

The background of the entire page is a scenic photograph of a coastal landscape. It shows a calm body of water in the foreground, a small rocky island with a green wooden cabin and several tall evergreen trees in the middle ground, and a dense forest of trees on the right side. A vibrant rainbow is visible in the sky, arching from the right side towards the center. The sky is a pale, hazy blue.

# Psychology Residency

2026/27

QUEEN ALEXANDRA CENTRE  
FOR CHILDREN'S HEALTH

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## Territorial Acknowledgement

Before Canada and BC were formed, Indigenous peoples lived in balance and interconnectedness with the land and water in which the necessities of life are provided. Health disparities persist, which are due to the impacts of colonization and Indigenous-specific racism. Healthy lands, healthy people. Island Health acknowledges and recognizes these homelands and the stewardship of Indigenous peoples of this land; it is with humility we continue to work toward building our relationship.

## Victoria

Situated at the south end of Vancouver Island off the west coast of Canada, Victoria is a medium-sized city with a population of nearly 400,000. It is located on the traditional territories of the Lək̓ʷəŋən and W̱SÁNEĆ peoples and is nestled between the Salish sea and old-growth rainforests to the north and west of the city. It is the home to the BC provincial government and is known for its historical charm and architecture, as well as its green spaces and gardens. Victoria benefits from a year-round temperate climate, which provides for endless outdoor recreational opportunities. The city's vibrant arts and culture scene includes museums, galleries, theatres, symphonies and other live music venues, as well as world-class restaurants featuring a variety of international cuisines. Victoria is home to several postsecondary educational and research institutions, including the University of Victoria, which offers graduate training in clinical psychology. Victoria is easily accessed by direct flight into its international airport and by an extensive ferry system that connects the city to Vancouver, the southern gulf islands, and Washington State.

## Island Health

Island Health is responsible for delivering health and care services to residents across Vancouver Island, gulf coast islands, and mainland communities north of Powell River. We are a diverse team of healthcare professionals who offer a wide range of health services, such as public health support, primary healthcare, home and community care, mental health and substance use services, and acute care in hospitals, among others, catering to the unique needs of our geographically diverse region.

Island Health is committed to the ongoing learning journey to remove systemic racism through policy, process and procedure changes, as well as by increasing awareness and capacity for staff, physicians, volunteers, contractors and students to create culturally safe engagement and environments.

## Philosophy and goals: Learning process for students

Psychology at Queen Alexandra Centre for Children's Health (QA) is guided by the Island Health Authority's vision of "excellent health and care for everyone, everywhere, every time" as well as the CARE values:

**Courage:** to do the right thing, to change, innovate and grow.

**Aspire:** to the highest degree of quality and safety.

**Respect:** to value each individual and bring trust to every relationship.

**Empathy:** to give the kind of care we would want for our loved ones.

QA is a respectful and psychologically safe workplace, where approachability and support for others are highly valued. This is apparent both within the discipline of psychology, and across the healthcare disciplines represented within QA more broadly. Psychology has a long and robust history at QA, and psychological services are well-integrated, respected and valued across disciplines.

The Island Health Psychology Residency program is founded on the Scientist-Practitioner model of training, emphasizing evidence-based approaches to the professional practice of psychological services. Psychology services strive to be developmentally tailored, client- and family-centered, trauma-informed, and ethically sound. Our program is committed to Truth and Reconciliation, and remains steadfast in diversity, equity, and inclusion. Our ethos and philosophy value the opportunity to tailor services to the unique needs of our clients, and this approach is reflected within the broader work culture at QA.

The Island Health Psychology Residency program offers a balance of breadth and depth across training opportunities, with a goal that students will complete a comprehensive year of training as well-rounded clinicians versed in the core competencies to ethically practice psychology with children, adolescents, and their families. This includes exposure to and engagement with a range of assessment and therapeutic services, dependent on the resident's training needs and future goals. The program values the diverse needs of trainees, with flexibility to tailor the year towards particular goals that prospective residents may wish to emphasize. The training needs of residents are the primary goal of the residency program (i.e., rather than relying on residents to offset the institution's workload).

