is a division of the Workers' Compensation Board of Alberta and employs over 200 professionals who provide services to over 5000 clients per year.

Our client base is broad and diverse, and primarily includes referrals from WCB Alberta case managers. Rehabilitation services that include psychology intervention are provided through a number of interdisciplinary programs, as follows:

**Return to Work Complex (RWC):** This program is designed for clients who have experienced significant barriers in their recovery from physical injury, many presenting with chronic or complex pain.

**Brain Injury Program (BI):** Clients referred to this program have incurred a head injury, ranging from mild to severe. Clients access individual treatment and attend various groups. Program is typically eight weeks in length.

**Traumatic Psychological Injury Program (TPI):** These clients have a diagnosis of PTSD or other trauma related disorder. Clients access individual treatment and attend various psychoeducational and process groups. Program is typically 12-20 weeks in length.

**Cumulative Psychological Injury Program (CPI):** These clients have encountered bullying/harassment and/or burnout at work. Clients access individual treatment and attend various psychoeducational and process groups. Program is typically 12 weeks in length.

All programs provide an individualized, structured, and goal-oriented approach to rehabilitation, with a major focus on preparation for return to work. Each program consists of an interdisciplinary treatment team including members from the following disciplines: psychology, physical therapy, occupational therapy, exercise therapy, physicians, rehabilitation coordination, and vocational training.

The residency track consists of general and formal psychological assessment, individual counselling, group counselling, interdisciplinary team process, administrative practices and documentation, and supervision. General assessment activities may include the use of clinical interviews, background information and self-report questionnaires. Formal assessment can include psychological injury assessment and mild traumatic brain injury assessment. There may also be opportunities for cognitive and neuropsychological assessments pending resident competency and supervisor availability. Residency faculty consists of several doctorate level psychologists including a neuropsychologist. All residency faculty members are fully registered with the College of Alberta Psychologists. Most residents complete major rotations primarily on the TPI/CPI and Brain Injury programs.

<https://www.wcb.ab.ca/millard-treatment-centre/>

### ***UofA Clinical Services - Lifespan Community Mental Health AND UofA Clinical Services - Early Lifespan School and Community Mental Health***

Clinical Services, housed within the University of Alberta, offers low-cost psychological services to the general public, including intervention (individual and groups), formal assessment (psychoeducational, neurocognitive, psychodiagnostic, personality), and couples and family therapy. These services are mainly provided by masters and doctoral students from the Counselling Psychology and School and Clinical Child Psychology programs and are supported by two resident clinical supervisors, two Clinic Directors, and many external supervisors.

Both tracks at the University of Alberta Clinical Services offer a breadth of experience across each foundational competency. This includes skill development in intervention (individual, group, couples), general assessment, formal assessment (psychodiagnostic, psychoeducational, neurocognitive), and supervision. This includes unique opportunities to (a) supervise junior students under a meta-supervision model, (b) access our vast testing library, (c) complete program evaluation in process-outcome monitoring and general clinic operations, (d) provide guest lectures to graduate students, and (e) attend select graduate lectures in the courses offered in the Counselling Psychology

and School and Child Clinical Psychology programs. Given our clinic offers a wide breadth of training opportunities, a major rotation here can be as flexible as needed to meet your residency training goals.

Successful candidates who have a major rotation in Clinical Services are expected to support clinic operations. This means being a mentor to students in the clinic, supervising at least two students during the school year, and covering our Monday and Thursday evenings (4:30-7p). This may sometimes include Saturday coverage, which happens 1-4 times/year.

The tracks differ largely regarding the population served and the expertise of your primary supervisor.

### **UofA Clinical Services - Lifespan Community Mental Health**

This track focuses predominantly on adults (16+). The primary supervisor of this track, Dr. Jonathan Dubue, specializes in humanistic psychotherapy, process-outcome monitoring/deliberate practice, clinical supervision, and therapeutic assessment.

### **UofA Clinical Services - Early Lifespan School and Community Mental Health**

This track focuses on children, adolescents, and young adults (up to age 25). The primary supervisor of this track, Dr. Karen Cook, specializes in psychodiagnostic assessment, child, adolescent, parent/family, and group intervention, incorporating play therapy, and other client-centered and experiential modalities. This track also offers formal assessments in partnership with local school boards, pending availability.

Students from the School and Clinical Child Psychology Program at the University of Alberta are given preference in the selection process. This means that between equal applicants, students from the aforementioned program will be given preference. Applicants from outside this program will still be considered and are encouraged to apply.

