



CBT Associates



Clinical Psychology Residency Program

2018-2019 Academic Year

Director of Training: Noah Lazar, Ph.D., C.Psych.

Profession Practice Leader: Eilenna Denisoff, Ph.D., C.Psych.

For more information, please visit:

www.cbtassociates.com

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Who We Are

Since 2002, CBT Associates has helped people become happier and more productive by assisting clients in overcoming feelings and behaviours that negatively impact their everyday lives. Dr. Peter Farvolden and Dr. Eilenna Denisoff were previously working in the Mood and Anxiety Program and the Clinical Research Department at the Centre for Addiction and Mental Health (CAMH). They opened their practice together in response to the overwhelming demand they saw for high-quality and evidence-based psychological treatment.

Evidence has demonstrated that cognitive behavioural therapy (CBT) is effective in helping people to overcome a variety of problems and achieve a healthier and more balanced approach to life. However, access to this treatment has, historically, been a challenge. Over the past decade, Drs. Denisoff and Farvolden have expanded their practice to meet this need and today they work with a growing group of over 70 like-minded psychologists to provide effective, efficient, evidence-based treatment at 6 locations in the Greater Toronto Area, including Aurora, Unionville, Etobicoke, North York, Midtown Toronto and Downtown Toronto. They have found that this group practice approach allows them to provide access to the broadest base of clinical expertise and provide a tailored approach for the best outcomes.

Today, CBT Associates provides personalized, compassionate, respectful and discreet treatment with the highest level of professional care, focusing on leading-edge, evidence-based Cognitive Behavioural Therapy to help children, adolescents and adults of all ages in sessions for individuals, groups, couples, and families. The spirit of our approach is active, compassionate, and genuine. We collaborate with clients and develop a treatment plan that works for them.

As psychologists, we are trained to be scientist-practitioners. This means that our practice is guided by the best evidence provided by current research on what works for common problems. The treatments and techniques we employ have been shown to be most effective in reducing symptoms and improving the quality of life for people experiencing anxiety, mood, stress, and relationship problems. Through our evidence-based practice, we strive to integrate the best research and evidence with our clinical expertise and our clients' values.

Philosophy of Training

The Clinical Psychology Residency Program is committed to the Scientist-Practitioner model, which is reflected through the use of Cognitive Behavioural Therapy (CBT) as our main treatment modality.

Research has indicated that the way we think and behave powerfully affects our emotions. CBT helps clients change their negative and anxious thoughts and behaviours, so they can feel and function better, in order to improve quality of life. Rigorous clinical trials have proven that CBT is effective in improving symptoms of depression, anxiety, psychosis, amongst others conditions.

Through an evidence-based education, Residents will learn how to collaborate with clients to design personalized case conceptualizations and treatment plans that may also integrate a number of related therapeutic approaches. These include, but are not limited to, Motivational Interviewing (MI), Acceptance and Commitment Therapy (ACT), Mindfulness Meditation, Mindfulness-Based Stress Reduction (MBSR), Mindfulness-Based Cognitive Therapy (MBCT), and Dialectical Behaviour Therapy (DBT). Residents within our program are encouraged to anchor their clinical service in a thorough review of existing scientific literature and evaluate their interventions systematically.

CBT Associates is committed to assisting Residents in developing advanced clinical skills in CBT, and to providing effective and evidence-based treatment to clients. This immersive experience will ensure that Residents develop assessment, treatment, consultation and ethical skills to prepare them to work as independent practitioners.

Goals of Training

The primary aim of the CBT Associates Clinical Residency Program is to prepare Residents to become competent and autonomous Clinical Psychologists. Residents will develop skills and knowledge in the areas of diagnosis, assessment, consultation, treatment, as well as professional and ethical issues. Residents are expected to think critically not only about the services they offer to patients but also about the clinical decisions they make. These decisions are based upon data collected in the therapeutic and assessment context and be informed by empirically supported research. As such, Residents are expected to develop core competencies in the following areas:

