



Doctoral

RESIDENCY

in Clinical Psychology

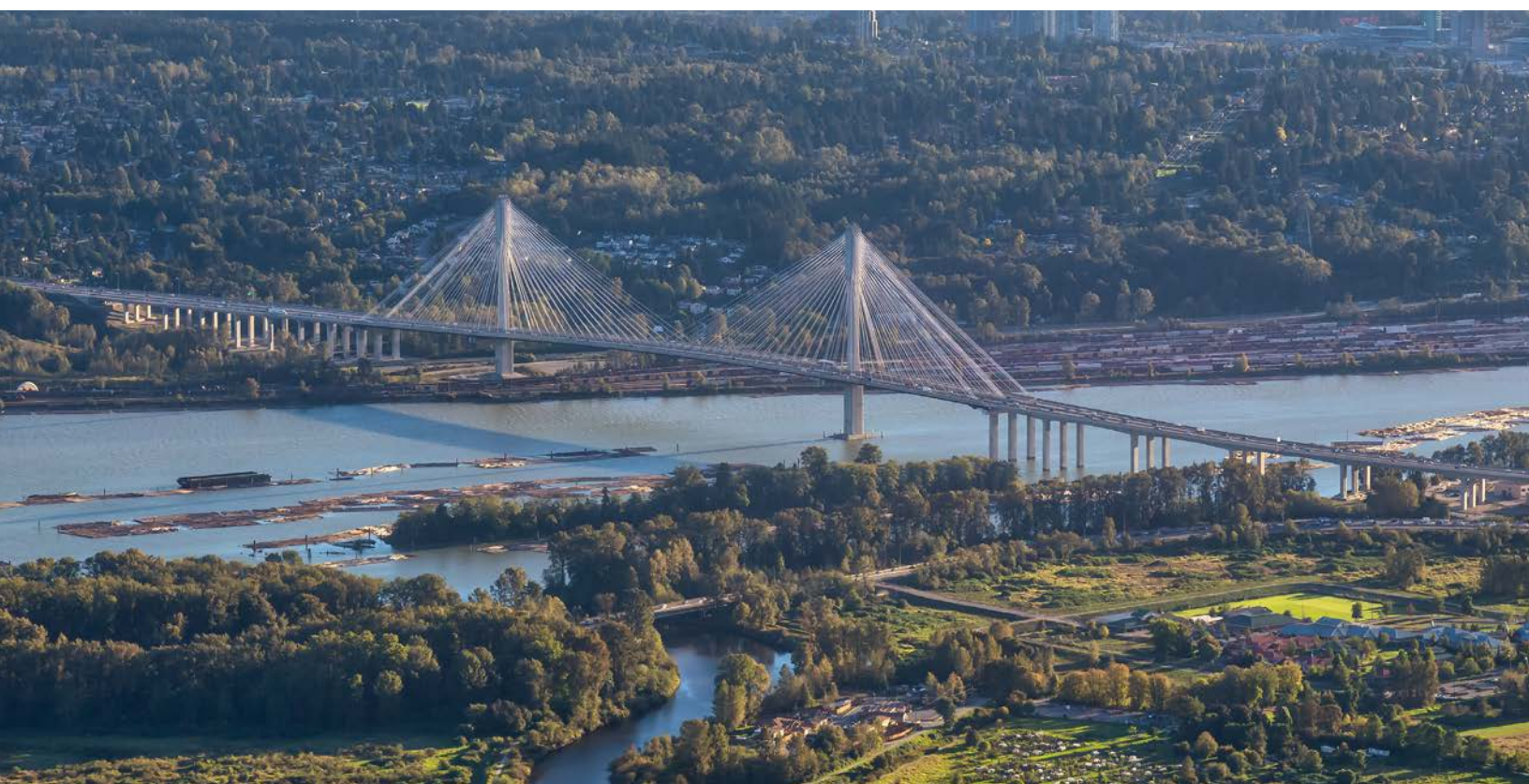
2027 – 2028



ACCREDITED BY THE CANADIAN PSYCHOLOGICAL ASSOCIATION

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INTRODUCTION

Thank you for your interest in the Fraser Health Clinical Psychology Residency Program accredited by the Canadian Psychological Association.