## The Setting: Queen Alexandra Centre for Children's Health

The Queen Alexandra Centre for Children's Health (QA) was founded as a convalescence centre for children in 1927. In 1958, based on a growing need for support services for children, a new site was established where QA now sits, on the traditional territories of the Ləkʷəŋən peoples. Located on the ocean, the QA campus offers wooded trails, ponds, a beach, and a gazebo overlooking the sea. Whales sometimes swim by and deer, otters, eagles, and herons are common sights.

In this therapeutic location, QA houses a wide variety of child, youth and family services divided into mental health and pediatric rehabilitation programs. Psychology is integrated within these programs in various roles, with a current staff of ten psychologists and three psychometrists.

**Mental Health Services** at QA include both inpatient and outpatient programs. These programs are offered at a tertiary level of service, typically after clients have exhausted community resources and require a higher level of care. Some programs are regional (serve children and youth throughout the Island Health catchment), while others are local to the greater Victoria region. Inpatient services focus on assessment and stabilization for children and youth. Outpatient services are divided into an adolescent day treatment program, a Dialectical Behavior Therapy (DBT) program and an interdisciplinary outpatient treatment clinic.

**Pediatric Rehabilitation Services** include the Vancouver Island Children's Assessment Network (VICAN), Neuropsychology Program, and a Pediatric Health Psychology treatment service. Rehabilitation psychologists serve children and families throughout the Island Health catchment. VICAN provides multidisciplinary diagnostic and assessment services to children and youth with a query of Autism Spectrum Disorder, Fetal Alcohol Spectrum Disorder, or other complex neurodevelopmental presentations. The Neuropsychology Program provides outpatient neuropsychological assessment and consultation services to children and youth with medical conditions affecting brain development or function. Psychologists from VICAN and Neuropsychology also provide a preschool assessment service for children at risk of global developmental delay or intellectual developmental disorder. The Pediatric Health Psychology treatment service offers individual and group therapy to children and youth receiving medical treatments through the ambulatory clinics at Victoria General Hospital. The rehabilitation psychologists often collaborate and consult with school and other community partners to support children's functioning in their communities.

## Residency Description and Program Structure

In 2026-2027, we are pleased to offer two resident positions as employees of Island Health. The residency will take place at QA and is focused on the child, youth and family demographic. Most services offered at QA are multidisciplinary in nature and it is expected that residents will work collaboratively with professionals and students from other disciplines.

Residents will have the opportunity to participate in rotations within both the mental health and rehabilitation services portfolios. It is expected that each resident will spend six months completing rotations within the mental health portfolio and six months completing rotations within the rehabilitation services portfolio. In conjunction with the Director of Training (DoT), residents will have the ability tailor their rotations based on interest, skill set, and supervisor availability. In addition, they will carry a small number of longer-term therapy cases. Residents will also participate in didactic activities and work on their own research and/or program evaluation or Island Health research projects.

The residency is a full-time, year-long program running from September through the end of August. The residency experience will be at minimum 1600 hours with at least 30% of the time spent in direct client contact.

## Rotations

### Child, Youth, and Family Mental Health Services

#### **Anscomb Outpatient Program**

**Anscomb** is a tertiary-level outpatient clinic providing interdisciplinary assessment, treatment, and consultation services to children and their families across Vancouver Island. Within this rotation, residents can expect to work collaboratively with members of the interdisciplinary team (psychiatry, social work, clinical counselling, occupational therapy, and speech and language pathology), while supporting young people and their families with a wide range of presenting concerns (e.g., mood and anxiety disorders, Obsessive Compulsive Disorder, suicide ideation and self-harming behavior, substance use and early psychosis, parent-child relational difficulties, complex developmental trauma, and co-occurring neurodevelopmental conditions such as Intellectual Developmental Disorder, Specific Learning Disorders, Attention-Deficit Hyperactivity Disorder, and Autism Spectrum Disorder).

Residents will support long-term therapy clients across the course of the residency year, using an eclectic range of evidence-based therapeutic modalities. Residents may



also consult with members of the interdisciplinary team regarding issues of differential diagnosis, case conceptualization, and treatment planning. In addition, residents may also consult with school-based teams, external agencies, and/or residential, group living facilities for youth in care. In addition to offering treatment and consultation, residents may complete a variety of outpatient psychology assessments, including safety assessments, cognitive, academic, and adaptive functioning assessments, and/or social-emotional and personality assessments. Residents may work with psychometry according to their training needs and may have opportunity to supervise psychology practicum students. Finally, residents may choose to participate in caregiver groups such as Emotion-Focused Family Therapy (EFFT) or Supportive Parenting of Anxious Childhood Emotions (SPACE).