<https://www.ualberta.ca/educational-psychology/centres-and-institutes/clinical-services>

### **YWCA Edmonton**

YWCA Edmonton is offering one doctoral residency focused primarily on Counselling Psychology. Residents will have the opportunity to provide counselling to any or all of the following populations: adults, children, adolescents and groups. This doctoral residency may also include training and experiences in both long-term and brief-focused psychotherapies in partnership with local women's shelters. Residents will be trained to work with issues including but not limited to domestic, family and gender based violence and trauma. Residents may have the opportunity to co-facilitate a women's support group during their residency. General assessment of clinical and counselling related issues is also expected to occur. General assessment activities may include the use of clinical interviews, background information and self-report questionnaires. The YWCA has a flexible session limit with

most clients receiving up to 20 sessions. Residents may also provide mentorship to masters practicum students and volunteer counsellors.

A major rotation here will give the resident an opportunity to learn and practice in a high-performing and supportive environment, while working with clients from a range of ethno-cultural backgrounds. YWCA psychologists have extensive experience and expertise around the issues of domestic and family violence, human trafficking, working with the Indigenous community, trans and gender diverse folks, and persons with disabilities. Many of our students return to the YWCA as staff or volunteers, drawn to the supportive team, engaging work, and meaningful impact on our clients.

YWCA Edmonton is a powerful voice for equity and has been leading social change and progress for women and families since 1907. For over a century we've been at the forefront of social change and a movement to fight gender-based violence, advocate for equity and foster leadership in women and girls.

Each year, YWCA Edmonton serves thousands in our community through leadership programs, counselling services, supporting people with disabilities, outdoor education, and advocacy. YWCA Edmonton works to reduce barriers to social supports, advance gender equity and achieve economic equality by responding to urgent needs in the community while creating sustainable systemic change. Counselling Services are a key part of our services. We believe providing access to quality mental health supports is critical to building a resilient and vibrant community.

### **History & Model**

YWCA Edmonton started offering Counselling Services in 1972 in response to a growing need for affordable psychological services. We offer support to all who need us, but our clients are typically women with lower incomes who are suffering from trauma and are often in crisis. Each year we provide approximately 4000 individual counselling sessions to over 400 unique clients. Ninety-nine percent of these sessions were partially or fully subsidized. Our clients are dealing with issues of domestic violence, anger management, childhood abuse, sexual abuse, divorce, suicide, and/or a desire for healthier relationships. These clients often present symptoms of low self-esteem, anxiety, depression, impulsivity, and feelings of worthlessness, hopelessness, and guilt.

### **Guiding Principles**

**Empowerment, Advocacy, & Education** | We aim to empower our clients to make informed choices and decisions about their lives. By providing counselling services, advocacy, and education, we support our clients in increasing their personal efficacy in establishing healthy relationships and ending the cycle of violence.

**Personalized Care** | Our services operate based on the assumption that each individual has the capacity for positive growth. Our counsellors and psychologists assist clients to identify their positive qualities and strengths and help them generate solutions to their problems. The counsellors work with clients to construct a new and better reality. Recovery may be facilitated holistically by using solution-focused

strategies, cognitive behavioural techniques, emotion-focused therapy, Eye Movement Desensitization Reprocessing (EMDR), narrative therapy, hypnosis, and sensorimotor work in combination with relaxation and guided imagery training.

**Community Focus** | We believe that in order to best meet the needs of our clients we must work collaboratively with other organizations to create a cohesive network of support for the individuals and communities we serve. No one organization can be everything to everyone, but together we can create positive change.

**Professional Services** | Our Counselling Services includes a team of trained psychologists and master's-level practicum students offering quality services and expertise. We provide professional services that encompass a diverse range of evidence-based therapeutic practices, including emotion-focused and person-centered therapies, gender-related and feminist therapy, EMDR, Acceptance and Commitment Therapy, and play therapy. We place a special emphasis on working within a supportive, trauma-informed model.

### **Additional Programs and Services**

In addition to Counselling Services, we offer:

**Advocacy** | to create equity in our community, inclusive of all. We work to create lasting change, influencing public policy, empowering people to stand up for social justice and foster healthy, equitable communities. Our advocacy aims to end gender-based violence, achieve economic equality, reduce barriers to social support and foster leadership in women and girls.

