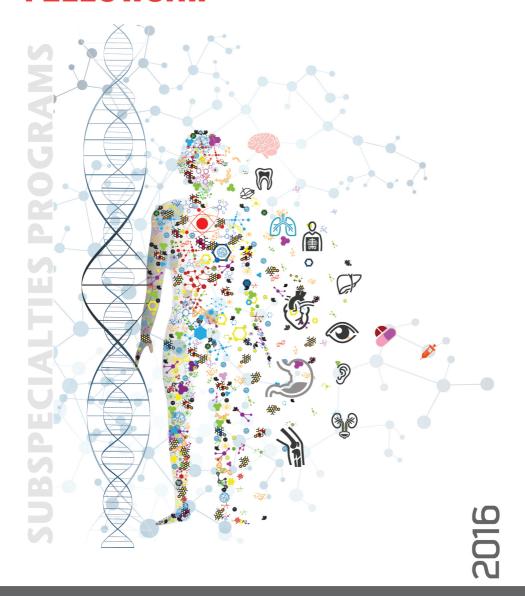


# CHILD AND ADOLESCENT PSYCHIATRY FELLOWSHIP







#### **SAUDI FELLOWSHIP**

#### CHILD AND ADOLESCENT PSYCHIATRY CURRICULUM

Preparation					
Curriculum Scientific Group					
	Prof. Fatima Alhaidar Prof. Mohammad Ghaziuddin Dr. Turki Albatti				
Resid	dent Representative				
	Dr. Afnan Almarshedi				
	Supervision				
Curriculum Specialist					
	Dr. Zubair Amin				
	Dr. Sami Alshamarri				
Revie	ewed and Approved				
Scientific Council					
Dr. Fahad D. AlOsaimi	Dr. Dakhel A. AlSaedi				
Dr. Moosa A. AlZalah	Dr. Fahad K. AlWahabi				
Dr. Osama A. AlEbrahem	Dr. Ahmad M. AlSaleh				
Dr. Saleh H. AlMohamadi	Dr. Mahdi S. Abomdeni				
Dr. Sultan M. AlShahrani	Dr. Husain A. AlHomaid				
	Dr. Yasser A. AlDabagh				

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#### Correspondence:

Saudi Commission for Health Specialties

P.O. Box: 94656 Postal Code: 11614

Contact Center: 920019393

E-mail: <a href="mailto:systemadmin@scfhs.org">systemadmin@scfhs.org</a>
Website: <a href="mailto:www.scfhs.org.sa">www.scfhs.org.sa</a>

#### Formatted and Designed by:

Salem M Altamimi (SCFHS)/Manoj Thomas Varghese, CMT (SCFHS)

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#### **ACKNOWLEDGEMENTS**

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The Child and Adolescent Psychiatry Fellowship team acknowledges the valuable contributions and feedback from the scientific committee members in the development of this program. We extend special appreciation and gratitude to all the members who have been pivotal in the completion of this booklet, especially the Scientific Council, Curriculum Group, and the Curriculum Specialists. We would also like to acknowledge that the CanMEDS framework is a copyright of the Royal College of Physicians and Surgeons of Canada, and many of the descriptions and Child And Adolescent Psychiatry competencies have been acquired from their resources.

#### INTRODUCTION

Child and adolescent psychiatry is defined as a branch of medicine and a subspecialty of psychiatry that deals with the diagnosis, treatment, and prevention of mental disorders in children and adolescents from birth to 18 years.

Studies suggest that up to 20% of children suffer from serious mental disorders that result in functional impairment. Complications include social deficit, academic problems, truancy, legal problems, suicide and suicidal behavior, substance abuse, and so on. Moreover, families have to endure financial and emotional difficulties associated with these conditions. Early diagnosis and treatment of these conditions is critical to abating the needs of the individuals, their families, and the community at large. Therefore, there is an urgent need for qualified personnel to treat the affected children and address the needs of the family.

Although behavioral and emotional problems in children have been recorded for centuries, the discipline of child psychiatry began with the child guidance clinics of the 1920s. The first textbook on child psychiatry was published in 1945. The discipline has witnessed remarkable growth in the US and Europe in the last 50 years, despite a persistent shortage of qualified child psychiatrists all over the world. The situation is particularly serious in developing countries such as Saudi Arabia. In Saudi Arabia, mental health services for children and adolescents are delivered in specialized and general governmental hospitals, university hospitals, children and maternity hospitals and private clinics. Services are delivered primarily though outpatient clinics. At the time of this writing, there are an estimated 25 child psychiatry clinics all over the kingdom. No inpatient facilities are available except for adolescents with addictions, who are admitted into adult inpatient care. No daycare or community-based facilities are available except for children with intellectual disabilities or autistic spectrum disorders.

In terms of support for child and adolescent mental health, 15% of primary and secondary schools have either part-time or full-time school counselors, and many schools (between 51% and 80%) have activities to promote mental health and prevent mental disorders. With regard to continuing education in mental health, 19% of psychiatrists working in Saudi Arabia have taken a course in child mental health. Among psychiatric nurses, only 1% have had training in child mental health. As of the time of this writing, there is no database on child and adolescent psychopathology in KSA. However, the most reported psychiatric diagnoses in children include attention deficit hyperactivity disorder (ADHD), anxiety disorders, autistic spectrum disorders, depressive disorders, school refusal comorbid with emotional and behavioral disturbance, and intellectual disability comorbid with many psychiatric disorders.

