 **Royal Columbian Hospital**  
FRASER HEALTH

**Mental Health and Substance Use  
Wellness Centre**



Doctoral

# RESIDENCY

in Clinical Psychology

2024 – 2025



ACCREDITED BY THE CANADIAN PSYCHOLOGICAL ASSOCIATION

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## INTRODUCTION

Thank you for your interest in the Fraser Health Clinical Psychology Residency Program. We are thrilled to announce that we were recently awarded accreditation by the Canadian Psychological Association (CPA) for a seven-year term (2022/2023 – 2029/2030)!

**See:** <https://cpa.ca/accreditation/cpaaccreditedprograms/>

Our program is composed of 10 Core Faculty, who are committed to excellence in training of Clinical Psychology residents. Past residents have positively remarked on the diversity of training experiences and quality of supervision offered, as well as our focus on work-life balance. If these are qualities you are looking for in your residency experience, then the Fraser Health Clinical Psychology Residency Program may be right for you!

### Fraser Health

Fraser Health is one of two health authorities that serve Greater Vancouver, a vibrant, metropolitan area of 2.7 million\* people. Greater Vancouver is bordered by the Coast Mountains and the Pacific Ocean, which means you are only a 30-minute drive away from the beach, hiking, mountain biking or skiing. And if you prefer the arts, there is no shortage of museums, cultural centers and events to attend throughout the Greater Vancouver region.

Fraser Health is the largest of all the regional health authorities, serving 1.9 of the province's 5.1 million people\*. Some of the communities served by Fraser Health are the fastest growing in the province, and among the most culturally and linguistically diverse. These communities have been expanding at a rapid pace, and fuel the need to develop new academic and teaching activities such as a Residency in Clinical Psychology.

\*Province of BC: [www.bcstats.shinyapps.io/popApp](http://www.bcstats.shinyapps.io/popApp), July 2020.



## Psychologists in Fraser Health

Psychologists are a vital part of Fraser Health, contributing knowledge and skills to clinical services, professional training, administration, and research development in a range of healthcare settings. Fraser Health has a core faculty of 24 Registered Psychologists who make unique contributions to patient care in diverse settings, both north and south of the Fraser River. For example, Psychologists use psychometric approaches to provide differential diagnoses, guide treatment decisions, and make recommendations for patient disposition. Psychologists also take the lead in developing, implementing, and evaluating new treatment programs, such as evidence-based and cost-efficient group therapy protocols. Psychologists are asked to sit on committees that set the standards for clinical care across Fraser Health (e.g., the writing and establishment of clinical practice guidelines) and they provide consultation on patient care to clinicians from other fields (e.g., Psychiatry, Nursing, Social Work), through both informal conversations and in formal settings (e.g., individual or group consultation and didactic seminars). Fraser Health Psychologists are also involved in training and mentorship of student trainees. Many of our Psychologists supervise Clinical Psychology graduate students. Others provide lectures to undergraduate medical students, or supervise Psychiatry residents in their psychotherapy rotations.

## MISSION, PHILOSOPHY AND GOALS

Our **mission** is to train Clinical Psychology residents to provide culturally-sensitive, high-quality, evidence-based psychological services that enhance the mental health and well-being of the diverse population that comprises Fraser Health Authority.

While doing so, we endeavor to foster the following **values** in our residents:

1. Ethical Behaviour, Cultural Responsiveness & Respect for Diversity,
2. Lifelong Curiosity/Integration of Science into Practice (Scientist-Practitioner Mindset),
3. Meta-Competence & Development of One's Unique Professional Identity and
4. Integrity in Relationships – with patients, other health care professionals, the organization and the community at large.

Our residency program is grounded in the **scientist-practitioner philosophy** of training. We believe the term “scientist-practitioner” is not simply a job-title, but a mind-set and is fundamental to the development of clinical competency. Our program seeks to crystalize this philosophy by having residents build upon prior skills and knowledge through an experiential, developmental model of training that embeds the integration of academic knowledge and research skills within all tasks and activities of clinical training.

In considering our values in relation to our training philosophy, we have identified the following **goals** for success in our program:

1. Strong Foundations in Ethical, Legal Standards & Policy
2. Professionalism & Meta-Competence
3. Interpersonal & Communication Skills
4. Proficiency in Evidence-Based Assessment
5. Proficiency in Evidence-Based Intervention
6. Research Integration Skills
7. Supervision Skills
8. Sensitivity to Diversity Issues
9. Consultation & Interdisciplinary Skills

## **PROGRAM STRUCTURE**

The Fraser Health Doctoral Residency in Clinical Psychology offers two full-time positions which take place over 12 months. Each full-time resident will complete four (4) supervised rotations over the course of the year. A half-time residency, taking no more than 24 months to complete will be considered under special circumstances. The program provides residents with a planned sequence of training experiences and activities, offering exposure to a variety of problems and populations. To coordinate training, the Director of Clinical Training, Dr. Amanda LaMarre, supervising staff psychologists and the two residents meet in a monthly Residency Steering Committee meeting. The Director of Clinical Training is responsible for the integrity and quality of the training program.