**Camp Yowochas** | regarded as one of Alberta's finest summer camps and outdoor education centres. Every year nearly 8,300 children, youth, and adults experience the exceptional team building, leadership development and environmental education Camp Yowochas has to offer.

**Disability Services** | empowering individuals with disabilities to achieve their full potential with the support of their community. We provide nearly 100,000 hours and 4,700 full days of support to approximately 188 children and adults annually.

**Youth Programs** | providing youth a safe place to ask important questions, learn critical thinking skills, and support one another. These programs reduce the risk of violence in girls' lives, improves their mental health, and sets the stage for their development into strong, healthy, young women leaders.

[https://www.ywcaofedmonton.org/?gclid=Cj0KCQjwyLDpBRCxARIsAEENsrK\\_KF0w0wJoelY3GPCqSoZ\\_25XWM8Kpw07C8tKkYuoXFUdMAePD6AaAjkIEALw\\_wcB](https://www.ywcaofedmonton.org/?gclid=Cj0KCQjwyLDpBRCxARIsAEENsrK_KF0w0wJoelY3GPCqSoZ_25XWM8Kpw07C8tKkYuoXFUdMAePD6AaAjkIEALw_wcB)

## Hours Expectations

Below is an estimation of a regular work week at each site. Please note that these are intentionally averages and may not represent your experience week-to-week.

Regular Work Week				
	Cross Cancer Institute	Millard Health	UofA Clinical Services	YWCA
<b>CLINICAL TIME</b>				
<b>Intervention</b> (individual, couples, group)	12-14	6-8	4-6	14-16
<b>Assessment</b> (includes report writing)	0	4-6	4-6	0
<b>Supervision of Students</b>	1-2	1-2	2-4	1-2
<b>Individual &amp; In-vivo Supervision</b>	2	2	2	2
<b>Minor Rotation</b>   Direct intervention, assessment or consultation, & Individual Supervision	3-4 (direct) 1 (supervision)			
<b>Individual Supervision in Groups</b> (Consortium)	1			
<b>Peer Consultation</b> (Consortium)	.5			
<b>NON-CLINICAL TIME</b>				
<b>Administration</b>   Case notes and management (billing, scheduling, resourcing), Case prep / Learning assessments / Informal consultation	8-10	8-10	10-12	8-10
<b>Program Evaluation/Research</b>	0-4			
<b>Meetings</b>   Staff meetings, mentorship	1-2	1-3	0-4	0-4
<b>Minor Rotation</b>   Non-clinical time (admin, meetings)	1-2	3-4	3-4	1-2
<b>Didactic Training</b> (Consortium)	2-4			
<b>TOTAL HOURS/WEEK</b>	~37.5			
<i>You can estimate each work day has 3-4 direct client contact hours, with the rest being non-clinical hours.</i>				

## Stipend

As this is a consortium, we have made every effort to ensure that all residents receive equal and fair compensation. Residents in our consortium are paid directly by their track site, thus exact compensation may slightly vary.

Presently, our remuneration is **\$44,812 CAD/year average** across each site/track, plus benefits which differ from site to site. Below is a breakdown of each site's stipend and benefits:



Site	Stipend 2024/5	Benefits	Vacation/Time off
Cross Cancer Institute	\$43,873	<ul style="list-style-type: none"> <li>• <a href="#">Health benefits</a></li> </ul>	<ul style="list-style-type: none"> <li>• 15 vacation days (paid 6% in lieu)</li> <li>• 18 sick days</li> <li>• 10 research/education days (unpaid)</li> </ul>
Millard Health	\$45,000	<ul style="list-style-type: none"> <li>• Access to Millard Health Facilities (e.g., gym)</li> <li>• Access to EFAP counselling services</li> </ul>	<ul style="list-style-type: none"> <li>• 15 vacation days (8% in lieu of vacation and health benefits)</li> <li>• Paid days off between Dec 25th and Jan 1st</li> </ul>
UofA Clinical Services <i>both tracks</i>	\$45,000	<ul style="list-style-type: none"> <li>• <a href="#">Health benefits</a></li> <li>• Tuition coverage (if UofA student)</li> <li>• Professional Expense Fund (\$1,400)</li> </ul> <p><i>These benefits are subject to change due to bargaining in 2024/25</i></p>	<ul style="list-style-type: none"> <li>• 4% in lieu</li> <li>• Sick time as needed</li> <li>• Paid days off between Dec 25th and Jan 1st</li> </ul>
YWCA Edmonton	\$45,000	<ul style="list-style-type: none"> <li>• Professional Development Expense Fund (\$500)</li> <li>• Health Benefits (Chambers of Commerce)</li> </ul>	<ul style="list-style-type: none"> <li>• 12 vacation days</li> <li>• 12 paid personal days</li> <li>• Mental health days as needed and approved</li> <li>• Paid research/education days between Dec. 25<sup>th</sup> to January 1<sup>st</sup> - based on organization calendar.</li> </ul>