Our program is composed of 15 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!

Land Acknowledgement

Fraser Health provides care on the traditional, ancestral and unceded lands of the Coast Salish and Nlaka'pamux Nations and is home to 32 First Nations within the Fraser Salish region. Fraser Health is dedicated to serving all Indigenous people, and honours the unique cultures of the First Nations, Métis and Inuit living within the Fraser Salish region.

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. 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 regional health authority in the province of British Columbia, serving over two 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.



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 health care settings. Fraser Health has 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 responsive, 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. 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 Training, Dr. Amy Burns, supervises staff psychologists and the two residents, who meet in a monthly Residency Steering Committee meeting. The Director of Training is responsible for the integrity and quality of the training program.

All clinical supervisors are Licensed Psychologists in good standing with the College of Health and Care Professionals of BC. 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 contributes to the resident's overall training objectives, as outlined in their application and formalized through a training contract developed in collaboration with the supervisor for that 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. At this time, Fraser Health does not offer remote work options.

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. RCH is located directly on the SkyTrain rapid-transit line (Sapperton Station), and is a 20-minute drive from Vancouver. For individuals preferring to commute by bicycle, RCH is also located along the Brunette-Fraser and Central Valley Greenways. Shower 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 Mental Health and Substance Use (MHSU) Wellness Centre.

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. Fraser Health offers a Transit Incentive Program that provides employees with discounted rates on TransLink monthly passes or stored value loaded onto their Compass Cards. 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.



Surrey Memorial Hospital

Inpatient Psychiatry, Royal Columbian Hospital

Supervisors: [Dr. Amy Burns](#)

[Dr. Amy Wong](#)

[Dr. Jan van der Tempel](#)

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

Supervisors: [Dr. Gabriel Brooks](#)

[Dr. Xiaolei Deng](#)

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.

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 after their discharge from the inpatient unit at Royal Columbian Hospital.

Populations: Adult Outpatient (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

Supervisors: [Dr. Katy Harper](#)

[Dr. Sarah Liu](#)

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

Populations: Adult (18-30) who have recently developed psychosis.

Opportunities: Residents will have the opportunity to conduct psychological assessments (e.g., diagnostic, personality assessment, & cognitive assessment) 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 participation in EPI groups (e.g., client education group).

***Neuropsychology Service, Royal Columbian Hospital**

Supervisors: [Dr. Tracy Lindberg](#)

[Dr. Carmelina Barone](#)

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 Centre – Urgent Care Response Centre (UCRC)

Supervisor: [Dr. Humaira Mohsin](#)

Service: Urgent Care Response Centre (UCRC) serves as a centralized access point for adults aged 19 years and older who are experiencing urgent mental health and substance use concerns. The program provides timely assessment and intervention for individuals who voluntarily seek care and require urgent support but do not require hospitalization.

Population: The program serves adults experiencing moderate to severe mental health disorders, including major depressive disorder, anxiety disorders, obsessive-compulsive disorder (OCD), schizophrenia and other psychotic disorders, bipolar disorder, substance use disorders, and personality disorders including Borderline Personality Disorder (BPD).

Opportunities: This rotation provides opportunities to develop skills in the delivery of standard Dialectical Behaviour Therapy (DBT), including both individual and group treatment modalities for clients diagnosed with severe BPD. Key responsibilities and learning experiences include:

1. Conducting pre-treatment and post-treatment assessments
2. Providing weekly individual DBT sessions
3. Facilitating DBT skills training groups
4. Participating in case formulation and treatment planning
5. Collaborating with interdisciplinary mental health teams
6. Attending weekly DBT consultation team meetings.