The most reported psychiatric disorders among adolescents include anxiety disorder, behavioral disorders, depressive disorders, bipolar affective disorder, eating disorders and substance abuse disorders. Most admitted adolescents present with bipolar affective disorders, schizophrenia, eating disorders, and substance abuse—primarily amphetamine and cannabis.

In Saudi Arabia, those who are 12 years and younger are considered children and those who are between 12 and 18 are considered adolescents.

### **CHILDREN'S HIGH PRIORITY CONDITIONS**

Outpatient Department(OPD)	Consultation/Liaison	Accident/Emergency
Attention Deficit Hyperactivity Disorder	Child abuse	Child Abuse
Autism Spectrum Disorders	Post-traumatic stress disorder (PTSD)	PTSD
Communication Disorders	Adjustment Disorders	Non-Specific Aggression
Intellectual Disabilities	Delirium	Panic Disorder
Learning Disorders	Elimination Disorders	Acute Stress Disorder
Depressive Disorders	Depressive Disorders	Depressive Disorders
Bipolar Disorders	Motor Disorders	Selective Mutism
Obsessive Compulsive Disorder	Obsessive Compulsive Disorder	Medication-Induced Movement Disorders and other Adverse Effects of Medication and Overdose
Anxiety Disorders	Catatonic Disorder Due to Another Medical Condition	Catatonia Associated with Another Mental Disorder
Psychotic Disorders	Psychotic Disorders	Psychotic Disorders

### ADOLESCENT'S HIGH PRIORITY CONDITIONS

OPD	Consultation/Liaison	Accident /Emergency
Depressive Disorders	PTSD	PTSD
Obsessive Compulsive Disorder	Obsessive Compulsive Disorder	Obsessive compulsive disorder
Eating Disorders	Eating Disorders	Eating disorders
Psychotic Disorders	Psychotic Disorders	Psychotic disorders
Anxiety Disorders	Suicide Behavior Disorder	Suicide behavior disorder
Substance-Related and Addictive Disorders	Substance-Related and Addictive Disorders	Substance-related and addictive disorders
Gender Dysphoria	Adolescent Abuse	Catatonia associated with another mental disorder
Adolescent-Parent Relational Disorder	Conversion Disorder	Medication-induced movement disorders and other adverse effects of medication
Bipolar Disorder	Psychological Factors Affecting Other Medical Conditions	Non-Suicidal Self-Injury
Disruptive, Impulse- Control, and Conduct Disorders	Mental Disorder Due to Another Medical Condition	Severe aggression
Attention Deficit Hyperactivity Disorder	Delirium	Delirium

#### ADOLESCENT HIGH PRIORITY CONDITIONS

KSA has a relatively young population with a mean age of 26 years, compared to 28 for the world overall and 37 in the US. The 2010 statistical census recorded the population t 28 million, with more than half of the population under the age of 18. That means that only 14 certified Saudi child and adolescent psychiatrists serve a target population of 14 million youngsters.

With societal changes placing an enormous burden on families, there is an urgent need for trained child and adolescent psychiatrists. Most Saudi psychiatrists who wish to obtain fellowship training in child and adolescent psychiatry go to Western countries, primarily Canada and the US. However, obtaining a position in other countries has become increasingly difficult, indicating the need to establish a comprehensive training program in Saudi Arabia that takes into account the social and cultural context of the country.

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#### HOSPITAL ACCREDITATION

- 1. A center should have at least 2 qualified, certified child and adolescent consultant psychiatrists who have graduated from a recognized training program.
- 2. Alternatively, the consultant psychiatrist should have:
  - One year of formal training in child and adolescent psychiatry in a recognized center in addition to a minimum of five years of experience in an established child and adolescent psychiatric services.

OF

- Ten years' experience in an established child and adolescent psychiatric services.
- 3. The accreditation criteria may be revised every four years or as needed.

### **ADMISSION REQUIREMENTS**

To be admitted to the program, a candidate must have:

- 1. Successfully completed an accredited training program in general psychiatry.
- 2. Successfully passed the final general psychiatry written exam.
- 3. Passed an interview conducted by the scientific committee.
- Obtained three letters of recommendation from consultants with whom the candidate has recently worked.
- 5. Provided written permission from a sponsor, allowing the candidate to work full time basis for the duration of the training program.

#### **OVERVIEW OF CURRICULUM MAP**

Voor	Content and Sequence of Rotations											
Year		Number of Blocks										
	1	1 2 3 4 5 6 7 8 9 10 11 12						12				
First Wasse	General Child and Adolescent Liaison Consultation and Psychiatry Psychosomatics  at Year  Advanced Areas of Focus:											
First Year												
		ŀ	Health	Care D	elivery	, Educa	ation, f	Resear	ch, Psy	chothera	ру	
	1	2	3	4	5	6	7	8	9	10	11	12
Second	Subspecialized Child and Adolescent Psychiatry Electives  Advanced Areas of Focus:											
Year Fellowship												
		H	lealth	Care D	elivery	, Educa	ation, F	Resear	ch, Psy	chothera	ру	

#### Notes

- 1. Research and Psychotherapy allocated to 1 day per week.
- 2. Education and Health Care Delivery throughout.
- 3. Each block is equivalent to 4 weeks.
- 4. Fellows have an annual vacation of 4 weeks, which can be taken during any rotation without negatively affecting training.