# DIDACTIC TRAINING

As outlined in the brochure, one half-day per week is dedicated to non-clinical activities that focus on resident development in the areas of consultation, program evaluation, supervision, and didactic learning. Below is a description of these activities:

**Didactic Learning:** Residents receive a minimum of 2 hours of didactic training per week, with a minimum of 9 hours of didactic learning a month. Didactic learning involves: directed reading/training, in-service seminars, and consultation.

This didactic learning follows a weekly schedule with approximately two monthly in-service seminars. A typical schedule in a month will look like:

Week 1	Week 2	Week 3	Week 4
Self-Directed Learning	Ethics Discussion OR In-Service Seminar	Ethics Discussion OR In-Service Seminar	In- Service Seminar

- **Self-Directed Learning** (2 hours monthly) | During the first Wednesday of the month, residents engage in self-directed learning such as (a) professional development focused specific therapy interventions or assessment procedures, (b) reading or review of books, articles, websites, or videos relevant to specific training goals, or (c) seeking certifications in specialized areas.
  - These trainings are relevant to their residency goals and to their major or minor rotations. As the training year progresses, residents will be given the opportunity to choose additional topics for self-study.
  - A reading list for each track/site will be provided to residents during orientation.
- **Ethics Discussion** (2 hours monthly) | During the second or third Wednesday of the month (depending on speaker availability), residents will consult about an ethical dilemma and decision making process. Each resident will be assigned two weeks to bring in a dilemma. For this conversation, residents are encouraged to:
  - Bring in a relevant dilemma they faced / or are facing (if none come to mind, Megan will have a few write-ups prepared)
  - Consult relevant documents, including the [CPA Code of Ethics](#) or [CAP's Regulatory documents](#).
  - Engage in general peer consultation if this process takes less than 2 hours.

- **In-Service Seminar (3-5 hours monthly):** Twice per month, residents participate in lectures and workshops from training staff, external speakers, and/or doctoral residents. Topics range from year to year to reflect the interests of training staff and residents and have included: (a) Professional Ethics, (b) Private Practice Issues, (c) Suicide Risk Assessment and Management, (d) Cross-Cultural Issues, (e) Chronic Pain, and (f) Clinical Supervision.
  - These In-Service Workshops are coordinated by the Associate Director of Training (Didactics).
  - It is our goal that at least one in-service seminar/month will focus on a specific skill or intervention. These weeks may be shorter (i.e., 1-1.5 hours), with the intent of giving residents opportunities to debrief or share their thoughts post-presentation.
- **Other Didactic Training:** Clinical Services at the University of Alberta offers annual workshops in clinical supervision from leading researchers in the area. Residents in our consortium are encouraged to attend. Residents are also provided with professional development funds at most sites (amounts vary) and are encouraged to use these funds to access additional training workshops throughout the year.

**Individual Supervision:** Every week, residents participate in 1 hour of individual supervision in a group setting. One resident per week presents a case or issue to the group in the presence of a clinical supervisor.

**Peer Consultation:** In these half-hour meetings, residents discuss cases to aid in conceptualization and intervention planning. These meetings may be supported by a clinical supervisor when possible or may be run independently by residents.

# CLINICAL SUPERVISION

## Frequency of Supervision

The ECPRC follows the supervision guidelines of the CPA's Accreditation Standards for Doctoral and Residency Programs in Professional Psychology (6th Revision, 2023). This means residents will receive at least 3 hours of individual supervision with a total of 4 supervision hours per week. Supervision will predominantly be in-person, although this can include virtual supervision as needed. Residents will also receive at least 1 hour of group supervision each week, that at least 10% of supervision will involve direct observation, and no more than 25% of individual supervision will be asynchronous. Since we are a consortium, supervisors will provide residents with a minimum of one hour per week of individual supervision at each of the consortium rotation sites, including minor rotation sites.