Timber Creek Tertiary Mental Health Program, Surrey Memorial Hospital

Supervisor: [Dr. Glenn Haley](#)

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](#)

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 Licensed 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 Outpatient Mental Health & Substance Use Services

Supervisor: [Dr. Dave Erickson](#)

Service: Outpatient Mental Health and Substance Use Centre is a self-referral outpatient Clinic.

Populations: Adults with mental health problems such as mood and anxiety disorders, psychosis, and/or personality disorders.

Opportunities: The primary duty will be to provide cognitive-behavioural therapy to clients with a variety of mental health problems (anxiety, depression, and psychosis). Assessment opportunities will also be part of the rotation, to provide clarifications for diagnosis and recommendations for treatment. There may also be a program evaluation project, based on resident interest.

Burnaby Outpatient Mental Health & Substance Use Services

Supervisor: [Dr. Kirthana Ganesh](#)

Service: Outpatient Mental Health and Substance Use is an outpatient community mental health clinic that supports adults aged 19 and older who experience a wide range of mental health concerns. Patients are referred to psychology services to develop insight, strengthen coping skills, and support their recovery and overall well-being.

Populations: Adults with mental health concerns such as mood and anxiety disorders, personality disorders, somatic symptom and related disorders, and/or trauma and stressor-related disorders.

Opportunities: Provision of individual psychotherapy for adults with complex, comorbid diagnoses, using CBT, ACT, DBT, and MI principles. There will be opportunity for residents to build and refine skills in creating and implementing treatment plans along with learning how to provide client centered, trauma-informed, and culturally-sensitive care for a diverse population of clients. Supervision will be process-based.

Outpatient Psychiatry, Royal Columbian Hospital

Supervisors: [Dr. Heather Fulton](#)

[Dr. Sheena Miao](#)

Service: The Psychotherapy Training Clinic is located within the Outpatient Psychiatry Department at Royal Columbian Hospital. It works collaboratively with RCH Outpatient Psychiatry Department as well as the Fraser Health region Group Therapy Services Team.

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 (2027-2028) residency year.

Rotations at a Glance

Rotation	Location	Assessment	Intervention	Format
Inpatient Psychiatry	Royal Columbian Hospital	✓	✓	In-Person
Consultation/Liaison Psychiatry	Royal Columbian Hospital		✓	In-Person
Cardiac Services	Royal Columbian Hospital	✓	✓	Virtual
Early Psychosis Program	Surrey Gateway Clinic	✓	✓	Hybrid
Neuropsychology Service	Royal Columbian Hospital	✓		In-Person
Urgent Care Response Centre	Surrey Gateway Clinic	✓	✓	Hybrid
Timber Creek Tertiary Mental Health Services	Surrey Memorial Hospital	✓	✓	In-Person
B Well Chronic Disease Prevention Behavioural Medicine Team	Brentwood-Hastings Health and Wellness Services		✓	Hybrid
Outpatient Mental Health & Substance Use Services	New Westminster OMHSU Centre	✓	✓	In-Person
Outpatient Mental Health & Substance Use Services	Burnaby OMHSU Centre	✓	✓	In-Person
Outpatient Psychiatry	Royal Columbian Hospital		✓	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 Indigenous Cultural Safety and Anti-Racism training, 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 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.

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 \$56,000.

Benefits include:

- 15 days paid Vacation
- 10 days paid Sick Leave
- 3 days paid Personal Leave (may be used for marriage, household emergency, child care, or bereavement, etc.)
- 5 days paid Professional Development (may be used for conference attendance, dissertation requirements at home university, etc.)
- \$2000 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. completed all requisite coursework, defended their doctoral thesis proposal, and have received approval from their program's Director of Clinical 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.

Applications

Interested applicants are encouraged to contact Dr. Amy Burns, Director of Training by email at: amy.burns@fraserhealth.ca. Applications must be received by midnight on November 2, 2026.

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
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.

As the largest regional health authority in British Columbia, Fraser Health is deeply committed to diversity, which is a cornerstone of 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 be held exclusively via video conference, even for local applicants.