All clinical supervisors are Registered Psychologists in good standing with the College of Psychologists of British Columbia. A minor amount of supervision may be provided by colleagues in other disciplines to meet a resident's needs, in a manner consistent with CPA and Association of Psychology Postdoctoral and Internship Centers (APPIC) standards.

According to American Psychological Association (APA) taxonomy (<https://www.apa.org/ed/graduate/specialize/understanding-taxonomy>), our residency program offers a Major Area of Study in Clinical Psychology, as well as an Emphasis in Clinical Health Psychology. An optional Experience in Clinical Neuropsychology is available for individuals with sufficient previous education and training.

Typically, each resident will devote four days per week to clinical rotations (Monday – Thursday). Rotations will be selected to allow development of broad skills in assessment and psychotherapy. Each rotation will contribute to the resident's overall training goals, as described in their application and specified in a training contract they develop with their supervisor at the beginning of each rotation. Further, these goals are reviewed at its mid-point, and evaluated at its conclusion. In each rotation, the ratio of individual supervision to client-specific hours will be at least 1:4. Residents

can expect to receive a minimum of four (4) supervision hours per week. Supervisors will assume clinical responsibility for clients seen by residents. Client contact or client-specific duties, e.g. writing reports or reviewing clinical records, will normally represent approximately one-third of the total time in each rotation. The total residency hours will be a minimum of 1600, at least 400 of which will reflect client-specific activities.

*Note: clinical services may be provided in-person and/or virtually. If provided virtually, residents are still expected to be on-site. Working from home may occur on a case-by-case basis.*

The fifth day each week (Friday) will be devoted to additional supervision, didactics, administrative work, or program development. Residents are expected to be on-site at Royal Columbian Hospital on Fridays. A wide range of didactic seminars are scheduled throughout the year specifically for the residents, as well as hospital-based rounds that are held either on a weekly or monthly basis (e.g., Royal Columbian Hospital Psychiatry Grand Rounds; BC Neuropsychiatry Grand Rounds).

## **RESIDENCY SITES AND CLINICAL ROTATIONS**

The Fraser Health Residency Program is based at Royal Columbian Hospital (RCH), located in New Westminster, British Columbia. RCH is located directly on the SkyTrain rapid-transit line (Sapperton Station), and is a 20-minute drive from Vancouver. RCH is also located along the Brunette-Fraser and Central Valley Greenways for individuals preferring to commute by bicycle. Showering facilities and bicycle lockers are located on-site for convenience.





SkyTrain above the Fraser River, connecting New Westminster to Surrey.

RCH is a major regional critical care site providing a range of services, including trauma medicine, orthopedic surgery, cardiac surgery, neurosurgery, plastic surgery, interventional cardiology and thoracic surgery. The hospital also houses outpatient and inpatient mental health services, located in the newly built Mental Health and Substance Use (MHSU) Wellness Centre.

For additional information about this facility, [click here](#).

To see a guided tour of the MHSU Wellness Centre, click the video below.



In addition to rotations offered at RCH, rotations are offered in the community in New Westminster, Burnaby and Surrey, and at Surrey Memorial Hospital (SMH). All sites are accessible via automobile or transit (SkyTrain or SkyTrain + bus or walk). For example, SMH is a 12-minute walk from the King George SkyTrain station in Surrey. A staff shuttle is available for those who either prefer or require transport. SMH also has bicycle parking facilities for those who prefer to ride.

[Learn more](#) about Translink, Metro Vancouver's transportation network.



Surrey Memorial Hospital

## **Outpatient Psychiatry, Royal Columbian Hospital**

**Supervisor:** [Dr. Heather Fulton, R. Psych](#)

Service: The Psychotherapy Training Clinic is located within the Outpatient Psychiatry Department at Royal Columbian Hospital. It works collaboratively with RCH Outpatient Psychiatry Department Psychiatrists as well as the New Westminster Mental Health and Tri-cities Mental Health Outpatient Teams.

Populations: Adult (19+) Outpatient (Mild-Moderate Mental Illness)



Opportunities: In this rotation, residents will have the opportunity to conduct cognitive behavioral therapy (CBT), in group and individual format, with patients in the Outpatient Psychiatry Department at RCH. Past residents have also gained training and experience in providing supervision of individual CBT specifically (pending practicum student availability). There may also be opportunities to co-facilitate and observe other specialty groups, e.g. Obsessive-Compulsive Disorder (OCD), or within the Reproductive Mental Health team. Specialized, inter-professional training and practice using Motivational Interviewing is also emphasized. Client-centered, trauma-informed, culturally-safe approaches are used. Additional opportunities exist for program evaluation and inter-professional consultation.