This works out to a ratio of approximately 1 hour of supervision for every 10 residency hours.

## Site Specific Supervisors

- At the **Cross Cancer Institute**, supervision will consist primarily of weekly 1:1 meetings offered by Drs., Karen Cogan, Kim Crosby, Terilyn Pott, Kevin St. Arnaud, and Jill Turner.
- At **Millard Health**, supervision will consist primarily of weekly 1:1 meetings offered by various psychologists on site. Specific supervisors are Drs. Kyle Schalk, Abigail Abada, Lori Rossi, Wendy Salvisberg, Dustin Marcinkevics, Nicol Patricny, Larissa Brosinsky, Annette Colangelo, and Mr. Michael Varkovetski.
- At **Clinical Services**, supervision will consist primarily of weekly 1:1 meetings offered by Drs. Karen Cook, Jonathan Dubue, and UofA Faculty.
- At the **YWCA Edmonton**, supervision will consist primarily of weekly 1:1 meetings offered by Dr. Stu Hoover, Megan England, Dr. Lauren Johnson and Ashley Lim.

## Training Faculty

Supervision is also supported by a wealth of additional training faculty. Residents participating in our consortium will have access to all of these faculty at various times either directly through 1:1 supervision or indirectly through group supervision or case consultations.

Name	Credentials	Practice Area and Contact Information
<b>Cross Cancer Institute</b>		
Kim Crosby	<b>Associate Director of Training</b> Doctor of Philosophy Registered Psychologist	Dr. Crosby has specialized knowledge and experience in psychosocial oncology, chronic pain, and palliative care. Her therapeutic approach includes cognitive-behavioral therapy, acceptance and commitment therapy, and existential/meaning-centered therapy. She currently works at the Cross Cancer Institute and is a Clinical Lecturer at the University of Alberta in the Department of Oncology. <i>kimberly.crosby@albertahealthservices.ca</i>
Jill Turner	Doctor of Philosophy Registered Psychologist	Dr. Jill Turner has specialized knowledge and experience in psychosocial oncology. She has worked with cancer patients and their families for 20 years in both outpatient and inpatient settings. <i>jill.turner@albertahealthservices.ca</i>
Karen Cogan	Doctor of Philosophy Registered Psychologist	Dr. Cogan has specialized knowledge and experience in the area of health psychology, anxiety and depression, trauma, grief and loss, individual and marital therapy. She has worked for over 20 years in multi-disciplinary hospital and school teams and in private practice settings. Her clinical work is informed by an eclectic approach to meet the diverse and varied needs of the people with whom she works. <i>karen.b.cogan@albertahealthservices.ca</i>
Terilyn Pott	Doctor of Philosophy Registered Psychologist	Dr. Pott has specialized knowledge and experience in psychosocial oncology, chronic pain, trauma, and grief and loss. She also specializes in supervision, and her therapeutic approach includes acceptance and commitment therapy, EMDR, clinical hypnosis, ERP, and cognitive behavioural therapy. She works at both the Cross Cancer Institute, as well as in private practice, and enjoys volunteering with the College of Alberta Psychologists and the Psychologists Association of Alberta. <i>terilyn.pott@albertahealthservices.ca</i>
Kevin St. Arnaud	Doctor of Philosophy Registered Psychologist	Dr. St. Arnaud has specialized knowledge and experience in psychosocial oncology and palliative care. He also has specialized training in psilocybin, ketamine, and MDMA- assisted psychotherapies and provides

psychedelic therapy in private practice. His therapeutic approach is integrative, drawing from psychodynamic, cognitive-behavioural, existential-humanistic, and transpersonal modalities. Dr. St. Arnaud is currently an Assistant Clinical Professor of Palliative Medicine at the University of Alberta.  
*kevin.starnaud@albertahealthservices.ca*