1. **Assessment** – Assessments are conducted to develop each Resident’s competence in assessment, diagnosis, case conceptualization, and to provide recommendations for treatment and interventions. The expectation is that Residents will become proficient with the psychological assessments that are specific to their training rotations including the administration, scoring, interpretation, and communication of results from diagnostic interviews and psychological tests.
2. **Consultation and Interprofessional Collaboration** - Residents are expected to develop the personal skills and attitudes necessary for practice as a psychologist within a multidisciplinary framework, including oral and written communication skills, consultation skills, and the ability to work competently with other healthcare professionals.
3. **Intervention** - To ensure that Residents are competent in planning and providing a range of psychological treatments through individual, group, and family-based interventions. Residents will understand the basis of treatment formulation including empirically supported interventions, development of treatment goals, and psychotherapeutic strategies. Residents will demonstrate an understanding of the process issues related to intervention.
4. **Professional Ethics and Standards** - Training aims to ensure that Residents develop awareness, knowledge, and application of ethical and professional principles of psychology in clinical activities so that they will aspire to the highest ethical and professional standards in future professional roles. Residents are expected to demonstrate a comprehensive knowledge and a keen sensitivity to professional ethics in terms of ethical standards, codes of conduct, different legislation relating to psychology and obligations under the law. Training aims to

help prepare Residents for registration with the College of Psychologists of Ontario, as well as other state and provincial licensing boards.

5. **Cultural Diversity** - Residents are exposed to patients and staff from diverse cultural backgrounds. Training focuses on becoming aware and sensitive to cultural and individual differences in the context of their work as psychologists.
6. **Professional Development** - Educational events at CBT Associates are held on a regular basis, and Residents are required to attend. Educational opportunities include in-house training, clinical rounds, assessment rounds, and half-day training workshops. Residents are expected to participate in active learning by conducting and attending presentations and seminars, as well as keeping abreast of current literature.
7. **Research** - To enhance the scientist-practitioner approach by training Residents in evaluation research, and exposing them to other forms of clinical research within a clinical setting.
8. **Supervision and Evaluation** - Supervision is provided by staff licensed to provide psychology services in the province of Ontario. As indicated in the Canadian Psychological Association (CPA) guidelines, a minimum of four hours of supervision per week is provided to Residents by doctoral level psychology staff. Supervision is structured in order to meet the Resident's level of competence. Supervision activities are individualized to each Resident's specific training needs and entry-level skills, and will include both group and individual supervision. As Resident's competence increases, supervision becomes more consultative and collaborative in nature. Residents are evaluated on their progress at intervals of three months, six months and twelve months by their Supervisors. Feedback will be provided to the Resident's Director of Training at six and twelve months.
9. **Development of Supervisory Skills** - Residents may have the opportunity to provide supervision to junior therapists. If Residents pursue these experiences, they receive guidance from their Clinical Supervisor. Additionally, Residents will gain knowledge of the literature that is available on supervision through readings.

Program Structure

The Clinical Residency Program will run from September 1 through August 31 (i.e., first business day in September to the last business day in August), and requires the completion of 1,500 hours of supervised practice. We have two Resident positions available. Residents will be expected to work 40 hours per week, with specific hours to be determined at the outset of the Residency in collaboration with the Resident's Clinical Supervisors and Director of Clinical Training. Residents will be required to work at least one to two evenings per week between 5 p.m. and 9 p.m.

Residents will spend at least two days at the downtown location, currently Wednesdays and Thursdays, to participate in didactic rounds and group supervision treatment rounds. Residents may be asked to work at more than one CBT Associates location. Services provided by residents would be similar at all locations. Residents are assigned to these locations based on preference and referral volume. Administrative supports are available at each location.

Residents will spend a minimum of 50% of their Residency in direct client contact (approximately 20-25 hours per week). Clinical contact may also include work through BEACON™, which is a new digital platform developed by CBT Associates to enhance traditional in-person CBT sessions, and provide a standalone internet-based CBT approach, providing evidence-based protocol-driven treatment under the guidance of a therapist.

In addition to their clinical work, Residents will also participate in report-writing, clinical readings, educational and didactic seminars, and supervision. Residents may also have the opportunity to work on research projects within the clinic, such as analyzing outcome data for our new digital platform.

Each Resident will receive a minimum of four hours of supervision per week by a doctoral-level, registered psychologist. Clinical supervisors are available across locations, and would supervise residents at, and across, locations. Styles of supervision will vary between supervisors, and may include discussion of clinical cases, professional development and mentorship, observing and being observed while providing clinical services, video or audio recording of sessions, and formal case presentations. Residents will be assigned a minimum of two supervisors based upon their expression of interest and availability of the Supervisor. Both Supervisors meet weekly with each Resident. An additional group supervision session, "Treatment Rounds", occurs weekly, as well. Supervision may be provided in individual and/or group formats, in addition to attending weekly interdisciplinary team meetings, psychology seminars, and case conferences.