*\*NOTE: this rotation is not offered in the upcoming (2024-2025) residency year.*

## **Inpatient Psychiatry, Royal Columbian Hospital**

**Supervisors:** [Dr. Amy Burns, R. Psych](#) and [Dr. Amy Wong, R. Psych](#)

Service: The Inpatient Psychology Service works collaboratively with an interdisciplinary team to provide assessment and coordinate treatment planning for individuals who present with acute psychiatric disorders and severe emotional problems, for which psychiatric in-patient treatment intervention is necessary.

Populations: Adult Inpatient (Serious Mental Illness)

Opportunities: The rotation involves both assessment and intervention training experiences. With respect to assessment, the service provides comprehensive psychological evaluations to clarify diagnosis and inform the development of treatment goals. Assessments may include personality and cognitive evaluations. Treatment typically involves individual and group psychotherapy using cognitive behavioural therapy, dialectical behavioural therapy, and motivational interviewing techniques. Residents will gain experience working on an interdisciplinary team and will have numerous opportunities to consult with other health care professionals. There may also be opportunities for the resident to supervise a junior Clinical Psychology practicum student.

## **\*Consultation/Liaison Psychiatry, Royal Columbian Hospital**

**Supervisor:** [Dr. Dave Erickson, PhD, R. Psych](#)

Service: The Psychologists on the Consultation/Liaison Psychiatry Service work collaboratively with an interdisciplinary team to provide consultation, and treat acute inpatients with psychological difficulties in a general medical setting.

Populations: Adult Inpatient (General Medicine/Specialty Units)

Opportunities: Under supervision, the resident consults on and provides short- to medium-term intervention to inpatients from both general medicine units and specialty wards (e.g., Neurology; Orthopedic Surgery), as well as High Acuity/Intensive Care at Royal Columbian Hospital. Common reasons for consultation include depression, anxiety, adjustment to changes in health, eating disorders, grieving, suicidal ideation, behavioral changes, psychosis, cognitive impairment, substance abuse and decisional capacity. This rotation is primarily treatment-focused, though opportunities for psychodiagnostic assessment may occur. The resident will gain substantial knowledge in health psychology and in working with complex cases where there is overlap between medical and psychiatric illness. Team meetings with attending Psychiatrists, psychiatry residents, medical students, and nurses occur regularly, and residents are expected to attend these on rotation days.

**\*NOTE:** this rotation is mandatory for each resident.

## **Cardiac Services, Royal Columbian Hospital**

**Supervisor:** [Dr. Quincy Young](#)

Service: The Cardiac Psychology Service works collaboratively with an interdisciplinary team to provide consultation and treatment to patients enrolled in Cardiac Services at Royal Columbian Hospital.

Populations: Adult Inpatient (Cardiac Services).

Opportunities: The goal of this rotation is to provide specialized skills in assessment and intervention for psychological problems that occur in combination with cardiac problems, using a biopsychosocial framework. Residents will gain experience conducting brief assessments for psychological treatment planning purposes, in the context of conditions that commonly occur with heart conditions such as depression, anxiety, sleep and substance use disorders. There will be a focus on treatment planning for psychological disorders, and for typical factors inhibiting the adoption of healthy lifestyle behaviors.

Brief individual therapy will be a central feature of the rotation, primarily in the outpatient setting, using cognitive-behavioral therapy, motivational enhancement therapy and mindfulness-based therapies. Previous experience with cardiac populations is not essential, but some experience with health psychology (e.g., adjustment to diagnosis, lifestyle change, living with chronic illness) is helpful.

## Early Psychosis Intervention (EPI) Program, Surrey Gateway Clinic

Supervisor: [Dr. Katy Harper, R. Psych](#)

Service: The Early Psychosis Intervention (EPI) Program is a team-based, specialized health care service that provides rapid assessment and (where indicated) treatment for individuals experiencing their first psychotic episode. Most clients receive a range of interventions, including medication optimization/case management, psycho-education and stress management groups, and regular family involvement. Clients and their family members are enrolled for two years in the program.

Populations: Adult (18-30) with moderate to severe mental health issues (e.g., psychosis; substance abuse).

Opportunities: Residents will have the opportunity to conduct psychological assessments (primarily differential diagnosis of acute psychiatric illness versus unhelpful personality styles) and provide individual therapy to select clients (e.g., Cognitive-Behavioural Therapy (CBT) for Psychosis, or CBT for comorbid anxiety or depression). Residents will work on an interdisciplinary team, provide consultation to other team members and participate in case conferences. Other opportunities may include co-leading psycho-education group(s) and observing intake assessments with the Intake Clinician and Psychiatrist.

## \*Neuropsychology Service, Royal Columbian Hospital

Supervisors: [Dr. Amanda LaMarre, R. Psych](#) and [Dr. Tracy Lindberg, R. Psych](#)

Service: The RCH Neuropsychology Service provides neuropsychological assessment services for Mental Health and Substance Use Service patients from across the Fraser Health region.