**Millard Health**

Kyle Schalk	<p><b>Director of Training</b>                  Doctor of Philosophy                  Registered Psychologist</p>	<p>Dr. Schalk is the Clinical Supervisor at Millard Health and remains involved with the Traumatic Psychological Injury, Cumulative Psychological Injury, and Complex Pain programs at Millard Health. He also assists with supervision of practicum students and provisional psychologists. He uses an integrative approach involving evidence-based treatment for trauma (EMDR, CPT, PE) as well as CBT and ACT/mindfulness-based interventions.  <i>kyle.schalk@millardhealth.com</i></p>
Abigail Abada	<p>Doctor of Philosophy                  Registered Psychologist</p>	<p>Dr. Abada works specifically in the Traumatic Psychological Injury / Cumulative Psychological Injury programs at Millard Health.  <i>abigail.abada@millardhealth.com</i></p>
Annette Colangelo	<p>Doctor of Philosophy                  Neuropsychologist</p>	<p>Dr. Colangelo works specifically in the Brain Injury program at Millard Health. She completes formal assessments of neuropsychological and psychological conditions across the spectrum of traumatic brain injury severity and brain conditions of other etiologies. Assessment procedures focus on the identification of difficulties and pathways for compensation to help determine rehabilitation and return to work potential. She also assists with supervision of field placement and practicum students.  <i>annette.colangelo@millardhealth.com</i></p>
Lori Rossi	<p>Doctor of Philosophy                  Registered Psychologist</p>	<p>Dr. Rossi is a registered psychologist with over 20 years of experience. She works primarily in the Cumulative Psychological Injury program at Millard Health. She also remains active treating clients through the Traumatic Psychological Injury program. She specializes in integrative and evidence-based approaches to counselling. She enjoys assessment for psychological injuries. She has supervised practicum students,</p>

		<p>residents, and provisional psychologists throughout her career. <i>lori.rossi@millardhealth.com</i></p>
Wendy Salvisberg	Doctor of Philosophy Registered Psychologist	<p>Dr. Salvisberg works specifically on the Traumatic Psychological Injury program at Millard Health. She uses an integrative approach involving trauma-based treatment (PE, CPT, EMDR) as well as CBT, self-compassion, and ACT/mindfulness-based interventions. <i>wendy.salvisberg@millardhealth.com</i></p>
Nicol Patricny	Doctor of Philosophy Registered Psychologist	<p>Dr. Patricny works specifically in the Traumatic Psychological Injury program at Millard Health in a treatment and assessment capacity. She has been involved in clinical supervision of doctoral-level psychology residents and undergraduate psychology interns. Her theoretical orientation is integrative. She utilizes empirically supported trauma-based approaches (i.e., Prolonged Exposure, EMDR, and Cognitive Processing Therapy), Dialectical Behavior Therapy, Cognitive Behavioural Therapy, Acceptance and Commitment Therapy/Mindfulness, and Solution-Focused Therapy. <i>nicol.patricny@millardhealth.com</i></p>
Larissa Brosinsky	Doctor of Philosophy Registered Psychologist	<p>Dr. Brosinsky works specifically on the Brain Injury Program at Millard Health. She uses a primarily humanistic and integrative approach to her work, often including EFT and ACT/mindfulness-based interventions. <i>larissa.brosinsky@millardhealth.com</i></p>
Michael Varkovetski	Masters of Science Registered Psychologist  <i>Currently completing PhD</i>	<p>Mr. Varkovetski works specifically in the Brain Injury program at Millard Health. His practice focuses on psychological assessment, intervention, and group psychoeducation. He also assists with supervision of undergraduate and graduate level trainees. He uses an eclectic approach involving psychoeducation, CBT, ACT/mindfulness-based interventions, and trauma-based treatment such as PE. <i>michael.varkovetski@millardhealth.com</i></p>

Jonathan Dubue	<p><b>Associate Director of Training</b>                  Doctor of Philosophy                  Registered Psychologist                  Lifespan Community Mental Health - Primary Supervisor</p>	<p>Dr. Dubue works from an integrative approach including existential-humanistic, experiential, and 3rd wave CBT. He has specialized knowledge in suicide assessment and management, clinical supervision, and therapeutic assessment.  <i>jdubue@ualberta.ca</i></p>
Karen Cook	<p>Doctor of Philosophy                  Registered Psychologist                  Early Lifespan and School Community Mental Health - Primary Supervisor</p>	<p>Dr. Cook is experienced in assessment, treatment, and consultation in infant and preschool mental health and children’s mental health (public sector), and individual and group counselling in the private sector. Her research interests focussed on early parent-child relationships and individual differences.  <i>kcook@ualberta.ca</i></p>
Rebecca Hudson-Breen	<p>Doctor of Philosophy                  Registered Psychologist                  Associate Professor                  Counselling Psychology</p>	<p>Dr. Hudson Breen has experience across a range of individual and couple and family therapies including integrative and constructivist approaches, Emotion Focused Therapy, and Cognitive Behavioural Therapy.</p>
Phillip Sevigny	<p>Doctor of Philosophy                  Registered Psychologist                  Associate Professor                  School &amp; Clinical Child Psychology and Counseling Psychology</p>	<p>Prior to academia, Dr. Sevigny worked in tertiary care settings focusing on families and children with neurodevelopmental disabilities. He is influenced by humanistic and family systems theories and researches PTSD, parenting self-efficacy, psychological wellbeing, and fatherhood.</p>