Supervisors provide a graduated experience of increasing autonomy, depending upon the experience and comfort level of the individual Resident. Residents are encouraged to dialogue with their supervisors as to when they feel ready to take on more autonomy, or if they have been given too much. Built into the program is also the ability for the Residents to be supervised on their supervision of junior practitioners.

Didactic Seminars

Residents will be required to attend a number of didactic seminars over the course of the Clinical Residency.

Weekly assessment rounds are one hour in length, and are focused on diagnostic assessment, ethics, case presentations and didactic presentations. Monthly skills-based rounds focused on specific CBT strategies will also be scheduled.

Residents are also required to attend monthly training sessions that are focused on the development and enhancement of CBT skills for numerous clinical conditions. These training sessions are 1.5-2 hours in length. Every quarter, there is also a day-long (6 hour) Saturday training event to provide a more in-depth focus on assessment and treatment of specific clinical presentations. Residents are able to flex their schedule during the week to accommodate for the Saturday time. In total, the didactic training averages to two hours of training per week of the residency.

Clinical Rotations

Residents within our program will anchor their clinical service in a thorough review of existing scientific literature on empirically-validated treatments, and evaluate their interventions systematically. Residents will focus on developing their skills in *Assessments, Intervention and Consultation*.

Although *assessments* may vary depending upon the specific referrals, in general, Residents will be expected to demonstrate proficiency in psychodiagnostic assessment with structured clinical interviews, as well as behavioural, personality, and cognitive assessment measures, where appropriate. Our model of training allows for experience with diverse clinical populations and presentations.

Regarding *intervention*, Residents at CBT Associates will develop proficiency in the use of empirically and theoretically based approaches to therapy with a diverse client population specific. This will include supervision and training in various psychotherapy modalities and may include individual, group, and in some cases, couples or family therapy. Although CBT training will be the primary modality of treatment and training, other forms of therapy may be incorporated into the training program, such as DBT, MBCT and ACT.

Concerning *consultation*, Residents are expected to develop the personal skills and attitudes necessary for practice as a psychologist within a multidisciplinary framework, including oral and written communication skills, consultation skills, and the ability to work competently with other healthcare professionals. Residents may be involved in interacting with professionals within CBT Associates and with professionals from community agencies regarding the care and treatment of patients. This also provides Residents with an opportunity to engage in the multiple roles of a psychologist including clinician, teacher/supervisor, evaluator/researcher, administrator, and leader.

The Clinical Residency Program has been segmented into two rotations based on client populations. All Residents will be required to complete clinical work within the Adult Mental Health rotation. Residents may also elect to complete additional training in the Child and Adolescent Mental Health rotation.

Clients will be assigned to Residents on the basis of their clinical interests, as well as the availability of referrals. Residents will be expected to carry a minimum caseload of fifteen therapy clients at one time over the course of their Residency year.

ADULT MENTAL HEALTH ROTATION

In this rotation, Residents will work with clients, aged 18 to 65 years old, from diverse backgrounds and clinical presentations. Often referrals include individuals suffering from Major Depressive Disorder, Bipolar Disorder, Schizophrenia, Substance Abuse Disorders, Panic Disorder, Agoraphobia, Specific Phobias, Social Anxiety Disorder, Generalized Anxiety Disorder, Illness Anxiety Disorder, Obsessive Compulsive and related disorders, Post-traumatic Stress Disorder and related disorders, and Eating Disorders. Clients may also present regarding issues related to grief, relationships, stress, and occupational difficulties, among other stressors.

CHILD AND ADOLESCENT MENTAL HEALTH ROTATION

In this rotation, Residents will work with clients, aged 5 to 17 years old, Often referrals include individuals suffering from Attention Deficit Hyperactivity Disorder (ADHD), Learning Disabilities, Major Depressive Disorder, Substance Abuse Disorders, Panic Disorder, Agoraphobia, Specific Phobias, Social Anxiety Disorder, Selective Mutism, Generalized Anxiety Disorder, Illness Anxiety Disorder, Separation Anxiety Disorder, Obsessive Compulsive and related disorders, Post-traumatic Stress Disorder and related disorders, and Eating Disorders. There may also be opportunities to conduct psychoeducational assessments for ADHD and Learning Disabilities, giftedness, developmental delays and autism spectrum disorders.