Populations: The program serves adult and older adult inpatients and outpatients that present with a variety of mental health and/or medical problems (e.g., major depressive disorder, anxiety disorders, schizophrenia, cardiovascular problems, traumatic brain injury, mild cognitive impairment, or dementia).

Opportunities: Residents will have the opportunity to conduct comprehensive neuropsychological evaluations, provide feedback to patients and family members, and consult regularly with Psychiatrists. Typical evaluations include chart reviews, patient and collateral interviews, self-report questionnaires, and comprehensive neuropsychological testing. Residents may have an opportunity to supervise a junior Neuropsychology practicum student on several cases.

**\*NOTE:** this rotation is only offered to residents who already possess a strong foundation in Neuropsychological assessment.

## **Surrey Mental Health – Outpatient Psychiatry, Surrey Gateway Clinic**

**Supervisor:** [Dr. Humaira Moshin, R. Psych](#)

**Service:** Adult Community Support Services (ACSS) is a community based mental health and substance use service. ACSS team members work together with the person experiencing mental illness and substance use concerns to achieve mental wellness and recovery goals.

**Population:** Adults with Moderate-to-Serious Mental Illness (e.g., severe depression and anxiety, obsessive-compulsive disorder, schizophrenia, bipolar disorder, substance use issues).

**Opportunities:** This rotation involves both individual and group treatment. Residents will have the opportunity to work with referrals from the Surrey Gateway Clinic team, and consult with team members as needed. A typical course of treatment for individual clients includes 12-16 sessions, using cognitive-behavioural approaches. There may also be opportunities for assessment to clarify diagnoses and inform treatment. Residents will also attend the weekly Dialectical Behaviour Therapy (DBT) Consultation Team meeting and co-facilitate a weekly 2-hour DBT therapy group. There will also be the opportunity to co-facilitate a CBT for anxiety group. This clinic is located in North Surrey, BC, in an office tower next to the Gateway SkyTrain station.

## **Timber Creek Tertiary Mental Health Program, Surrey Memorial Hospital**

**Supervisor:** [Dr. Glenn Haley, R. Psych](#)

**Service:** Timber Creek Tertiary Mental Health Program serves patients who need more specialized service than can be provided by general hospital psychiatry programs.

**Populations:** Adult Inpatient (Serious Mental Illness)

**Opportunities:** The resident will provide assessment and treatment services on three units. Two are short to medium stay, while the other is an intensive care unit for acute psychosis. The resident will conduct psychodiagnostic assessment for major mental disorders using structured interviews and personality assessment measures. They will also have the opportunity to assess for neurocognitive deficits in some patients; as such, this rotation may appeal to those with a background in neuropsychology. Therapy involves cognitive therapy for psychosis, tailored to inpatients. In many cases, the goal is not to eliminate symptoms, but to help the patient learn how to manage living with psychosis. There may also be the opportunity to run group therapies based on CBT, ACT and Metacognition models. Residents will have ample opportunity to interact with and provide consultation with interdisciplinary staff (e.g., patient rounds; behaviour management planning).

## **B Well Chronic Disease Prevention Behavioural Medicine Team, Brentwood-Hastings Health and Wellness Services**

**Supervisor:** [Dr. Sandra Thompson, R. Psych](#)

**Service:** The B Well Chronic Disease Prevention Behavioural Medicine Team (a primary care service) supports patients in making sustainable changes to their lifestyle and behaviours. Health coaches, with the supervision of a Registered Psychologist, provide individual coaching tailored to patient needs as well as group psychoeducation.

**Populations:** Adult patients who are either at risk of developing chronic disease (e.g., obesity, diabetes, hypertension, cardiovascular disease, high cholesterol), or who are struggling to manage the early stages of disease.

**Opportunities:** B Well is an evidence-based, cognitive behavioural intervention focused on helping patients make small, manageable, and self-selected health behavior changes tailored to their unique needs and challenges. This approach is consistent with the new Canadian Medical Association guidelines, which advocate patient-centered changes instead of the traditional prescriptive weight, diet and activity goals. Residents can be involved in patient consultations, intra-Primary Care Network team consultation, brief assessment and intervention with patients, delivery of monthly psychoeducation to patients in the Service (i.e., pain, motivation, activity), individual health coaching for patients with more complex presentations, provide short-term intervention for specific mental health concerns to patients within the B Well Service, health coach supervision and support, providing education and training to health coaches, and program evaluation.

## **New Westminster Mental Health – Outpatient Psychiatry**

**Supervisor:** [Dr. Sarah Liu, R. Psych](#)

**Service:** The New West Mental Health and Substance Use Centre is a self-referral outpatient clinic that provides support for adults experiencing mental health difficulties in the community.

**Populations:** Adults with psychiatric illnesses, including: personality disorders, mood and anxiety disorders, psychosis, and/or obsessive-compulsive disorder (OCD).

