Clinical Training Sequence - PhD

The CCAP sequence of clinical training follows a developmental trajectory aimed intentionally to increase core competencies from basic to advanced levels throughout the program. For information on the full sequences of courses and activities, see Typical Progress Sequence PhD CCAP.

PhD first year

In the first semester of the PhD program, students are introduced to psychotherapy by taking Foundations in Child and Adolescent Psychotherapy (PSYC*6580). This course emphasizes major systems of psychotherapy including cognitive, behavioural, psychodynamic, client-centred play therapy, group therapy and family systems therapy. Students are also introduced to and practice basic therapy skills. In the first year of the PhD, students also take a two semester CBT Practicum (PSYC*7994) with didactic, practice, and supervision components within the Maplewoods Centre. Students are expected to have engaged with a minimum of one therapy case by course cessation. Students also enroll in PSYC*7991 at Maplewoods Centre at some point during their PhD 1 year and carry at least one additional therapy case as well as have substantive involvement in one assessment across the year.

PhD second year

Advanced Child and Adolescent Psychotherapy, PSYC*6610 builds on basic intervention skills in PSYC*6580 with an emphasis on intervention in complex circumstances (e.g., developmental trauma, continued discussion of diversity considerations) and a broadened introduction to third wave cognitive therapies (e.g., DBT and ACT) as well as other systems of intervention (e.g., Emotion Focused Family Therapy). In this year, students are also typically enrolled in PSYC*7993, a two-day per week, 400-hour external practicum in a child and adolescent mental health facility (typically hospital or community clinic based). Typically, this practicum will have a mixed intervention and assessment focus. In the Spring/Summer term, students complete the written and oral components of the PhD Qualifying Exam, one goal of which is to establish clinical competence commensurate with the PhD.

PhD third year

In the third year of the PhD program, students complete the Clinical Supervision, Consultation and Program Evaluation course (PSYC*7996) with a focus on the Supervisory Relationship, Models of Supervision, Supervision Skills as well as broader focus on professional development at this stage of training including a focus on consultation, preparation for residency and eventual registration as a psychologist. Students will become familiar with the professional literature relevant to supervision, gain competency with ethical, culturally-competent clinical supervision, and explore their own development as a supervisor. Senior PhD students also return to Maplewoods Centre for PSYC*7991. Students are expected to carry 1-2 therapy cases and have involvement in at least one assessment case per year.

The unique balance of assessment and therapy activities will vary depending on the given student’s training goals/gaps/needs which are closely monitored by the Clinic Director and DCT. Additional practicum activities at Maplewoods Centre are an expectation during PhD 3 and/or 4 such as involvement in supervised supervision of junior colleagues in assessment, intake or therapy; developing or running groups; or outreach activities. Professional skills by the end of PhD 3 or 4 should be rated as, “ready for residency”. Students who do not achieve this level of competence will be required to complete remedial clinical work until this level of professional competency is acquired.

PhD fourth/fifth year

Clinical Residency (PSYC*8000) is completed in the fourth or fifth year of the PhD program; to be determined ready to apply for residency, a student must consult with the DCT to ensure that they have the necessary clinical and academic preparation and are in good standing in the program. Also, students are expected to have completed all required academic courses and have their dissertation data collected by the end of October in the Fall application semester.

CCAP students are required to seek a residency accredited by the Canadian Psychological Association (CPA). Only in exceptional circumstances will a non-accredited residency be considered. CPA Accreditation provides an ongoing external quality review of a residency site's training model, supervision practices, evaluation processes, and trainee protections (e.g., due process in evaluation). In addition to these important quality indicators, students who complete accredited residencies may encounter fewer barriers when pursuing licensure or registration, postdoctoral training, hospital privileges, or employment, particularly when moving between jurisdictions.

All CCAP students are expected to apply for residency via the AAPIC match process, even if their circumstances highly limit the number and scope of sites to which they will apply. Applying through the APPIC match is important for students' professional development, and this process promotes consolidation and integration of the six plus years of training that applicants bring with them into residency application. The residency is a 1600-hour commitment, which is full-time over the course of 1 year or, rarely, half-time over the course of 2 years.

Non-accredited Residency: Only if the traditional APPIC route has not yielded a match, will the program consider an application for a non-accredited residency. Should exceptional circumstances apply, the CCAP program has guidelines designed to assist students in setting up an appropriate 1600-hour non-accredited residency. A detailed application form with further guidance is available on the Maplewoods Drive. Students are also encouraged to reach out to the DCT for further discussion of their unique circumstances.

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