Resident Evaluation

Formal written evaluations will be conducted three times over the course of the Residency; at three months, six months and 12 months. Results of the written evaluations are forwarded to each Resident's University at six and twelve months to document his or her progress in the Clinical Residency.

The initial written evaluation is completed by each supervisor. It is reviewed in a face-to-face meeting with the Resident. This review is intended to identify areas of strengths and/or weaknesses that can be further developed through the remainder of the Residency.

The second evaluation is conducted at the mid-point of the year. The evaluation occurs in a face-to-face meeting with the Supervisor and Resident. This evaluation is based on the findings of the initial written evaluation and progress from stated goals and objectives of the Resident.

A final meeting between the Resident and Supervisor is conducted at year end to discuss the overall evaluation of the Resident's progress over the course of the Residency. This evaluation is based on the previous evaluations. This meeting is also an opportunity for Residents to review the year and to elicit suggestions and recommendations for improvements to the program.

Midway and at the end of the Residency year, Residents are asked to formally evaluate their rotations and Supervisors. To ensure confidentiality from the Supervisor, evaluations are forwarded to the Director of Clinical Training, who, along with the Professional Practice Leader, can help address identified concerns.

Dispute and Remediation Procedures

Full dispute and remediation procedure details can be found in “The Identification and Management of Resident Performance and Concerns” policy document, which is provided at the outset of the residency.

In the event of resident performance issues, as identified by the supervisor or other members of CBT Associates, the supervisor will first discuss any concerns with the resident. Informal remediation procedures would be discussed and implemented. If concerns persist, the Director of Training, and/or the Professional Practice Leader may wish to meet with the resident to discuss further remediation and training options, at which time, a formal written description of the issue, as well as a performance remediation plan would be initiated.

In the event of difficulties or concerns with any aspect of the residency program, residents are encouraged to contact their supervisors to determine an appropriate plan to resolve the issue. Should the supervisor be unable to resolve the issue, the resident may contact the Director of Training, or the Professional Practice Leader. Should the issue be related to matters involving the training director or professional practice lead, the resident may approach the other Clinical Directors.

Residents will have the opportunity to discuss and appeal any decisions made by the Director of Training related to these matters.

Accreditation

The CBT Associates Clinical Residency Program is a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC - Program Member Code #1870). Our National Matching Service (NMS) match number is # 187011. We are also a member of The Canadian Council of Professional Psychology Programs. The Residency Program is not currently accredited by the Canadian Psychological Association (CPA). We anticipate applying for accreditation during the 2018-2019 academic year.

Stipend

For the full Academic year, full time Residents will receive a stipend that will consist of \$35,000, paid in biweekly installments. Full time Residents will also receive a conference attendance allowance of \$1,000, and will be provided with \$500 to purchase relevant training manuals. Client billing, or number of clients seen, have no effect on resident compensation or evaluation.

Residents will receive 15 working days of vacation and 5 business days to attend conferences, defend their dissertation or attend job interviews. Specific dates will be determined between the Resident, supervisor and Director of Clinical Training.

Application Process

Qualifications

All candidates must be enrolled in a CPA or APA accredited Clinical Psychology Doctoral program, and have completed some CBT coursework prior to application submission. Three Resident positions are currently available.

Prior to commencing the Residency, Residents must have completed all requirements of their doctoral program, excluding the completing of their dissertation. A minimum of 600 practicum hours, including at least 300 direct client contact hours (i.e. assessment and/or group and individual treatment), will also be required. Practicum experience with diverse clinical populations, and treatment using CBT, are preferred.

Applicants will be required to provide a cover letter, along with their application, outlining their training goals for the Clinical Residency, including two to three supervisors of interest. The cover letter should also describe their interest in working at CBT Associates, the rationale behind their didactic and practicum training experiences, as well as how these experiences will prepare them for the Clinical Residency Program. Applications will be submitted electronically through the APPIC online application system (see below), and will be reviewed by supervisors at CBT Associates. Top rank-ordered applicants will be offered an interview, either by phone or in person, depending on Resident and Supervisor availability.