### **Day Treatment Outpatient Program**

The **Adolescent Intensive Day Treatment Program (AIDTP)** is for youth aged 14 to 18 years old who are struggling with significant mental health issues and school attendance/participation. This program focuses on supporting youth to improve their mental health and well-being, and to strengthen their relationships with their parents/caregivers and peers. The program specifically focuses on supporting youth and their support network to set goals related to anxiety, depression, interpersonal difficulties, complex trauma, emotion dysregulation, chronic suicidality, and non-suicidal self-injury. Youth attend every day for a period of five and a half months (coinciding with a school semester) where they participate in a variety of therapy groups, individual treatment, school, and activities geared towards increasing independent living skills. Parents have weekly sessions both individually and as a group.

The team is comprised of a psychologist, psychiatrist, occupational therapist, recreational therapist, clinical counselor, social worker, family therapist, child and youth counsellor, teacher, and educational assistant. The psychologist may aid staff in understanding and applying the results of psychological assessment tools (e.g., psycho-educational assessments) to assist in tailoring therapeutic approaches to individuals. Residents will have the opportunity to co-facilitate therapeutic groups, offer individual therapy, and participate in program activities.

### **Dialectical Behavioral Therapy (DBT) Outpatient Program**

The **DBT Outpatient Program** is a full-fidelity, six-month specialized treatment program for youth ages 15 to 18, as well as their families. The program focuses on helping youth overcome struggles related to self-harm and suicidal behaviour. The

program provides one-to-one weekly DBT counselling sessions, as well as a DBT skills groups for teens and parents that runs for 24 consecutive weeks. Psychiatry appointments, family therapy, and caregiver sessions may also be offered. Phone coaching is also available. Residents will have the opportunity to participate in the skills group, and possibly the consulting team and/or individual therapy sessions depending on their prior experience with DBT. This rotation is being offered as a minor rotation only.

### **Ledger Inpatient Program**

**Ledger House** is an inpatient, multidisciplinary assessment and stabilization program for children and youth with complex psychiatric and neurodevelopmental concerns. Residents will have opportunities to observe, participate, and collaborate in the assessment process, including but not limited to: psychoeducational or psychodiagnostic assessments, case conceptualization and differential diagnosis, psychoeducation and feedback, treatment exploration and planning, and consultation with the multidisciplinary team. Residents may work with psychometry according to their training needs and may have opportunity to supervise psychology practicum students. While the individual is theoretically the focal point of assessment, family and community team involvement and education often plays a vital role over the course of an admission. There may be opportunities to shadow multidisciplinary team members in their respective roles. Multidisciplinary team members include: psychology, psychiatry, psychometry, speech-language pathology, occupational therapy, social work, nursing, pharmacy, education, and child and youth counselling.

### **Child, Youth, and Family Rehabilitation Services**

#### **VICAN**

The **Vancouver Island Assessment Network (VICAN)** is an outpatient multidisciplinary diagnostic and assessment service with 3 referral streams: Fetal Alcohol Spectrum Disorder, Complex Developmental and Behavioural Conditions (CDBC), and Autism Spectrum Disorder. The multi-disciplinary assessment teams include psychologists, psychiatrists, developmental pediatricians, speech-language pathologists, occupational therapists, social workers, and psychometrists.

Residents will have the opportunity to provide diagnostic and psychoeducational assessments to children and youth with complex neurodevelopmental presentations in the Fetal Alcohol Spectrum Disorder and CDBC streams. They will collaborate with other team members to develop a better understanding of a child/youth's diagnostic profile and support needs. Within the VICAN rotation, residents will increase their



competence in administering and interpreting psychological assessments, contemplating differential diagnosis, developing relevant and meaningful recommendations, and communicating this information to team members, families, and community partners. Residents may work with psychometry according to their training needs. Please note that residents will have the opportunity to have exposure to Autism Spectrum Disorder assessments through observation and clinical discussions, but will not be conducting these assessments themselves.