**Opportunities:** Principal duties include co-leading at least one group (e.g., CBT for Anxiety or Depression; CBT for OCD; Dialectical Behaviour Therapy (DBT) for treatment of Borderline Personality Disorder), as well as individual therapy using evidence-based approaches (such as CBT, DBT, Acceptance and Commitment Therapy, Motivational Interviewing, CBT for psychosis). There may also be opportunities for group program development of specialty groups (such as program evaluation, or development of other specialty groups based on resident interest). In

addition, psycho-diagnostic assessment opportunities may be available, to provide clarifications for diagnosis and recommendations for treatment. This rotation is located in Uptown New Westminster and offers free onsite parking to all staff.

Rotation	Location	Assessment	Intervention	Format
Outpatient Psychiatry	Royal Columbian Hospital		✓	Hybrid
Inpatient Psychiatry	Royal Columbian Hospital	✓	✓	In-Person
Consultation/Liaison Psychiatry	Royal Columbian Hospital	✓	✓	In-Person
Cardiac Services	Royal Columbian Hospital	✓	✓	Virtual
Early Psychosis Initiative	Surrey Gateway Clinic	✓	✓	Hybrid
Neuropsychology Service	Royal Columbian Hospital	✓		In-Person
Surrey Mental Health	Surrey Gateway Clinic	✓	✓	Hybrid
Timber Creek Tertiary Mental Health	Surrey Memorial Hospital	✓	✓	In-Person
B Well Chronic Disease Prevention Behavioural Medicine Team	Brentwood-Hastings Health and Wellness Services		✓	Hybrid
New West Mental Health	New Westminster Mental Health and Substance Use Services	✓	✓	Hybrid

### Sample Training Program

	Monday	Tuesday	Wednesday	Thursday	Friday
September – February	Surrey Mental Health	Consult-Liaison Psychiatry	Surrey Mental Health	Consult-Liaison Psychiatry	RCH (Didactics, Program Evaluation, Research)
March – August	Inpatient Psychiatry	Inpatient Psychiatry	Cardiac Psychiatry	Cardiac Psychiatry	RCH (Didactics, Program Evaluation, Research)

\*Selection of specific rotations will occur in consultation with the Director of Training and relevant supervisors, in consideration of resident’s training needs, interests, and availability of rotations. Rotation planning typically begins in March and is finalized by the end of June, prior to the beginning of residency in September. Every effort will be made to place residents in rotations of specified interest.

## **RESIDENT SEMINARS AND OTHER DIDACTICS**

Residents are required to attend our didactic seminar series which take place on Fridays. Previous topics have included:

- Ethics and Legislation
- Preparation for the EPPP and College Registration
- Cognitive Behavioural Therapy for Psychosis
- Motivational Interviewing
- Supervision of Cognitive Behavioural Therapy
- Cardiac Psychology

A number of our seminars are shared with residents in the Vancouver Coastal Health Psychology Residency Program, thereby increasing the diversity of perspectives during discussion. In addition to our formal seminar series, Residents engage in the 11-Hour San'yas Anti-Racism Indigenous Cultural Safety Program and are encouraged to attend a number of additional seminars and hospital rounds throughout the year, such as the RCH Psychiatry Grand Rounds and the BC Neuropsychiatry Rounds when the topic is relevant to their training goals.

## **PROGRAM DEVELOPMENT AND EVALUATION PROJECT**

Our residents work together to undertake a program development and evaluation project to be completed over the course of the residency year. The purpose of this project is to learn critical skills in this type of research while also making a positive contribution to a hospital service or program. At the end of the year, residents create a written document outlining their findings and present this information to the Psychology Practice Council and other relevant hospital partners (e.g., Program Managers; Physician Leads, etc.).

## **SUPERVISION AND EVALUATION**

### **Supervision**

An overall learning plan will be developed collaboratively with the resident and the Director of Training at the beginning of the training year. The plan will outline the resident's goals for the year and how the goals will be met. The current strengths and limitations of the resident's background, along with the career goals of the resident will be considered when devising the learning plan. The Director will review and provide the resident with information regarding due process, should issues arise during the residency.

In addition to the overall learning plan, an individual learning contract is developed between the resident and their primary supervisor for each rotation, outlining the specific details of the

rotation in regards to objectives, experiences (e.g., assessment and/or intervention), professional expectations and supervision. Consistent with CPA accreditation criteria, residents will receive a minimum of four hours per week in direct, individual supervision. Opportunities for stepped supervision with practicum students or psychiatry residents may also be available depending on the rotation.