CBT Associates is committed to offering equal opportunity employment and encourages applications from all qualified individuals regardless of race, religion, cultural or ethnic background, gender, sexual preference, and disability. The program will make all efforts to ensure program access to those with disabilities by ensuring the accessibility of the physical site and by making further necessary accommodations on a case-by-case basis through liaison with the Director of Training and Professional Practice Leader.

Applications:

The deadline for receipt of applications is November 1, 2017.

Applicants must register for the Residency Match, using the online registration system on the Match website: <http://www.natmatch.com/psychint>

Applications are to be submitted using the AAPI Online Centralized Application Service. Please do not mail any printed documents to CBT Associates. The AAPI Online may be accessed at <http://www.appic.org> by clicking on “AAPI Online.”

Applications for the CBT Associates Clinical Psychology Residency should include:

- (1) APPI Online Application
- (2) Cover Letter
- (3) Graduate Transcripts
- (4) Curriculum Vitae, including educational background, clinical experience, research experience, administrative experience, publications and presentations, awards and scholarships, and relevant workshops and seminars taken.
- (5) Three letters of reference, including from one individual familiar with the applicant’s research skills, and another individual familiar with the applicant’s clinical skills. Referees must use the APPIC Standardized Reference Form (SRF). Please ensure that you have informed your referees about this requirement.
- (6) Supplemental Material: A case conceptualization of an assessment and treatment of a client. This should include the presenting problem, relevant background information, psychodiagnostic and/or psychometric testing, CBT case conceptualization, and treatment progress, including specific interventions.

The interview notification date will be December 1, 2017. Interviews will take place between January 15 and 26, 2018.

Questions regarding the Clinical Residency Program or Application Process should be directed (preferably by email) to:

CBT Associates Clinical Residency Program Office

Tel: 289-317-1769

Email: residency@cbtassociates.com

Contact for Director of training:

Noah Lazar, Ph.D., C.Psych

Director of Training

CBT Associates

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For more information about CBT Associates: cbtassociates.com

Clinical Supervisors

Dr. Rixi Abrahamsohn, Ph.D., C. Psych.

Available to supervise Residents in Adult Mental Health Rotation

Dr. Rixi Abrahamsohn received her PhD in psychology from the Ontario Institute for Studies in Education at the University of Toronto. She completed her predoctoral residency training at the Centre for Addiction and Mental Health (CAMH) in the Mood and Anxiety Program. Her areas of interest and expertise include diagnostic assessment and the treatment of mood and anxiety disorders. Dr. Abrahamsohn has extensive experience providing cognitive behavioural therapy (CBT) in a variety of inpatient and outpatient settings.

At CBT Associates, Dr. Abrahamsohn provides individual treatment for adults with social phobia, panic disorder, generalized anxiety disorder, obsessive-compulsive disorder, post-traumatic stress disorder, depression, and interpersonal and relationship issues. She is a member of the College of Psychologists of Ontario, Canadian Association of Cognitive Behavioural Therapies (CACBT) and the Ontario Psychological Association. Dr. Abrahamsohn is also CACBT-ACTCC Certified in Cognitive Behavioural Therapy.

Dr. Khush Amaria, Ph.D., C. Psych.

Interim Director of the Child and Adolescent Program

Available to supervise Residents in both Rotations (Adult Mental Health and Child/Adolescent Mental Health Rotations)

Dr. Khush Amaria received her PhD in Clinical Psychology from the University of Waterloo and completed her predoctoral internship training at Toronto's Hospital for Sick Children (SickKids). Following her internship, Dr. Amaria completed a two-year specialized clinical research health psychology postdoctoral fellowship, followed by a one-year Research Associate position with SickKids' Chronic Pain Program. In her current role at SickKids, Dr. Amaria serves as the team lead for the Good 2 Go Transition Program, working to build evidence-based practices that support the transition and empowerment of youth. This role includes leading Adolescent Medicine's Transition Clinic, an outpatient program that provides treatment and support for adolescents struggling with transitions issues.

As part of her interest in community outreach, Dr. Amaria is involved in supporting parents, educators and caregivers on a variety of topics related to general child and adolescent development, mental health in children and youth, social skills and risk-taking behaviours in adolescence. She has been invited to teach workshops on cognitive behavioural therapy (CBT) for children, adolescents and adults to mental health care providers across Ontario.