### **Neuropsychology**

The **Neuropsychology Program** at QA is an outpatient assessment service providing neuropsychological assessment and consultation services to children and youth with health conditions that affect brain development and function. Common reasons for referral include traumatic brain injury, epilepsy, brain tumor, pediatric cancer, cerebral vascular accident, cardiac arrest, hydrocephalus, neuromuscular disorder, and extreme pre-term birth. The Neuropsychology Program serves children and families throughout the Island Health region.

Residents in the Neuropsychology Program can expect to improve their understanding of the cognitive and learning sequelae of neurological illness and injury in the pediatric population and gain supervised experience in the development, administration, and interpretation of neuropsychological assessment batteries. The rotation in the Neuropsychology Program will be tailored to the resident's education and previous experience in neuropsychology. Residents may work with psychometry according to their training needs and may have opportunity to supervise neuropsychology practicum students.

### **Preschool Assessment Service**

Psychologists in Rehabilitation provide limited consultation and psychological assessment services to preschool aged children who are considered at-risk for Global Developmental Delay or Intellectual Developmental Disorder. These children are referred from the QA Early Intervention Program or Island Health Neonatal Follow-Up Clinic. Psychologists work closely with these teams to identify any areas of need and to support the child's transition to kindergarten. Residents in this rotation will have the opportunity to gain experience in the assessment of young children with complex developmental profiles. They can expect to develop competence in the administration and interpretation of preschool test batteries and gain experience in assessing children with language and/or motor delays. This rotation is being offered as a minor rotation only.

## Pediatric Health Psychology

The **Pediatric Health Psychology Service** offers short-term therapy to children and youth with chronic health conditions who are receiving medical treatments at an ambulatory clinic at Victoria General Hospital (VGH). Residents can expect to gain additional understanding of the emotional, behavioural and potential cognitive impacts of chronic health conditions (e.g., diabetes) and address challenges with anxiety related to medical procedures, or around ongoing management of the chronic health condition. Although patients are actively receiving services through VGH, psychology services are offered at the QA site on an outpatient basis. Residents will have the opportunity to provide individual therapy and may also have the opportunity to co-facilitate group therapy programs. This rotation is being offered as a minor rotation only.

## Rotation Summary Table

Each resident will spend half of the year completing rotations within the mental health portfolio and half the year completing rotations within the rehabilitation services portfolio. Possible rotations include:

Portfolio	Rotation	Assess vs. Therapy	Defining Characteristic?
Mental Health	Anscomb Program	Therapy	Complex mental health, long-term treatment
Mental Health	Ledger House	Assessment	Inpatient setting
Mental Health	Adolescent Intensive Day Treatment	Therapy	Groups, short-term treatment
Mental Health	DBT (minor rotation only)	Group Therapy	Full-fidelity program
Rehabilitation	VICAN	Assessment	Neurodevelopmental conditions
Rehabilitation	Neuropsychology	Assessment	Neurological and other health conditions
Rehabilitation	Preschool Assessment Service (minor rotation only)	Assessment	Global Developmental Delay or Intellectual Developmental Disorder
Rehabilitation	Pediatric Health Psychology (minor rotation only)	Therapy	Chronic health conditions, short-term treatment

### Sample Weekly Schedule (1 major rotation, 1 minor rotation):

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning	Major rotation	Major rotation	Minor rotation	Major rotation	Didactics
Afternoon	Long term therapy cases plus supervision	Major rotation	Minor rotation	Supervision	Research/Program Evaluation (plus catch up)

(Actual schedule will vary depending on rotation and supervisor selection)

It is not mandatory for residents to pick a major and a minor rotation each half of the year, but they may choose to do so. Please note not all rotations are available as a major rotation.

#### Sample year:

All residents will start their residency year with two long-term individual treatment cases, which they will carry all year. A resident starting in the rehabilitation services portfolio could choose to have a major rotation in VICAN and a minor rotation in pediatric health psychology for the first six months of the year. For the second half of the year, they would pick rotations in the mental health portfolio and could choose to have a major rotation with the Anscomb Program and a minor rotation with the Ledger Program. This is just an example of the choices a resident could make and demonstrates the breadth of experiences that are offered at QA.