#### CHILD AND ADOLESCENT PSYCHIATRY COMPETENCIES

Medical educators, trainees, patients, and society in general recognize that training in the scientific aspects of medicine is necessary but insufficient for effective medical practice. The Canadian Medical Education Directives for Specialists (CanMEDS) framework, which has been implemented in many postgraduate training programs around the world, offers a model for physician competence that emphasizes not only biomedical expertise but also multiple non-medical expert roles that aim to better serve society's needs.

The mission of the Saudi Commission for Health Specialties (SCFHS) includes providing "the highest possible standard and quality of medical care for the people of Saudi Arabia, [and] the goal of postgraduate medical education is to produce the best possible physicians to meet the healthcare needs of the society." Therefore, SCFHS is adopting the CanMEDS framework to set up the core curriculum of all training programs, including the fellowship program in child and adolescent psychiatry. Hence, a psychiatrist who has been qualified for certification will be competent in the seven CanMEDS roles: medical expert, communicator, collaborator, manager, health advocate, scholar, and professional.

Upon completion of subspecialty residency training, child and adolescent psychiatrists will have developed a range of specific competencies in multiple domains, described below.

Working knowledge:	Demonstrates core aspects of child and adolescent psychiatry such as basic interviewing, problem formulation, and treatment. Understands the scientific literature.
Proficient:	Demonstrates working knowledge in child and adolescent psychiatry enhanced by a developmental, cultural, and lifespan perspective, allowing detailed interviewing and comprehensive biopsychosocial problem formulation with the capacity to teach, consult, assess, and manage referrals. Can critically review and apply the scientific literature to all domains of child and adolescent psychiatry.
Advanced:	Possesses detailed and sophisticated multimodal, interdisciplinary understanding, enabling advanced teaching and consultation on complex referrals. Has detailed knowledge of, and is able to apply, the scientific literature, adapting and extrapolating as necessary.
Expert/Master:	Has undergone advanced training, leading to enhanced skills that enable management of patients with complex comorbidities, treatment resistance, or rare conditions. Has the capacity to critically review and contribute to the literature with enhanced expertise. This level of competency is mostly achieved following years of subspecialty practice.

Upon completion of training, a resident will have acquired the following competencies and effectively function as a:

#### 1. Medical Expert

**Definition:** As medical experts, child and adolescent psychiatrists embody all of the CanMEDS roles, applying medical knowledge, clinical skills, and professional attitudes in their provision of patient and family-centered care with children and adolescents—including aspects of cognitive and physical development, culture, and ethnicity—and in a number of settings—including inpatient/residential, outpatient, and the wider community. Medical expert is the central physician role in the CanMEDS framework.

#### Key and Enabling Competencies: Child and adolescent psychiatrists are able to:

- A. Function effectively as consultants, integrating all of the CanMEDS roles in order to provide optimal, ethical, patient/family-centered, and evidence-based medical care. This includes the ability to:
  - Perform a consultation, including the presentation of well-documented assessment, biopsychosocial formulation, and recommendations in written and/or verbal form in response to a request from another health care professional.
  - ii. Embody all CanMEDS competencies relevant to child and adolescent psychiatry
  - iii. Prioritize professional duties when faced with multiple patients and problems
  - iv. Provide compassionate patient and family-centered care
  - v. Recognize and respond to the ethical dimensions of child and adolescent psychiatric decision-making
  - vi. Identify and appropriately respond to relevant clinical issues arising in patient care, including awareness and understanding of:
    - a. Aggressive behaviors
    - b. Attachment disturbances
    - The burden of medical, surgical, and psychiatric illness upon children, adolescents, families, as well as healthcare, educational, and welfare systems
    - d. Culture and spiritual factors
    - e. Comorbidity—medical, psychiatric, developmental and substance abuse
    - f. End-of-life issues relating to children, adolescents, and their families
    - g. Ethics and law including boundary issues, capacity, competence, confidentiality, consent, and legal/forensic matters
    - h. Family issues including custody and parental mental illness
    - i. Long-term illness and rehabilitation
    - Policy in practice or development in the areas of education, health care, juvenile justice, and welfare as they relates to the mental health of children and adolescents
    - k. Psychiatric manifestations of common medical and neurological illnesses
    - Reactions and factors influencing those experienced by patients and their parents (or their substitutes) to the physician and other health professionals

- m. Reactions experienced personally when dealing with patients and their families, including reactions to suicidality, perceived hostility, depression, psychoses, unreasonable demands, and cognitive impairment in both patients and parents (or their substitutes)
- School issues including academic and social functioning as well as bullying and victimization
- o. Stigmatization
- p. Suicide, self-harm, or harm directed towards others
- q. Therapeutic alliance
- Trauma, abuse, and neglect and their impact on child and youth development
- vii. Demonstrate medical expertise in situations other than patient care, such as providing expert legal testimony or advising governments as needed