At CBT Associates, Dr. Amaria provides treatment for children, adolescents, and adults with anxiety disorders, depression, adjustment difficulties, parent-child relational difficulties, and other coping-related problems. Dr. Amaria is a member of the College of Psychologists of Ontario, Canadian Association of Cognitive and Behavioural Therapies (CACBT-ACTCC) and the Ontario Psychological Association. She is credentialed as a CACBT-ACTCC Certified Cognitive Behavioural Therapist.

Dr. Janine Cutler, Ph.D., C. Psych.

Available to supervise Residents in Adult Mental Health Rotation

Dr. Janine Cutler graduated in 1994 with a PhD in clinical psychology from the University of Manitoba. Dr. Cutler works with adults and provides individual, couples and group therapy. She has been providing clinical services in a private practice setting since 1988. For the past 20 years, she has specialized in the areas of clinical and forensic psychology.

While residing in Manitoba, Dr. Cutler worked as a Program Manager at the Canadian Mental Health Association, prior to working at Stony Mountain Institution as the Mental Health Psychologist and then the Senior/Chief Psychologist. Subsequent to leaving Stony Mountain Institute, Dr. Cutler worked full-time in a private practice clinic. After moving to Ontario in 2006, Dr. Cutler worked at Whitby Mental Health Centre prior to taking the position of Chief of Psychology at the Ontario Correctional Institute, which is a treatment facility. She then became the Senior/Chief Psychologist at Grand Valley Institution for Women and returned to full-time work within a private practice setting in 2010.

Dr. Cutler has expertise in conducting psychological, medical-legal, and psychological risk assessments. She also has experience and an interest in the treatment of anxiety and mood disorders; personality disorders; physical, emotional and sexual abuse; post-traumatic stress; loss and grief; relationship issues; domestic violence; anger and emotion management; stress management; mindfulness; work-related issues and substance use. Dr. Cutler has widely used cognitive behavioural therapy (CBT) within the mental health and correctional systems and in private practice. She also has training

in dialectical behavioural therapy (DBT) and has been trained to provide workshops and training in the area of compassion fatigue and vicarious trauma.

Dr. Cutler is a member of the College of Psychologists of Ontario, the Ontario Psychological Association, the Canadian Psychological Association, the Canadian Association of Cognitive and Behaviour Therapies, the Canadian Register of Health Service Providers in Psychology, and the Association of State and Provincial Psychology Boards: ASPPB Mobility Program.

Dr. Megan Davidson, Ph.D., C. Psych.

Available to supervise Residents in Adult Mental Health Rotation

Dr. Megan Davidson received her PhD in Clinical Psychology from Queen's University. She completed her predoctoral training at the Centre for Addiction and Mental Health (CAMH) in the Mood and Anxiety Program and the Eating Disorder and Addiction Program. Dr. Davidson has extensive experience providing cognitive behavioural therapy (CBT) in a variety of outpatient and inpatient settings, and she has conducted research on the psychological influences on health, illness, chronic pain, and responses to those states.

At CBT Associates, Dr. Davidson specializes in treating adults, focusing primarily on depression, anxiety, eating disorders, and post-traumatic stress disorder. Dr. Davidson is a member of the College of Psychologists of Ontario, the Association for Behavioral and Cognitive Therapies, the Academy for Eating Disorders, and the Ontario Psychological Association.

Dr. Eilenna Denisoff, Ph.D., C.Psych., Clinical Director, Professional Practice Leader

Available to supervise Residents in Adult Mental Health Rotation

Dr. Denisoff became interested in Clinical Psychology while working as a registered nurse in medical and psychiatric units. She recognized the importance of the scientific study of human behaviour and thoughts and decided to pursue her PhD in clinical psychology. She studied at York University, where she was trained in the scientist-practitioner model emphasizing a foundation of research and scientific practice.

Dr. Denisoff has worked as a clinician, researcher, administrator, and educator in a wide variety of inpatient and outpatient settings. Work and teaching settings have included The Clarke Institute of Psychiatry, York University, The Toronto General Hospital, Mount Sinai Hospital, Whitby Mental Health Centre, and the Anxiety Clinic and Psychological Trauma Programs at the Centre for Addiction and Mental Health (CAMH),

where she held a university appointment with the Department of Psychiatry at the University of Toronto. Her research interests focus on understanding cognitive factors in anxiety disorders, especially obsessive-compulsive disorder.