## Psychology Staff

**AKDAG, Sare, Ph.D., R.Psych. [University of Massachusetts Boston] (She/Her)**

**Clinical Assistant Professor, Department of Pediatrics, University of British Columbia**

**Adjunct Associate Professor, Department of Psychology, University of Victoria**

### **Neuropsychology Program**

Dr. Akdag is the Professional Practice Leader for the Psychology Residency Program and the Clinical Psychology Leader for Child, Youth, and Family Rehabilitation Services at QA. She has over 20 years experience as a clinical neuropsychologist working in acute and outpatient pediatric health care settings and has been involved in the training and supervision of pre-doctoral neuropsychology trainees for most of this time. She works in the Neuropsychology Program at QA. She has specialized interest and experience in the neurocognitive sequelae of epilepsy.

**BAKER, Lesley, Ph.D., R.Psych. [University of Victoria] (She/Her)**

**VICAN Program**

Dr. Baker is a clinical psychologist at QA within the VICAN program. She provides child and adolescent psychological assessments for those who are referred for evaluation of complex developmental and behavioural conditions, queries of Autism Spectrum Disorder, and prenatal risk factors such as prenatal alcohol exposure. Dr. Baker received her Ph.D. from the University of Victoria in 2018 and completed her residency at Eastern Health in St. John's Newfoundland with a focus on child assessment and child and family intervention. She is also a supervisor at the University of Victoria Psychology clinic where she supervises graduate students in psychoeducational assessment.

**CAREY, Tyler, Ph.D., R.Psych. [University of Victoria] (He/Him)**

**Anscomb Outpatient Program**

Dr. Carey provides assessment and treatment of youth presenting with a range of social, emotional, and behavioural concerns. Dr. Carey co-facilitates the SPACE caregiver group, with research initiatives pertaining to the effectiveness of SPACE in a tertiary outpatient setting. Dr. Carey also offers supervision and teaching to trainees, as well as consultation to school-based teams and community professionals regarding pediatric mental health disorders.

**HALLIDAY, Drew, Ph.D., R.Psych. [University of Victoria] (He/Him)**

**Anscomb Outpatient Program**

Dr. Halliday primarily conducts comprehensive assessments for children and youth within the Anscomb program and for associated Island Health programs on central Vancouver Island. These assessments are often very tailored and adapted to accommodate the unique needs of the client, and employ a range of cognitive, academic, neuropsychological, and personality measures. Dr. Halliday also offers psychotherapeutic supports to children and youth and co-facilitates the SPACE caregiver group. He is currently involved in researching the SPACE program, as well as quality improvement.

**JONES, Paul, Ph.D. [Simon Fraser University] (He/Him)**

**VICAN Program**

Dr. Paul Jones earned his PhD from Simon Fraser University with a specialization in child and adolescent neuropsychology. He completed his pre-doctoral residency at BC Children's Hospital and Sunny Hill Health Centre, completing rotations in neuropsychology, neuropsychiatry and the BC Autism Assessment Network.

Additionally, he holds a master's degree in Neuroscience from the University of British Columbia. Throughout his clinical training, Dr. Jones has practiced across a broad range of pediatric hospital and healthcare environments, including primary care, tertiary care, and outpatient settings. At QA, Dr. Jones works within the Complex Developmental Behavioural Conditions (CDBC) program, providing assessments for children and youth with complex neurodevelopmental and functional support needs.

**LANE, Kimberly, Ph.D., R.Psych. [McGill University] (She/Her)**

**Pediatric Health Psychology**

Dr. Lane provides short-term therapy to children and youth with chronic health conditions who are connected to a pediatric ambulatory clinic at the Victoria General Hospital (VGH). Dr. Lane supports children, youth, and families to effectively cope with chronic health conditions and/or related medical procedures, in collaboration with their health care team.

**ROEMER, Audra, Ph.D., R.Psych. [University of Victoria] (She/Her)**

**VICAN Program**

**Pediatric Health Psychology**

Dr. Roemer's training background is in lifespan clinical psychology. She conducts comprehensive assessments for children and youth within the VICAN program as part of a multidisciplinary assessment team. These assessments are often tailored and adapted to accommodate the unique needs of the client, and employ a range of cognitive, academic, and socio-emotional measures. Dr. Roemer also offers psychotherapy to children, youth, and their families with chronic health conditions.

**RONAGHAN, Dana, M.A. [University of Manitoba] (She/Her)**

**Ledger House**

Ms. Ronaghan works as part of the psychology team at Ledger to provide inpatient assessment of children and youth presenting with a wide range of neurocognitive, socioemotional, and behavioural concerns. She also facilitates the caregiver group for families of children in Ledger's Comprehensive Assessment Program (CAP). She has finished her residency and is completing her Ph.D. in Clinical Psychology at the University of Manitoba.