Friday, December 4, 2026 – Universal NOTIFICATION / BOOKING Date. All applicants applying at

Canadian residency sites will be informed of their interview status on this day. We will be using NMS Scheduling system and applicants can start booking their interviews starting at 8:00 am PST.

In accordance with CCPPP scheduling, interviews will take place in the first two weeks of January 2027.

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.

Public Disclosure Table

Academic Year	2023-2024	2024-2025	2025-2026
Positions	2	2	2
Applications	20	28	32
Interviewed	12	14	16
Ranked	8	13	13
Matched	2	2	2
Of Those Who Matched			
From Outside of Province	1	1	2
From Outside of Canada	0	0	1
Mean Hours on APPI			
Assessment & Intervention	706	793	723
Supervision	491	385	346
Support/Indirect	978	953	899
Mean Total Hours	2175	2077	1968

CONTACT INFORMATION

Supervising Licensed Psychologists



Dr. Carmelina Barone

0.8 FTE in Neuropsychology Services, Royal Columbian Hospital.
Provisional License

Degree: PhD, Simon Fraser University, 2025.

Email: carmelina.barone@fraserhealth.ca

Interests: Cognitive functioning in severe mental illness, neurological conditions, and substance use. Psychodiagnostic assessment and assessment of malingering.



Dr. Gabriel Brooks

0.5 FTE in Consultation/Liaison Psychiatry, Royal Columbian Hospital.

Degree: Ph.D. University of British Columbia, 2023.

Email: gabriel.brooks1@fraserhealth.ca

Interests: CBT, MI, adjustment to changes in health/functioning, behavioural addictions.



Dr. Amy Burns

0.4 FTE Director of Training and 0.6 FTE in Inpatient Psychiatry, Royal Columbian Hospital. Clinical Instructor, Department of Psychiatry, University of British Columbia.

Degree: PhD, University of British Columbia, 2016.

Email: amy.burns@fraserhealth.ca

Interests: CBT, DBT, MI, cognitive health, early psychosis.



Dr. Xiaolei Deng

0.5 FTE in Consultation/Liaison Psychiatry, Royal Columbian Hospital.

Degree: PhD, University of British Columbia, 2024.

Email: xiaolei.deng@fraserhealth.ca

Interests: Aging, grief, and self-intimacy through lens of CBT, ACT, PRT, and object relations.



Dr. Dave Erickson

0.5 FTE at New Westminster MHSU Clinic, Royal Columbian Hospital.
Clinical Associate Professor of Psychiatry and Adjunct Instructor,
Department of Psychology, University of British Columbia.

Degree: PhD, University of British Columbia, 1994; Post-doctoral
Fellow at Institute for Mental Health Research, University
of Ottawa, 1996.

Email: david.erickson@fraserhealth.ca

Interests: Early psychosis; refractory psychosis; CBT;
implementation and dissemination of psychotherapy.



Dr. Heather Fulton

0.5 FTE at the UBC Faculty of Medicine Psychiatry Residency
Psychotherapy Training Program, based at Royal Columbian Hospital.
Adjunct Instructor, Department of Psychology and Assistant Professor,
Department of Psychiatry, University of British Columbia.

Degree: PhD, Dalhousie University, 2012.

Email: heather.fulton@fraserhealth.ca

Interests: CBT, MI, individual and group psychotherapy; concurrent
disorders, substance use, program development and
evaluation; inter-professional education and knowledge
mobilization.



Dr. Kirthana Ganesh

0.8 FTE at Burnaby MHSU Clinic.

Degree: PhD, University of British Columbia (Okanagan), 2024.

Email: kirthana.ganesh@fraserhealth.ca

Interests: Psychodynamic approaches, ACT, CBT, DBT, cultural
competence, trauma, personality disorders.



Dr. Glenn Haley

1.0 FTE at Timber Creek Mental Health Program, Surrey Memorial
Hospital.

Degree: PhD, Simon Fraser University, 1989.

Email: glenn.haley@fraserhealth.ca

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).