## Evaluation

Supervisors will complete a mid-rotation and end-of-rotation formal evaluation for each resident. The resident will meet with their supervisor to review their progress and determine if their experience is in keeping with their overall goals for the rotation and residency. The evaluations are competency-based, and include assessment of: ethics, professionalism, general clinical skills (i.e., interviewing and engagement with client), assessment and psychotherapeutic skills, research integration, diversity awareness, involvement in supervision, and interdisciplinary consultation and liaison. In addition, the supervisor will comment on the individual's strengths and areas for further development. If needed, a remediation plan will be developed between the supervisor, resident and Director of Clinical Training, such that remedies can be completed by the end of the training year. Outside of formal evaluation periods, the residents are invited to meet as needed with the Director of Training and/or their supervisors to discuss their growth as a clinician, overall progress within the program, and expectations for the residency. At the end of each rotation, residents will be asked to formally evaluate their experience with their supervisor.

If problems arise in the supervisory relationship at any point during the rotation, these issues will be addressed first with the supervisor and the Director of Training, or if needed, with the Psychology Practice Leader or the Advocate. The Advocate will be a staff psychologist who is not currently sponsoring a residency rotation for that year.

Successful completion of the residency requires the resident to complete a minimum of 1600 hours of supervised training and successfully pass all rotations. Upon completion of the training program, the resident's skill set must be considered equivalent to an entry-level psychologist.



Royal Columbian Hospital



## **DURATION, SALARY AND BENEFITS**

The residency is 12 months in duration, beginning the day after Labour Day in September and continuing until the end of August, the following year. The current salary for a full-time residency position for the training year is \$40,250.

Benefits include:

- 15 days paid Vacation
- 10 days paid Sick Leave
- 3 days paid Personal Leave
- 5 days paid Professional Development (may be used for conference attendance; dissertation requirements at home university, etc.)
- \$1500 travel/education fund
- BC Medical (if from out of province, begins three months following date of hire) + Extended Health Benefits, Dental Insurance and Group Life Insurance
- Note: residents contribute to employment insurance payments while on residency

## **CANDIDATE ELIGIBILITY, APPLICATION AND SELECTION PROCEDURES**

### **Eligibility**

We are pleased to accept applications from doctoral (PhD or PsyD) students enrolled in CPA or APA accredited Clinical Psychology programs. Consistent with APPIC guidelines, applicants will be in the final stages of their doctoral program, i.e. have completed all degree requirements except for the dissertation, have defended their dissertation proposal, and have received approval from their program's Director of Training.

Applicants with at least 600 hours of supervised practicum training, with at least 300 direct patient contact hours directly relevant to one or more of our training rotations will be given preference in the selection process. Due to disruptions in training due to the COVID-19 pandemic, we will consider telepsychology (telephone contact or virtual video-conference) interaction to be equivalent to face-to-face direct patient/client contact. Applicants should be fluent in English. Fluency in other languages is an important asset. We prefer applicants for a full-time one-year residency, but will consider applications from those who wish to pursue a half-time residency over two years.

## Applications

Interested applicants are encouraged to contact Dr. Amanda LaMarre, Director of Training by email at: [amanda.lamarre@fraserhealth.ca](mailto:amanda.lamarre@fraserhealth.ca). Applications must be received by midnight on November 1, 2023. Late or incomplete applications will not be considered. All application material must be submitted via the APPIC online system.

A complete residency application includes the following:

1. APPIC online Application for Psychology Residency (AAPI) Form
2. Curriculum vitae
3. Three letters of reference, one of which is the endorsement form from the Director of Clinical Training for your program and two must be from supervisors of your clinical work
4. Graduate school transcripts
5. Letter of interest explaining how our residency program will fit with your career goals, and the particular rotations that would help further those goals

Preference will be given to those applicants who have previous experience with objective cognitive and psychodiagnostic assessment methods, cognitive behavioural therapy and motivational interviewing, and experience treating mood and anxiety disorders. Furthermore, we are interested in applicants who have diversity and breadth in their previous training experiences (e.g., distinct populations and training sites), particularly those who have previous experience working in a hospital setting and are interested in training/careers in public healthcare with complex patients.

Diversity is a major feature of the 1.9 million residents of Fraser Health, and will be prominent in the residency program. We encourage applications from people with diverse backgrounds. Fraser Health Authority endeavors to provide an accessible workplace for all trainees, staff and clients with disabilities. Applicants who have specific questions about access and accommodations available at our setting are encouraged to contact the Director of Training early in the application process, in order that their concerns or needs may be fully addressed.

Our program adheres to Canadian immigration policy requiring eligible Canadian citizens and landed immigrant applicants be offered available residency positions before offering a position to a non-Canadian citizen. That said, foreign applicants are eligible to apply. Please contact us in advance to discuss.

***\*Please note: vaccination against COVID-19 is a mandatory requirement of employment at Fraser Health Authority.***

## **Interviews**

In compliance with recommendations from both CPA and the Canadian Council of Professional Psychology Programs (CCPPP), interviews will exclusively be held via videoconference, even for local applicants.

Friday, December 1, 2023 – Universal NOTIFICATION Date. All applicants applying at Canadian residency sites will be informed of their interview status on this day, but no interviews booked until the following Monday.