# B. Establish and maintain clinical knowledge, skills and attitudes appropriate to child and adolescent psychiatry

- i. Establish, apply, and maintain knowledge of the clinical, developmental, and basic sciences relevant to child and adolescent psychiatry at the level of the subspecialist. The level of competence in each area of knowledge, skill, and attitude must be at the designated level of proficiency for purposes of core competency in each of the following areas:
  - a. The etiology, epidemiology, diagnosis, course of illness, effective treatment, and clinical practice guidelines relevant to:
    - Anxiety disorders in children and adolescents (including obsessive compulsive disorder)
    - Attention deficit hyperactivity disorder
    - Disruptive behavior disorders (oppositional defiant disorder, conduct disorders)
    - Early-onset psychoses (including early-onset schizophrenia and early-onset bipolar disorder)
    - Mood disorders in children and adolescents
  - Child and adolescent psychiatrists will be proficient with regard to the following:
    - Etiology, epidemiology, diagnosis, course of illness, effective treatment, and clinical practice guidelines relevant to:
      - Adjustment disorders and relational problems, problems related to abuse or neglect, and conditions related to mental disorders that may require clinical attention
      - Autism spectrum disorders
      - Attachment disorders
      - Communication disorders
      - Delirium and other cognitive disorders
      - Developmental coordination disorder
      - Eating disorders
      - Elimination disorders

- Feeding and eating disorders in infancy or early childhood
- Intellectual disability
- Learning disorders
- Movement disorders other than Tourette's disorder
- Psychiatric disorders affecting and or secondary to medical conditions in children and adolescents
- Sexual and gender identity disorders
- Sleep disorders
- Somatoform disorders
- Substance-related disorders
- Tic disorders
- Basic principles of developmental psychopathology
- Psychiatric rehabilitation
- Psychotherapeutic constructs—including individual, family, and group
- Psychopharmacology as it applies to children and adolescents
- Referral patterns, community agencies, systems of mental healthcare, and delivery
- Forensic aspects
- Basic principles of the genetics of psychiatric disorders
- Basic neuroscience of psychiatric disorders in children and adolescents
- o Principles of public health relevant to child and adolescent psychiatry
- o Research methodology, critical appraisal, and medical statistics
- Complementary and alternative care in child and adolescent psychiatry
- ii. Apply lifelong learning skills of the scholar role to implement a personal program to keep up to date, and to enhance areas of professional competence
- iii. Contribute to the enhancement of quality care and patient safety in psychiatric practice, integrating the best available evidence and best practices
- Describe the CanMEDS framework of competencies relevant to Child and Adolescent Psychiatry

#### C. Perform relevant and appropriate assessments of patients

- Establish and maintain an effective therapeutic alliance with patients, including families when appropriate
- ii. Identify and explore issues to be addressed in a patient encounter effectively, including the context, preferences and confidentiality of a patient and the patient's family
- Perform an appropriate and accurate diagnostic individual and/or family interview for the purposes of evaluation, diagnosis, and treatment planning (including prevention and health promotion)
- Perform an appropriate and accurate mental status examination for the purposes of evaluation, diagnosis, and treatment planning (including prevention and health promotion)
- Perform a focused physical examination, including a focused neurological examination that is relevant and accurate for the purposes of evaluation, diagnosis, and treatment planning (including prevention and health promotion)

- vi. Demonstrate proficiency in selecting appropriate investigations in a resourceeffective and ethical manner, including:
  - Age-appropriate use of evidence-based emotional and behavioral questionnaires and self-report measures
  - b. Collateral information gathering
  - c. Medical investigation or consultation (including laboratory testing)
  - d. Psychological, neuropsychological, and psycho educational testing
  - e. Neuroimaging
- vii. Demonstrate proficiency in effective clinical problem solving and judgment to address patient problems, including interpreting available data and integrating information to generate a comprehensive assessment and treatment plan, including:
  - Appropriate differential diagnosis informed by current versions of the ICD and DSM diagnostic classification
  - Integrated case formulation that presents a relevant biopsychosocial understanding
  - Appropriate evaluation plan including relevant laboratory, imaging, medical, and psychological investigations, and collateral information
  - d. Comprehensive, evidence-based treatment plan implementing an integrated biopsychosocial approach

#### D. Use therapeutic interventions effectively

- Demonstrate advanced knowledge in implementing a management plan in collaboration with patients and their families, including:
  - Assessing risk and applying appropriate therapeutic interventions to minimize risk
  - b. Assessing suitability for and prescription of appropriate psychotherapeutic and psychopharmacological treatments
  - c. Addressing issues of primary, secondary and tertiary prevention as relevant
  - d. Facilitate therapeutic interventions by addressing patient and family education in a culturally sensitive manner
- Demonstrate advanced knowledge and skill in assessing suitability for psychopharmacological intervention and implementing a treatment plan with consideration for the specific issues relevant to children and adolescents
  - Patient/family education regarding evidence-based use of pharmacological interventions
  - b. Provision of full informed consent for patients and families including potential risks, benefits, and side effects medication
  - Appropriate dosage and monitoring of pharmacological interventions including appropriate age and weight dosage and laboratory monitoring as indicated
  - Recognition, monitoring, and understanding of the issues regarding medication compliance

- iii. Demonstrate advanced competency in assessing suitability, prescribing, and delivering at least one of the following psychotherapeutic interventions and proficiency in all others:
  - a. Behavioral treatments
  - b. Cognitive behavioral therapy
  - c. Crisis intervention
  - d. Family therapy
  - e. Group therapy with children and adolescents
  - f. Parental skill development
- iv. Demonstrate working knowledge and skill in assessing suitability, prescribing, and delivering the following psychotherapeutic interventions:
  - a. Psychodynamic psychotherapy with children and adolescents
  - b. Dialectic behavior therapy
  - c. Interpersonal therapies
  - d. Mindfulness training
  - e. Motivational interviewing
  - f. Relaxation therapy
  - g. Supportive therapy
- v. Demonstrate proficiency in assessing and managing treatment adherence
- vi. Ensure appropriate informed consent is obtained for therapies