**YWCA**

Ashley Lim	<p>Masters of Education                  Registered Psychologist                  Director of Counselling Services</p>	<p>Ashley is a Registered Psychologist in Alberta and Nunavut, with over 15 years of direct front line experience working in community-based practice settings. She has worked with adults, youth, families, BIPOC and other ethnocultural minorities, 2SLGBTQ+ clients, clients with disabilities, victims of domestic violence and their families. Ashley is the current Chair of the Council of Service Providers for the Community Initiatives Against Family Violence (CIAFV) in Edmonton. Ashley with YWCA Canada’s Violence Against Women Network to eradicate violence nationally.</p>
Megan England	<p><b>Associate Director of Training</b>                  Masters of Arts                  Registered Psychologist</p>	<p>Megan works with individual clients and facilitates the domestic violence support group at YWCA. She mentors and supervises graduate level trainees. Megan’s approach is fundamentally client-centred &amp; trauma</p>



*Currently completing PhD* informed, integrating from multiple modalities (especially emotion-focused, EMDR, feminist lenses).  
*m.England@ywcaedm.org*

**Stu Hoover**      **Doctor of Philosophy  
Registered Psychologist**

Dr. Hoover holds degrees in mathematics, economics, and counselling psychology. His practice focuses on life transitions (career, family/relationships, loss) and recovery (trauma, depression, stress/anxiety, isolation) with mature teens and adults. Dr. Hoover specializes in group psychotherapy using process & psychodrama informed intervention. In addition to private practice work, Dr. Hoover supports the YWCA with supervision and is an Adjunct Professor at Concordia University and the University of Alberta.

**Lauren Johnson**      **Doctor of Philosophy  
Registered Psychologist**

Dr. Johnson is a Registered Psychologist in Alberta (CAP #3271) and Northwest Territories (License #2250-71511), and is an EMDR certified therapist. She completed her Doctor of Philosophy (Ph.D.) in the accredited Educational Psychology program at the University of Alberta in Edmonton, AB. Her therapeutic approach focuses on using a variety of therapeutic modalities, including EMDR, CBT, mind-body therapies, and arts-based therapies, in a holistic, anti-oppressive, client-centered way to help clients achieve their therapeutic goals.

## Additional Clinical Staff that Support Training & Supervision

Sophie Yohani, R. Psych, PhD - UofA  
Martin Mrazik, R. Psych, PhD - UofA  
Noorfarah Merali, R. Psych, PhD - UofA  
William Whelton, R. Psych, PhD - UofA  
Jacqueline Pei, R. Psych, PhD - UofA  
Christina Rinaldi, R. Psych, PhD - UofA  
Dustin Marcinkevics, R. Psych, PhD – Millard Health  
Nicola Michaud, R. Psych, MEd - Cross Cancer Institute

Additional U of A Counselling Psychology Program faculty as appropriate  
Additional U of A School and Child Clinical Program faculty as appropriate

*Under certain circumstances, and on a case-by-case basis, the Site Coordinator may approve supplementation of the resident's regular training with that from a Master's level Registered Psychologists or non-Psychologist staff member. Such training experiences supplement regular supervision and do not replace supervision that would be otherwise provided by the supervisor.*

# EVALUATION

In the ECPRC, we strive to offer a high level of clinical supervision. We recognize clinical supervision as a competency that entails transparent and fair evaluation. As such, our evaluation process begins with the establishment of a supervision agreement at the outset of rotations. Each contract outlines the expectations and goals for training. Residents can expect to receive ongoing formative feedback related to their supervision contract.

In addition to the ongoing formative feedback, formal summative feedback is offered twice during the residency at the midpoint (sixth month) and end (twelfth month). This written summative evaluation was adopted and adapted from the American Psychological Association's Competency Benchmarks. These evaluations are conducted by their primary supervisor for each major and minor rotation, are collaboratively reviewed by the supervisor and resident, then sent to the DoT for final approval. It is expected by the end of the residency that residents will be rated on all items within the top two categories (a score of 3 or 4 on a 4-point scale).