**SCHACTMAN, Alissa, Ph.D., R.Psych. [University of Saskatchewan] (She/Her)**

**Adjunct Assistant Professor, Department of Psychology, University of Victoria  
Anscomb Outpatient Program**

Dr. Schactman is the Director of Training of the Psychology Residency program at QA and the Clinical Psychology Leader for Child, Youth, and Family Mental Health

Services at QA. She has worked in the Anscomb program for over 15 years providing individual therapy to children and youth with complex mental health needs. She also provides consultation to families, schools, and community agencies. Dr. Schactman provides supervision to clinical psychology practicum students and to staff in the process of registering with the College of Health and Care Professionals of BC.

**STURGESS, Clea, Ph.D. [University of Victoria] (She/Her)**

**Adolescent Intensive Day Treatment Program**

**Dialectical Behavioral Therapy (DBT) Program**

Dr. Sturgess earned her Ph.D. from the University of Victoria and completed her residency at the Kingston Residency Consortium. She is responsible for individual and group therapy, and a portion of the clinical group programming for youth attending the AIDTP. She runs both the youth and caregiver DBT groups in the AIDTP. She is also a clinician with the DBT Program, providing individual therapy to youth. She is currently in the process of registration with the College of Health and Care Professionals of BC.

**TANEJA, Chand, Ph.D., R. Psych., ABPP-CN [Univ. of Windsor, ON] (She/Her)**

**Associate Member, Faculty of Graduate Studies, University of Victoria**

**Adjunct Associate Professor, Div. of Medical Sciences (Island Medical Program), UBC**

**Adjunct Associate Professor, Department of Psychology, University of Victoria**

**Neuropsychology Program**

Dr. Taneja is Board Certified in Clinical Neuropsychology and Pediatric Clinical Neuropsychology. She has worked at QA since 2008 and is primarily involved in neuropsychological assessment and consultation for children and adolescents with a wide variety of neurological, psychiatric, and medical conditions. She is experienced in lifespan neuropsychology and previously worked in Michigan, including 4 years at the Detroit Medical Center and 2 years during a formal post-doctoral fellowship in Clinical Neuropsychology and Rehabilitation in Grand Rapids. She serves as a consulting editor for various neuropsychological journals and is an advisory member of the Community Brain Injury Program for Children & Youth in BC (CBIPCY), the BC Concussion Advisory Network (BC CAN), and the Canadian Traumatic Brain Injury Research Consortium (CTRC). Further, she is on the American Board of Clinical Neuropsychology (ABCN) board of directors, including the Credentials Review Committee and the Canadian Credentials Review Subcommittee.



**UBOGY, Seth, Psy.D., R. Psych., ABPP-CN [California Institute of Integral Studies] (He/Him)**

**VICAN**

Dr. Ubogy has worked with children, teens, and adults as a clinical neuropsychologist since 2003, with a focus on pediatrics. Much of his focus from 2007-16 was in hematology/oncology, particularly pediatric brain tumors, when he directed the neuropsychology training at the University of San Francisco, Children's Hospital Oakland campus. He has taught and supervised students in pediatric neuropsychology topics in varied settings: graduate school, outpatient and acute hospital-based services, and private practice. Dr. Ubogy obtained board certification with the ABCN in 2007, and pediatric subspecialization certification in 2013. Dr. Ubogy's work with VICAN involves the CDBC program, assessing children and youth with FASD and other complex developmental and behavioural conditions, and consulting with multidisciplinary teams and parents based on assessment findings.

**WONG, Ryan, Ph.D., R. Psych. [University of Victoria] (He/Him)**

**Ledger House**

Dr. Wong provides inpatient assessment of children and youth presenting with a wide range of neurocognitive, socioemotional, and behavioural concerns.

## Supervision

Supervision is an essential component of the residency program to provide feedback on psychological services delivered by the resident and supporting the resident with their training goals and professional identity development. Residents will receive a minimum of three hours weekly of regularly scheduled individual supervision from registered psychologists during each rotation of their residency. In addition, residents will participate in a weekly group supervision with the DoT. Supervision will typically occur face-to-face and at least 10% will be direct observation of the resident's work with clients.