#### E. Seek appropriate consultation from other health professionals

- i. Demonstrate insight into own limitations
- ii. Demonstrate effective, appropriate, and timely consultation with other health professionals as needed for optimal patient care
- iii. Arrange appropriate follow-up care services for patients and their families

#### 2. Communicator

**Definition:** As communicators, child and adolescent psychiatrists enable patient-centered diagnostic and therapeutic communications through shared decision making and effective, developmentally appropriate interactions with children, adolescents, parents or caregivers, families, other professionals, and relevant agencies or institutions. The competencies for this role are essential for establishing rapport and trust, formulating and conveying child and adolescent psychiatric diagnoses and information, understanding pertinent developmental issues, achieving mutual understanding, and facilitating a shared plan of psychiatric treatment and care for children and/or adolescents.

#### Key Enabling Competencies: Child and adolescent psychiatrists are able to:

- A. Develop rapport and trust, fostering ethically, therapeutically, culturally, and developmentally informed relationships with children, adolescents, their parents or caregivers, and families
  - Recognize that being a good communicator is a core clinical skill of child and adolescent psychiatrists, and that effective physician-patient communication can

foster patient satisfaction, physician satisfaction, adherence, and improved clinical outcomes.

- Ensure that physician-patient communication fosters child and adolescent patient satisfaction, is developmentally informed, and includes physician communication with parents/caregivers and families.
- b. Use expert verbal and non-verbal communication with children, adolescents, parents/caregivers and families.
- Convey tolerant and inclusive attitudes towards children, adolescents, parents/caregivers and families
- Establish positive therapeutic relationships with children, adolescents, and their parents, caregivers, and families reflective of understanding, trust, respect, honesty and empathy
- ii. Demonstrate respect for child and/or adolescent patient confidentiality, privacy and autonomy within the parental/caregiver and family context
- Listen effectively to children and/or adolescents within the parental/caregiver and family context
- Demonstrate awareness of and responsiveness to the non-verbal cues of children and/or adolescents within the parental/caregiver and family context
- Demonstrate awareness of and responsiveness to individual developmental needs across the range of child and adolescent psychiatric encounters, involving not only children, adolescents, but also their parents, caregivers, and families
- vi. Effectively facilitate a structured clinical encounter across a range of child and adolescent psychiatric encounters, involving children, adolescents, parents/caregivers, and families
- Accurately elicit and synthesize relevant information about and perspectives of children, adolescents, parents and caregivers, families, colleagues, and other professionals
  - Gather information about a psychiatric disorder and the associated beliefs, values expectations, developmental issues, and illness experience affecting the child, adolescent, parent or caregiver, and family
  - ii. Seek out information and consultation from other relevant sources
- C. Accurately convey evidence-based information and explanations to children, adolescents, parents/caregivers, families, colleagues, and other professionals
  - Deliver information to children, adolescents, parents/caregivers, families, colleagues, and other professionals in such a way that is humane, accessible, developmentally and culturally appropriate, and encourages discussion and participation in decision making
- D. Develop a common understanding on issues, problems, and plans with patients, families, and other professionals to develop a shared plan of care
  - Effectively identify and explore problems to be addressed in a patient encounter, including the patient's context, responses, concerns, and preferences

- ii. Respect diversity and individual differences, including but not limited to the impact of gender, religion, and cultural beliefs on decision-making
- iii. Encourage discussion, questions, and interaction
- iv. Engage patients, families, and relevant health professionals in a shared decisionmaking process to develop a plan of care
- Effectively address challenging communication issues, such as obtaining informed consent, delivering bad news, and addressing anger, confusion, or misunderstanding

# E. Effectively convey oral and written information about a child or adolescent psychiatric encounter

- Maintain clear, accurate, appropriate, and timely records (written or electronic) of clinical encounters and plans
- ii. Demonstrate the ability to present clear and relevant verbal reports of clinical encounters and plans

#### 3. Collaborator

**Definition:** As collaborators, child and adolescent psychiatrists effectively work within an inter-professional team to achieve optimal mental health care for children, adolescents, and their families

#### Key and Enabling Competencies: Child and adolescent psychiatrists are able to:

- A. Participate effectively and appropriately in an inter-professional health care team
  - Demonstrate proficiency in working in an inter-professional team, facilitating communication within the team, and collaborating respectfully in support of children and adolescents with mental health problems, as well as their families
  - ii. Help determine the roles and responsibilities of team members according to areas of expertise and training
  - iii. Describe the roles and responsibilities of child and adolescent psychiatrists to other professionals
  - Describe the roles and responsibilities of other professionals within the interprofessional team
  - v. Recognize and respect the diversity of roles, responsibilities, and competencies of other professionals in relation to their own
  - vi. Work with other team members to assess, plan, provide, and integrate care for children and adolescents with mental health problems, as well as their families
  - vii. Work with others collaboratively to assess, plan, provide, and evaluate other factors—such as education, research, and administration—as they pertain to child and adolescent mental health
  - viii. Actively participate in inter-professional team meetings
  - ix. Describe the principles of team dynamics
  - x. Respect team ethics, including confidentiality, resource allocation, and professionalism
  - xi. Demonstrate leadership within the health care team, as appropriate