The ECPRC also believes strongly in reciprocal feedback. As such, residents also complete written evaluations about their rotations and for each supervisor at the end of their rotations (timed to be at the midpoint and endpoint of the residency). Residents provide feedback on the quality of supervision, the time commitments involved in the rotation, the balance between direct and indirect hours, and other aspects of the rotation experience.

The DoT is responsible for communicating with the resident's home academic institution regarding the residents' progress. Written feedback is sent to the home institution at the midpoint and at the time of completion of the residency.

# APPLICATION PROCESS

## Requirements

A requirement of our consortium is that all incoming residents must have completed adequate prerequisite training prior to the residency. This includes completion of formal academic coursework at a degree-granting program in professional psychology (clinical, counselling, school) as well as completion of closely supervised experiential training in professional psychology skills conducted in a non-classroom setting. All applicants are required to demonstrate evidence of these prior to starting their residency. A letter from the student’s degree-granting program confirming readiness for residency (completion of Doctoral candidacy examinations) is required. Similarly, confirmation of completion of past experiential training (e.g., Doctoral Practicum) must be provided prior to starting the residency.

<b>Practicum Activity (AAPI)</b>	<b>Minimum Hours to Apply</b>
Intervention & Assessment (Direct)	300
Supervision	150
Total (Direct + Indirect)	600

CPA suggests a minimum of 600 practicum hours with 300 hours of direct client contact and 150 hours of supervision prior to residency. As this is a training year, we endeavour to support your development in novel areas. We also welcome applications from programs that are in the process of becoming CPA-Accredited.

## Application

Our application process follows that of APPIC and AAPI. We ask that you submit your application using APPI online: <https://www.appic.org/AAPI>.

For an APPIC application, you will need:

1. A cover letter
  - In this letter, please include the tracks you are interested in (please see Rotation Selection Process in the Overview of Tracks section).
2. Your Curriculum Vitae
3. A summary of your practicum hours

4. The APPIC Application for Psychology Residency
5. The APPIC Academic Program Verification of Residency Eligibility and Readiness
6. Autobiographical Essays
7. Graduate transcripts
8. Three letters of reference. We may contact your referees for further information.

Our application deadline is: **November 1, 2024**

For any inquiries, please contact our Director of Training:

Dr. Kyle Schalk, R.Psych.  
780-498-3321  
kyle.schalk@millardhealth.com

## Acceptance and Notification Procedures

We will contact you according to the APPIC notification deadlines.

Interviews are typically held virtually in mid to late December 2024 and early January 2025.

## Health and Criminal Reference Check

Prior to commencement of the placement, residents must provide proof of the following to the DoT and to their placement supervisors (when required by the site, please check with your site):

- A Vulnerable Sectors Criminal Records Check.
- Youth Intervention Checks are mandatory at YWCA Edmonton.

Some sites may also require:

- Vaccination records.
- Privacy training and confidentiality agreements.

## Diversity/Non-Discrimination

All consortium partners within the ECPRC are committed to employment equity. We value equity, diversity and inclusion in our workplaces. Qualified candidates from all ethnicities, races, genders,

sexual/gender identities, cultural backgrounds, abilities and beliefs are encouraged to apply. We are also committed to providing an inclusive and accessible workplace. Individuals who may have questions or require any accommodations are encouraged to contact the Director of Training so that appropriate accommodations may be put in place.

# POLICIES AND PROCEDURES

To protect both our clients and your continued academic and clinical development, residents are expected to abide by the following duties and responsibilities:

- Behaves in accordance with the ethical and professional standards and guidelines specified in the Canadian Psychological Association *Code of Ethics for Psychologists* as well as the standards specified by the College of Alberta Psychologists.
- Connects with supervisors at the immediate onset of conflict or concerns related to clinical care. This includes making good-faith efforts to implement and receive feedback from supervisors.
- Comply with all policies and procedures from both the ECPRC and the sites where the resident is providing clinical care.

We also expect that residents attend the following meetings:

- Resident orientation
- Resident meetings
- Didactics, including all seminars
- Programme-related team meetings
- Site-specific required meetings and activities

A copy of our Policies and Procedures Handbook, can be provided upon request. These documents include information about remediation, appeals, due process, and grievance guidelines. Each site will have additional policies and procedures to observe outside of the consortium mandates.