Monday, December 4, 2023 – Universal RESPONSE/BOOKING date. This is the date applicants can begin contacting sites who have offered them interviews. Specifically, that means students can start booking their interviews with their residency sites at 11:00 am EST.

In accordance with CCPPP scheduling, interviews will take place in the first two weeks of January 2024.

The program agrees to abide by the APPIC policy that no person at the training facility will solicit, accept, or use any ranking-related information from any applicant. All ranking and offers will be in accordance with APPIC Match policies.

## **INFORMATION ON ACCREDITATION**

Our program recently underwent an initial accreditation site visit in December 2022 and was awarded accreditation in May 2023. We received seven years accreditation, with our next site visit scheduled for 2029.

Further information on accreditation by the Canadian Psychological Association is available by contacting the following office:

Stewart Madon, PhD, C. Psych, Registrar of Accreditation

Canadian Psychological Association

141 Laurier Avenue West, Suite 702

Ottawa, ON. K1P 5J3

Phone: 613-237-2144 (extension 333) or 1-888-472-0657

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

Website: <http://www.cpa.ca/accreditation>

## CONTACT INFORMATION

### Supervising Registered Psychologists



**Amy Burns, PhD, R. Psych.** Full-time Psychologist at Inpatient Psychiatry, Royal Columbian Hospital. Clinical Instructor, Department of Psychiatry, University of British Columbia.

Email: [amy.burns@fraserhealth.ca](mailto:amy.burns@fraserhealth.ca). PhD, University of British Columbia, 2016. Interests: CBT, DBT, MI, cognitive health, early psychosis.



**Dave Erickson, PhD, R. Psych. Psychology Practice Leader.** 0.5 FTE at Fraser North Early Psychosis Intervention Program, and 0.5 FTE Psychology Practice Leader, Royal Columbian Hospital. Clinical Associate Professor of Psychiatry and Adjunct Instructor, Department of Psychology, University of British Columbia.

Email: [david.erickson@fraserhealth.ca](mailto:david.erickson@fraserhealth.ca). PhD, University of British Columbia, 1994; Post-doctoral Fellow at Institute for Mental Health Research, University of Ottawa, 1996. Interests: early psychosis; refractory psychosis; CBT; implementation and dissemination of psychotherapy.



**Heather Fulton, PhD, R. Psych.** Full-time psychologist at the UBC Faculty of Medicine Psychiatry Residency Psychotherapy Training Program, based at Royal Columbian Hospital. Adjunct Instructor, Department of Psychology and Clinical Instructor, Department of Psychiatry, University of British Columbia.

Email: [heather.fulton@fraserhealth.ca](mailto:heather.fulton@fraserhealth.ca). PhD, Dalhousie University, 2012. Interests: CBT, MI, individual and group psychotherapy; concurrent disorders, substance use, program development and evaluation; inter-professional education and knowledge translation



**Glenn Haley, PhD, R. Psych.** Full-time Psychologist at Timber Creek Mental Health Program, Surrey Memorial Hospital.

Email: [glenn.haley@fraserhealth.ca](mailto:glenn.haley@fraserhealth.ca). PhD, Simon Fraser University, 1989. Interests: Structured interviewing for DSM systems, adolescent depression, cognitive functioning in schizophrenia and psychotic disorders, development of short interview scales for psychosis, nursing rating scales, group therapies for schizophrenia, psychodynamic approaches in the treatment of psychosis, and assessment methods for adult Attention-Deficit Hyperactivity Disorder (ADHD).



**Katy Harper, PhD, R. Psych.** 0.6 FTE Early Psychosis Program, Surrey Gateway Clinic. Email: [katy.harper@fraserhealth.ca](mailto:katy.harper@fraserhealth.ca). PhD, University of North Carolina at Chapel Hill, 2013. Interests: Early intervention for psychosis, CBT for psychosis, CBT-oriented treatments for mood and anxiety disorders, ACT, MI, supervision, training and implementation/ dissemination of psychotherapies.



**Amanda LaMarre, PhD, R. Psych., ABPP-CN.** 0.2 FTE Director of Clinical Training and 0.4 FTE in Neuropsychology Services, Royal Columbian Hospital. Clinical Instructor, Department of Psychiatry, University of British Columbia.

Email: [amanda.lamarre@fraserhealth.ca](mailto:amanda.lamarre@fraserhealth.ca); PhD, University of British Columbia, 2010. Post-doctoral fellowship in Clinical Neuropsychology, University of California, San Francisco – Department of Neurology, 2012. Interests: geriatric neuropsychology, atypical neurodegenerative disease syndromes.



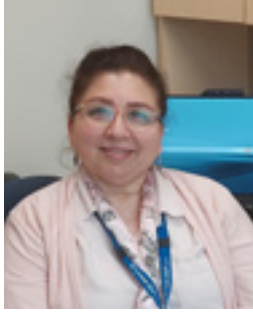
**Tracy Lindberg, PhD, R. Psych.** 0.48 FTE in Neuropsychology Services, Royal Columbian Hospital.