- work with other health professionals to effectively negotiate and resolve interprofessional conflict
- B. Collaborate with community agencies, schools, and other professionals who work with children and adolescents with mental illness and their families
  - Demonstrate consistent and effective communication with primary care physicians to support, educate, and provide consultation
  - Identify appropriate community agencies, understand the role of various service providers, and facilitate regular communication to efficiently and effectively provide collaborative treatment planning and delivery
  - iii. Communicate with school personnel to obtain appropriate collateral information and develop a comprehensive evaluation and treatment plan to address mental health concerns recognizing illness impact on social and academic functioning.
  - iv. Demonstrate the ability to provide support, education, and consultation to school personnel and other non-traditional mental health providers as relevant to a comprehensive biopsychosocial treatment plan

#### 4. Manager

**Definition:** As managers, child and adolescent psychiatrists are integral participants in health care organizations—organizing sustainable practices, making decisions about allocating resources, and contributing to the effectiveness of the health care system.

#### Key and Enabling Competencies: Child and adolescent psychiatrists are able to:

- A. Participate in activities that contribute to the effectiveness of their health care organizations and systems
  - i. Work collaboratively with others in their organizations
  - Participate in systemic quality process evaluation and improvement including patient safety initiatives, audits, risk management, and occurrence and incident reporting
  - iii. Describe the structure and function of the health care system as it relates to their subspecialty, including the roles of child and adolescent psychiatrists and principles of health care financing

#### B. Develop skills to manage their practice and career effectively

- Set priorities and manage time to balance patient care, practice requirements, outside activities, personal life, and career goals
- ii. Implement processes to ensure personal practice improvement
- Employ information technology to enhance patient care and patient/family education

#### C. Allocate finite health care resources appropriately

 Recognize the importance of just allocation of health care resources, balancing effectiveness, efficiency, and access with optimal patient care Apply evidence-based practices and management processes for cost-appropriate care

#### D. Serve in administration and leadership roles, as appropriate

- i. Participate effectively in committees and meetings
- ii. Participate in activities such as increased collaboration with nontraditional mental health providers in order to implement changes in health care
- iii. Plan relevant elements of health care delivery (e.g., work schedules)

#### 5. Health Advocate

**Definition:** As health advocates, child and adolescent psychiatrists use their expertise and influence responsibly to advance the health and well-being of individual patients, communities, and populations.

#### Key and Enabling Competencies: Child and adolescent psychiatrists are able to:

- A. Respond to individual child and adolescent psychiatric health care needs and issues as part of patient care
  - i. Identify the mental health needs of the child or the adolescent
  - ii. Identify opportunities for advocacy, mental health promotion, and disease prevention with the individuals for whom they provide care, via:
    - a. Awareness of the major regional, national, and international advocacy groups in child and adolescent mental health care
    - b. Awareness of governance structures in child and adolescent mental health care and education
    - c. Awareness of legal issues in mental health care for children and adolescents

# B. Respond to the mental health needs of the communities that they serve, specifically with respect to the child and adolescent psychiatric patient population

- i. Describe the practice communities that they serve
- ii. Identify opportunities for mental health advocacy, health promotion, and disease prevention in the communities that they serve, and respond appropriately
- iii. Appreciate the possibility of competing interests between the communities served and other populations
- Advise organizations in early intervention and prevention of psychiatric illness in children and adolescents and promote the use of evidence-based practices

# C. Identify the social determinants of mental health for the child and adolescent psychiatric patient population

- Identify the social determinants of the mental health of the population, including barriers to accessing care and resources
- Identify vulnerable or marginalized populations including those affected by poverty, homelessness, and ethnicity, children already receiving care, and children of parents who have severe mental illness

# D. Promote the mental health of individual patients, communities, and populations regarding child and adolescent psychiatric issues

- Describe an approach to implementing change in a health determinant in the populations served
- ii. Describe how public policy impacts the health of the populations served
- iii. Identify points of influence in the health care system
- Describe ethical and professional issues inherent in health advocacy, including altruism, social justice, autonomy, integrity, and idealism
- Appreciate the possibility of inherent conflict between their roles managers/gatekeepers and their roles as health advocates for patients and communities
- vi. Describe the role of the medical profession in advocating collectively for health and patient safety

#### 6. Scholar

**Definition:** As scholars, child and adolescent psychiatrists demonstrate a lifelong commitment to reflective learning, as well as the creation, dissemination, application, and translation of knowledge of developmental psychopathology and other knowledge relevant to child and adolescent mental health.

#### Key and Enabling Competencies: Child and adolescent psychiatrists are able to:

- A. Maintain and enhance professional activities through ongoing learning
  - Demonstrate an understanding of and a commitment to the need for continuous learning
  - ii. Describe the principles of maintaining competence
  - Describe principles and strategies for implementing a personal knowledge management system
  - Recognize and reflect on learning issues in practice, particularly conflicts of interest
  - v. Conduct personal practice audits
  - vi. Pose appropriate learning questions
  - vii. Access and interpret relevant current evidence
  - viii. Integrate new learning into practice
  - ix. Evaluate the impact of any change in practice
  - x. Document the learning process

# B. Critically evaluate medical information and its sources, and appropriately apply them to practice decisions

- Describe the principles of critical appraisal for studies of etiology, diagnosis, outcome, and treatment, as well as systematic reviews and clinical practice guidelines
- ii. Develop and implement an ongoing and effective personal learning strategy in conjunction with analysis and evaluation of the relevant medical literature