As available, residents will have the opportunity to supervise psychology practicum students or students from other disciplines. This will be done under the supervision of a registered psychologist who will provide supervision of the resident's supervision. This will allow residents to gain experience in providing clinical supervision, which supports them in their training to becoming independent practitioners.

## Didactics

Residents will participate in a variety of didactic activities throughout the year. These will include at least two hours per week of case conferences, seminars, in-service training and/or grand rounds. Sample topics that may be covered include ethics, professional practice, cultural safety, indigenous interculturalism, and other diagnosis-specific subjects. There may also be other training opportunities available to staff that residents will be invited to participate in (e.g., training in therapeutic modalities provided to staff within a given program).

Residents will also have the opportunity to connect with and attend seminars with psychology residents at other residency sites located in the greater Victoria region and surrounding areas. In addition, other virtual didactic opportunities offered through the Provincial Health Services Authority may be available.

## Evaluation

Formal evaluation of resident performance will occur at least twice during the residency year and at the end of each rotation. Informal evaluation will occur throughout the whole residency. The evaluations will assess the core skills the resident is developing during the residency, as well as essential elements to become an independent practitioner, such as professionalism, interpersonal relationships and knowledge, and the application of ethical and legal standards. The DoT will provide formal feedback about the resident's performance to their home academic institution at least twice during the residency year. Residents must pass all rotations and be assessed as competent in all core areas by the end of residency.

Formal procedures are in place to address concerns about resident performance including a remediation process, if necessary. There are also formal procedures residents can follow to address any concerns they may have during their residency. The procedures will be provided to residents at the start of the residency program.

Upon finishing the residency program successfully, each resident will receive a certificate of completion.

## Financials and benefits

Island Health is committed to supporting two psychology residents annually. The compensation will be approximately \$54,000, plus benefits (extended health care and dental coverage). Residents will be entitled to 10 days of paid vacation and 10 paid sick days.

## Diversity Statement

Island Health offers programs and services on the unceded and traditional territories of the Coast Salish, Nuuchahnulth, and Kwakwaka'wakw Peoples. As a signatory to the 2015 Declaration of Commitment to Cultural Safety and Cultural Humility, Island Health is committed to addressing the ongoing impacts of colonialism and Indigenous-specific racism in order to provide a culturally safe, inclusive, healthy and respectful environment. The organization is committed to strengthening diversity, equity, and inclusion to enable excellence in health and care for everyone, everywhere, every time. Through these commitments, Island Health strives to deliver the highest possible standard of care and to promote safe workplaces.

To this end:

- Island Health is committed to ensuring health equity and addressing systemic racism that exists in our healthcare system.
- Island Health is committed to fostering safe, healthy, and inclusive workplaces that promote human rights, personal dignity, and support every individual's right to physical safety, psychological safety, and social well-being.
- Island Health is committed to the recognition, acceptance, and welcoming of the differences that individuals bring to the organization, including race, ethnicity, gender, sexual orientation, socio-economic status, age, abilities, religious and political beliefs and other ideologies.

The Island Health Psychology Residency Program aims to prepare future psychologists to serve the needs of a diverse public. We recognize that we all bring unique experiences and backgrounds to our work that can enrich our perspectives and enhance our ability to provide the highest possible standard of care. We welcome applicants from all backgrounds and are committed to providing a safe, welcoming, and affirming workplace and training environment. Applicants requiring accommodations are invited to reach out directly to the DoT.

## Criteria for Applicants and Application Details

We will accept applications from graduate students enrolled in a CPA or APA accredited Doctoral Program in Clinical Psychology. As described in the CPA accreditation standards, all applicants must have completed required coursework and practicum requirements of their doctoral training program and received approval for their doctoral thesis proposal. It is preferred if applicants have completed their data

collection and analysis by the start of their residency year. As our residency is child, youth and family focused, preference will be given to applicants with a background in child and adolescent coursework and practica experiences.

We abide by APPIC match policies and deadlines. This residency site agrees to abide by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any resident applicant. Applications are due **November 3, 2025** and must be received through the APPIC portal. Island Health's APPIC number is 1891.

Please note that all Island Health employees are required to follow policies related to mandatory vaccination and undergo a criminal record check.

## Contact Information

We look forward to receiving your application. Please direct any inquiries to Dr. Schactman, DoT.

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