Dr. Denisoff is passionate about providing evidence-based treatment for her clients. She believes in maintaining the highest standards of care by keeping up-to-date on the latest research and best practices in clinical psychology. While continuing to maintain a busy clinical practice, she supervises graduate students in clinical psychology, teaches training workshops locally and internationally, and educates the public about psychology. Dr. Denisoff was awarded the Ontario Psychological Association public education award for 2015 for her efforts.

At CBT Associates, Dr. Denisoff provides cognitive behavioural therapy (CBT) for adults with anxiety disorders, obsessive-compulsive disorder, depression, other mood disorders, and related problems. She also conducts CBT training workshops. Dr. Denisoff is a member of the College of Psychologists of Ontario, the Academy of Cognitive Therapy, the Association for Behavioral and Cognitive Therapies, the International Association for Cognitive Psychotherapy, the Canadian Psychological Association, the Ontario Psychological Association, and the Anxiety Disorders Association of America. She is also President of the Canadian Association of Cognitive Behavioural Therapy.

Dr. Peter Farvolden, Ph.D., C.Psych., Clinical Director
Available to supervise Residents in both Rotations (Adults Mental Health and Child/Adolescent Mental Health Rotations)

Dr. Farvolden became interested in Clinical Psychology when he worked as a Child and Youth Worker at a Residential Treatment Centre for Children and Adolescents. He was impressed enough by the transformative power of talk therapy to pursue a PhD in Clinical Psychology from the University of Waterloo, where he received his initial training in the scientist-practitioner model and evidence-based treatment.

Dr. Farvolden has worked as a researcher, clinician and administrator in a wide variety of inpatient and outpatient settings, including the Hamilton Health Sciences Centre, The University Health Network, and the Centre for Addiction and Mental Health (CAMH). He holds university appointments in the Department of Psychiatry at the University of Toronto and the Departments of Psychology at the University of Waterloo and Ryerson University. In his research, he has focused on basic processes in personality and psychopathology as well as the pharmacological and psychological treatment of mood and anxiety disorders.

As a scientist-practitioner, his clinical practice is guided by the best evidence provided by current research on what works best for whom. He is passionate about delivering sensitive, compassionate, informed and effective treatment and believes that great things happen when we strive to integrate the best research and evidence with our clinical expertise and our clients' values. Dr. Farvolden believes strongly that people receive the best care in the context of a large team of like-minded professionals who hold each other to the highest standards.

At CBT Associates, Dr. Farvolden provides cognitive behavioural therapy (CBT) for children, adolescents, and adults with anxiety disorders, depression, and stress-related problems. He provides supervision to psychologists during their supervised practice year with the College of Psychologists of Ontario and peer consultation to his colleagues at CBT Associates. He gives inspired talks to a variety of audiences, including communities, professionals, and employers. He is a member of the College of Psychologists of Ontario, the Association for Behavioral and Cognitive Therapies, the Anxiety Disorders Association of America, the Canadian Psychological Association, the Canadian Association of Cognitive Behavioural Therapy, and the Ontario Psychological Association.

Dr. Nancy Kocovski, Ph.D., C. Psych.

Available to supervise Residents in Adult Mental Health Rotation

Dr. Nancy Kocovski received her PhD in Clinical Psychology from York University and completed her clinical internship and postdoctoral training at the Centre for Addiction and Mental Health (CAMH). She is an Associate Professor in the Department of Psychology at Wilfrid Laurier University, where she maintains an active research program focused on social anxiety, cognitive behavioural therapy (CBT), and mindfulness- and acceptance-based treatments.

At CBT Associates, Dr. Kocovski treats adults with anxiety disorders, depression, and related problems. She is a member of the College of Psychologists of Ontario, the Association for Behavioral and Cognitive Therapies, the Canadian Psychological Association, the American Psychological Association, and the Association for Contextual Behavioral Science.

Dr. Noah Lazar, Ph.D., C.Psych., Clinical Director, Director of Training

Available to supervise Residents in Adult Mental Health Rotation

Dr. Lazar offers assessment and cognitive behavioural therapy (CBT) for a wide range of difficulties, including schizophrenia and psychosis, depression, and anxiety, with particular interests in generalized anxiety disorder, obsessive compulsive disorder,

panic disorder, agoraphobia and social anxiety disorder. Dr Lazar also has experience working with individuals who are dealing with chronic pain and relationship issues. He also works extensively with clients in preparation to return to work after sustaining a disability, as well as with the LGBTQ community. He is certified by the Canadian Association of Cognitive Behavioural Therapies (CACBT/ACTCC in Quebec) in cognitive behavioural therapy.