- iii. Critically appraise medical information and integrate information from a variety of sources
- iv. Integrate critical appraisal conclusions into clinical care
- C. Facilitate the learning of children and adolescents and their families, as well as medical trainees, other health professionals and trainees, and the public
  - Teach the fundamentals of child and adolescent psychiatry to medical trainees and other allied health trainees
  - Describe the principles of learning and help others learn by collaboratively providing guidance and teaching, identifying learning needs, and providing constructive feedback
  - iii. Assess and reflect on teaching encounters
  - Develop the ability to present all topic areas in child and adolescent psychiatry in formal or informal educational settings
  - v. Describe the principles of ethics with respect to teaching
  - vi. Deliver an effective lecture or presentation

## D. Contribute to the development, dissemination, and translation of new medical knowledge and practices

- Describe the principles of research and scholarly inquiry, research methodology, and study design
- ii. Describe the principles of research ethics
- Exhibit working knowledge of and appreciation for the conduct of research in child and adolescent psychiatry
- iv. Demonstrate understanding of the contribution of basic and clinical sciences to child and adolescent psychiatry
- Pose scholarly questions, and perform and summarize a thorough literature review using a range of media, such as academic presentation, poster preparation, manuscript submission, or collection of new data
- vi. Demonstrate an understanding of the importance of research to all aspects of the practice of child and adolescent psychiatry

#### 7. Professional

**Definition:** As professionals, child and adolescent psychiatrists are committed to contributing to the health and well-being of individual children and adolescents and their families, as well as to the health of society as a whole, through ethical practice, profession-led regulation, and high personal standards of behavior.

Key and Enabling Competencies: Child and adolescent psychiatrists are able to:

A. Demonstrate a commitment to their child and adolescent patients and their families, as well as to their profession and to society through ethical practice

- Demonstrate awareness and application of ethical principles and processes relevant to the practice of medicine and psychiatry, and to child and adolescent psychiatry in particular
- Demonstrate awareness of the ethical principles governing research with child and adolescent subjects and relevant institutional governance and documentation related to these principles
- iii. Recognize gender, culture, poverty, mental and physical disability, sexual orientation, stigma, and access to resources as potential determinants of children's mental health, and approach these issues collaboratively and respectfully with patients and families
- iv. Recognize what constitutes a conflict of interest in the areas of practice, research, and education, and demonstrate an awareness of the appropriate steps to take to transparently address such conflicts if and when these occur
- Establish a treatment plan that is flexible, evidence-based where possible, practical, and sensitive to a patient and family's specific needs and consistent with the clinical practice guidelines of the profession
- vi. Endeavor to deliver the highest quality care to patients and their families with integrity, honesty, empathy, compassion, and respect for diversity
- vii. Demonstrate collaborative relationships with children and adolescent patients and their families, as well as with colleagues, which accommodate their gender and cultural and spiritual backgrounds; seek supervision and support in instances where collaboration may be threatened by issues related to capacity and resources
- B. Demonstrate a commitment to their child and adolescent patients and their families, as well as to their profession and to society through participation in profession-led regulation
  - Practice child and adolescent psychiatry in a manner that is ethically and legally consistent with the obligations of a physician and subspecialist
  - Demonstrate proficiency with regard to health care and other regulations, including but not restricted to: The Young Offenders Act and relevant provincial legislation pertaining to mental health, confidentiality, privacy, and child welfare
  - iii. Demonstrate awareness of the ethical and legal frameworks in which they train and practice—including the codes of conduct of professional and licensing bodies and all institutions to which they holds affiliations—and the relevant legal principles governing confidentiality, the rights of minors and guardians to receive or refuse treatment, assessment of capacity to consent to treatment, involuntary treatment, schooling regulations, and child protection; obtain and complete relevant legal documentation
  - iv. Commit to participation in a life-long process of self, peer, professional and institutional assessment to identify and correct lapses in professional behavior
  - v. Recognize and support other professionals in need where possible and respond appropriately to protect patient care where necessary
  - vi. Demonstrate the ability to receive and constructively apply feedback

- vii. Demonstrate the capacity to acknowledge personal failure to live up to ideal professional standards, to disclose medical errors promptly and transparently within an appropriate medical legal context, and to collaborate with peers, supervisors, and patients whenever possible to address these issues and avoid their repetition
- viii. Fulfill accountability standards to educational, institutional, and professional bodies
- ix. Participate in peer review, quality assurance activities, and evaluation of trainees and other professionals where required

#### C. Demonstrate a commitment to physician health and sustainable practice

- Maintain their health and balance personal and professional priorities in order to practice to the best of their abilities and in a sustainable manner; if unable to perform at an optimal level of practice, insure their patients are referred to appropriate services
- ii. Maintain appropriate relationships with patients, patients' families and colleagues under everyday and stressful circumstances
- iii. Demonstrate the ability to manage conflicting demands in a timely and respectful manner
- Recognize personal limitations which may interfere with professional practice and seek advice and assistance where necessary
- Exhibit responsibility, dependability, self-direction, and punctuality, recognizing that failure to do so may be considered an indicator of poor health and practice that requires attention

#### Reference:

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#### ROTATION-SPECIFIC GOALS AND OBJECTIVES

#### **Inpatient Rotation Educational Objectives**

For this rotation we will focus on 4 roles: medical expert, communicator, collaborator and manager.

#### **Medical Expert**

Functions effectively as an attending child and adolescent psychiatrist, performing accurate diagnostic assessments and creating comprehensive, evidence-based treatment plans for children and adolescents with psychiatric disorders in an inpatient psychiatric unit.