Email: [tracy.lindberg@fraserhealth.ca](mailto:tracy.lindberg@fraserhealth.ca). PhD, University of British Columbia, 2005. Interests: cognitive functioning associated with trauma, aging, and mental illness; psychological aspects of rehabilitation and coping with chronic conditions; assessment and treatment of mental distress and behavioural disruption in adults, adolescents, and children; enhancement of positive functioning in individuals and families.



**Sarah Liu, PhD, R. Psych.** 0.5 FTE at New West Mental Health Centre.

Email: [sarah.liu@fraserhealth.ca](mailto:sarah.liu@fraserhealth.ca). PhD, Concordia University, 2020. Interests: CBT for psychosis, DBT, psycho-diagnostic assessment of personality disorders, treatment of mood and anxiety disorders, MI strategies, ACT, interdisciplinary consultations.



**Humaira Mohsin, PhD, R. Psych.** 0.5 FTE at Surrey MHSU, Surrey Gateway Clinic. Email: [humaira.moshin@fraserhealth.ca](mailto:humaira.moshin@fraserhealth.ca). PhD, University of the Punjab. Interests: Interests: CBT, DBT, MI, CPT mostly for people with Depression, Anxiety, Personality Disorders and PTSD.



**Sandra Thompson, PhD, R. Psych.** 0.6 FTE in Burnaby Primary Care Network, B-Well Behavioral Medicine Team. Email: [sandra.thompson@fraserhealth.ca](mailto:sandra.thompson@fraserhealth.ca); PhD, University of Manitoba, 2009. Assistant Professor/Consulting Psychologist University of Manitoba Clinical Health Psychology 2010-2017. Interests: health psychology, behavioural medicine, integrated primary care, mental health and wellbeing, mindfulness.



**Amy Wong, PsyD, R. Psych.** 0.5 FTE at Inpatient Psychiatry, Royal Columbian Hospital. Email: [amy.wong@fraserhealth.ca](mailto:amy.wong@fraserhealth.ca); PsyD, Pepperdine University, 2013. Interests: Existential, Psychodynamic, Humanistic, & EMDR Therapies.



**Quincy-Robyn Young, PhD, R. Psych.** Contracted (external) supervisor to the RCH Cardiac Program. Currently in private practice at [Changeways Clinic](#), providing psychological assessment and treatment for adults for depression, anxiety and health adjustment/management. Formerly, staff psychologist in the Heart Centre at St. Paul's hospital for 20 years. Email: [dr.quincy.young@gmail.com](mailto:dr.quincy.young@gmail.com). PhD, University of Montana, 1998. Interests: development of screening procedures for mental health issues in a cardiac population; psychological aspects of rehabilitation and coping with chronic health conditions; and the interplay between mental and physical health.

Doctoral **Residency** in Clinical Psychology

2024 – 2025

## FOR MORE INFORMATION

For further information regarding applications and the Psychology Residency Program, please contact:

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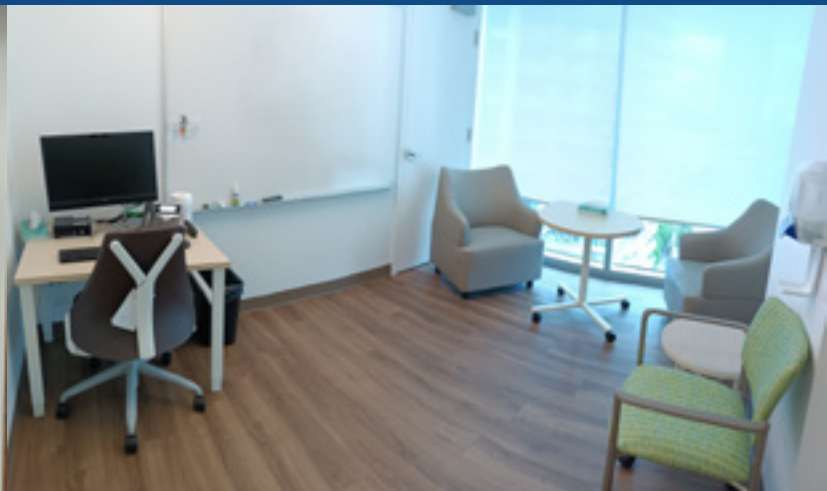
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The Residency Training Committee is composed of two resident representatives and the following psychologists:

Dr. Amy Burns, R. Psych  
Dr. Dave Erickson, R. Psych  
Dr. Heather Fulton, R. Psych  
Dr. Glenn Haley, R. Psych  
Dr. Katy Harper, R. Psych  
Dr. Amanda LaMarre, R. Psych  
Dr. Tracy Lindberg, R. Psych  
Dr. Sarah Liu, R. Psych  
Dr. Humaira Mohsin, R. Psych  
Dr. Sandra Thompson, R. Psych  
Dr. Jan van der Tempel, R. Psych

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