Dr. Lazar completed his PhD in clinical psychology at the University of Western Ontario. He completed his clinical residency at St. Joseph's Healthcare, Hamilton, in their Mood Disorders Clinic, Neuropsychology Service, and their Schizophrenia and Severe Mental Illness Clinic. He also worked in numerous inpatient and outpatient psychiatric clinics before beginning work full-time in private practice at CBT Associates of Toronto.

Dr. Lazar frequently teaches CBT workshops, and is an Adjunct Professor and the Cognitive Behavioural Therapy Certificate Program Director at the Ontario Institute for Studies in Education (OISE) at the University of Toronto. He is also a member of the College of Psychologists of Ontario, the Canadian Psychological Association (CPA), the Ontario Psychological Association (OPA), and the Canadian Association of Cognitive and Behavioural Therapies (CACBT).

Dr. Ragne Pajo, Ph.D., C.Psych.

Available to supervise Residents in both Rotations (Adults Mental Health and Child/Adolescent Mental Health Rotations)

Dr. Ragne Pajo is a Clinical Psychologist who enjoys working with clients of all ages and various concerns, such as anxiety, depression, stress management, relational problems, adjustment, trauma, parenting strategies, and family dynamics.

Dr. Pajo received her Psy.D. from the University of Hartford in Connecticut, USA and is registered with the College of Psychologists of Ontario. She spent the last eight years working at the Clifford Beers Clinic in New Haven, Connecticut, providing outpatient therapy for children, adolescents, and families. She specialized in trauma and crisis-related assessment and intervention, in addition to treating mood and behaviour related concerns. Dr. Pajo also managed the psychology training program and supervised interns.

Other experiences include individual and group work with adults, specializing in the areas of health psychology and eating disorders. In addition, Dr. Pajo has been trained in evidence based treatments, including Modular Approach to Therapy for Children with Anxiety, Depression, Trauma, or Conduct Problems (MATCH-ADTC) at Harvard University and Trauma Focused Cognitive Behavioural Therapy (TFCBT) at Yale University.

Dr. Pajo uses various CBT interventions and believes in tailoring treatment to each person's individual circumstances. She is a clinical thinker, who likes to take a collaborative approach with her clients.

Dr. Daniel Peluso, Ph.D., C.Psych., Clinical Director
Available to supervise Residents in Adult Mental Health Rotation

Dr. Daniel Peluso received his PhD in Clinical Psychology from the University of Regina and completed his residency at the Royal Ottawa Hospital. He has experience providing cognitive behavioural therapy (CBT), and related therapies (mindfulness, DBT) in a range of outpatient settings, including mental health hospitals, rehabilitation/pain programs, and Operational Stress Injury Clinics with Veterans.

Dr. Peluso has published book chapters and scientific papers in the areas of anxiety, pain, and trauma. He is also actively involved in supervising other professionals in providing CBT.

At CBT Associates, his practice focuses on assessment and treatment of adults with post-traumatic stress disorder (PTSD) and trauma-related disorders, anxiety and mood disorders, pain and illness-related disorders, and interpersonal difficulties. Dr. Peluso is a member of the College of Psychologists of Ontario and the Ontario Psychological Association.

About Toronto



Toronto is Canada's largest city and home to one of the most culturally diverse populations, consisting of over 2.8 million people. The city is a jewel on the shore of Lake Ontario. It is sometimes referred to as the "New York City of Canada" because of the range of activities, entertainment, diversity and environment.

Toronto has a variety of exciting places and events to see. The variety of museums, such as the Royal Ontario Museum, the Art Gallery of Ontario, and the Ontario Science Centre can fill a day with fun and adventure.

One of the most well-known structures in the world that graces Toronto's skyline is the CN Tower. It measures a height of 553.33 meters and is known as "Canada's National Tower". With its glass floor and revolving restaurant at the top, it offers spectacular views of the city. Situated next to the CN Tower is one of the most dynamic entertainment centers in the world – Rogers Centre, home to the Toronto Blue Jays. The Rogers Centre hosts over 200 events yearly and is known for its retractable roof. In addition, Toronto has many parks and beautiful beaches that can provide a peaceful escape from the city life. Less than two hours away is Niagara Falls and the American Border, for weekend road trips.