Dr. Katy Harper

0.6 FTE Early Psychosis Program, Surrey Gateway Clinic.

Degree: PhD, University of North Carolina at Chapel Hill, 2013.

Email: katy.harper@fraserhealth.ca

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.



Dr. Tracy Lindberg

0.48 FTE in Neuropsychology Services and 0.5 FTE in Psychology Practice Lead, Royal Columbian Hospital.

Degree: PhD, University of British Columbia, 2005.

Email: tracy.lindberg@fraserhealth.ca

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.



Dr. Sarah Liu

0.6 FTE at Early Psychosis Program, Fraser North Clinic.

Degree: PhD, Concordia University, 2020.

Email: sarah.liu@fraserhealth.ca

Interests: CBT for psychosis, DBT, psycho-diagnostic assessment of personality disorders, treatment of mood and anxiety disorders, MI strategies, ACT, interdisciplinary consultations.



Dr. Sheena Miao

0.5 FTE UBC Faculty of Medicine Psychiatry Residency Psychotherapy Training Program, based at Royal Columbian Hospital. Clinical Instructor, Department of Psychiatry, University of British Columbia.

Degree: PhD, University of Victoria, 2018.

Email: sheena.miao@fraserhealth.ca

Interests: CBT, DBT, mood and anxiety disorders, youth mental health, suicide and self-injurious behaviours, culturally sensitive practice with diverse ethnic groups, immigrants and refugees. *Currently on leave.



Dr. Humaira Mohsin

0.5 FTE at Surrey MHSU, Urgent Care Response Centre.

Degree: PhD, University of the Punjab, 2010.

Email: humaira.mohsin@fraserhealth.ca

Interests: CBT, DBT, MI, CPT mostly for people with Depression, Anxiety, Personality Disorders and PTSD.



Dr. Jan van der Tempel

0.4 FTE at Inpatient Psychiatry, Royal Columbian Hospital.

Degree: PhD, University of Toronto, 2022.

Email: jan.vandertempel@fraserhealth.ca

Interests: CBT for psychosis, spiritual/religious issues in psychosis, cultural competence, anti-stigma, comorbid OCD, program development.



Dr. Sandra Thompson

0.6 FTE in Burnaby Primary Care Network, B-Well Behavioral Medicine Team.

Degree: PhD, University of Manitoba, 2009.

Email: sandra.thompson@fraserhealth.ca

Interests: Health psychology, behavioural medicine, integrated primary care, mental health and wellbeing, mindfulness.



Dr. Amy Wong

1.0 FTE at Inpatient Psychiatry, Royal Columbian Hospital.

Degree: PsyD, Pepperdine University, 2013.

Email: amy.wong@fraserhealth.ca

Interests: Existential, Psychodynamic, Humanistic, & EMDR Therapies.



Dr. Quincy-Robyn Young

Contracted (external) supervisor to the RCH Cardiac Program.

Degree: PhD, University of Montana, 1998.

Email: dr.quincy.young@gmail.com

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.

INFORMATION ON ACCREDITATION

Our program 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 due in 2030.

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

Website: cpa.ca/accreditation

Doctoral **Residency** in Clinical Psychology

2027 – 2028

FOR MORE INFORMATION

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

Dr. Amy Burns

Director of Training

Mental Health and Substance Use Wellness
Centre

Royal Columbian Hospital

330 East Columbia Street,
New Westminster, B.C. V3L 3W7

Telephone: 604-520-4253

Fax: 604-520-4871

Email: amy.burns@fraserhealth.ca

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

Dr. Carmelina Barone

Dr. Gabriel Brooks

Dr. Amy Burns

Dr. Dave Erickson

Dr. Heather Fulton

Dr. Glenn Haley

Dr. Katy Harper

Dr. Tracy Lindberg

Dr. Sarah Liu

Dr. Sheena Miao

Dr. Humaira Mohsin

Dr. Sandra Thompson

Dr. Jan van der Tempel

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