#### Communicator

Effectively communicates details of psychiatric assessments, including diagnoses, formulations, management, plans, and prognoses to children and adolescents, families, other clinicians, and learners.

#### Collaborator

Works in partnership with children and adolescents, families, allied professionals on the team, and professionals in the community to ensure the best possible care for the patients and their families.

#### Manager

Applies practice management principles; demonstrates ability to balance patient care with personal learning needs and activities.

### **Specific Inpatient Rotation Objectives**

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
Medical Expert	To function effectively as an attending child and adolescent psychiatrist, performing accurate diagnostic assessments and creating comprehensive, evidence-based treatment plans for children and adolescents with psychiatric disorders in an inpatient psychiatric unit	Performs comprehensive diagnostic interviews     Requests appropriate investigations, consultations, and collateral information     Develops biopsychosocial formulations     Develops comprehensive treatment plans     Appropriately prescribes and monitors psychiatric medications     Provides psychotherapeutic interventions     Assesses and manages high-risk behaviors     Provides psychoeducation     Demonstrates proficiency in managing comorbid medical issues     Demonstrates knowledge of epidemiology, etiology, diagnosis, and course of acute psychiatric illnesses in children and adolescents requiring inpatient stabilization	Attending psychiatrist's observation of resident performing specific medical expert role     Feedback and supervision sessions utilizing questions and issues raised during observations of clinical work     Tutorial series     Journal club	Mid-rotation review in written format     Evaluation of a formal diagnostic assessment performed in front of supervisor     End-of-rotation ITER with input from inpatient team
Communicator	To effectively communicate details of psychiatric assessments, including diagnoses, formulations, management plans, and prognoses to children and adolescents, families, other clinicians, and learners	Obtains and organizes detailed history and collateral information from the patient, families, clinicians involved in care, health records, and other sources     Obtains necessary consultations effectively	Attending psychiatrist's observation of resident interactions with feedback     Clinical teaching of other clinicians, including trainees	Mid-rotation review in written format ITER Formal observation of procedural skills (brief clinical encounter) Standard Assessment of a Clinical Encounter (STACER)

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
		Effectively conveys pertinent information and opinions to medical colleagues, allied health professionals, patients, and families     Prepares accurate and complete medical records in a timely manner     Establishes and maintains therapeutic rapport with children and families     Expertly uses nonverbal and verbal communication     Demonstrates respect for patient confidentiality, privacy, and autonomy     Ensures that communications and interactions are developmentally and culturally appropriate		
Collaborator	To work in partnership with children and adolescents, families, allied professionals on the team, and professionals in the community to ensure the best possible care for patients and their families	contribute positively to the care of patients	<ul> <li>Participation in a multidisciplinary inpatient team</li> <li>Attending psychiatrist's observation of resident interactions with feedback</li> </ul>	ITER     Multidisciplinary team feedback regarding communication with patients, families, and team members     Mid-rotation review in written format     Feedback from other learners

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
		<ul> <li>Facilitates learning for others, including patients, families, other clinicians, and students; demonstrates respect and willingness to teach and learn from other team members</li> </ul>		
Manager	To apply practice management principles, demonstrating the ability to balance patient care with personal learning needs and activities	Shows understanding of the cost of health care and practices effective use of resources Sets realistic priorities and uses time effectively to optimize professional performance Serves on administrative committees or working groups Uses information technology to optimize patient care and lifelong learning Demonstrates ability to effectively lead a multidisciplinary inpatient team	Observation with feedback by attending psychiatrist and other clinicians	Annual written exams     ITER     Mid-rotation review in written format     Multidisciplinary team feedback regarding managerial skills

#### Inpatient Rotation (Final Year Experience) Educational Objectives

For this rotation we will focus on 4 roles: medical expert, communicator, collaborator, and manager.

#### Medical Expert

Establishes and maintains theoretical and practical knowledge of the clinical development and basic sciences relevant to special expertise in inpatient child and adolescent psychiatry.

#### Communicator

Effectively communicates details of psychiatric assessments, including diagnoses, formulations, management, plans, and prognoses to children and adolescents, families, other clinicians, and learners.

#### Collaborator

Facilitates learning for others, including patients, families, other clinicians, and students. Demonstrates respect and willingness to teach and learn from other team members.

#### Manager

Applies practice management principles. Demonstrates the ability to balance patient care with personal learning needs and activities.

### **Specific Inpatient Rotation Final Year Experience Objectives**

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
Medical Expert	To establish and maintain theoretical and practical knowledge of the clinical, developmental, and basic sciences relevant to special areas of expertise in child and adolescent inpatient psychiatry	Performs     comprehensive     diagnostic     interviews,     formulations, and     treatment plans     Requests     appropriate     investigations,     consultations, and     collateral     information     Demonstrates     advanced knowledge     and skill in diagnosis-     specific screening     and symptom-     monitoring     instruments     Demonstrates     advanced knowledge     and skill in     prescribing and     monitoring     psychiatric     medications in     inpatient psychiatric     patients     Demonstrates     advanced knowledge     of the evidence-     based     psychotherapeutic     interventions in the     inpatient population	Attending psychiatrist's observation of resident performing specific medical expert role     Feedback and supervision sessions utilizing questions and issues raised during observations of clinical work     Tutorial series     Journal club	Mid-rotation review in written format     Evaluation of a formal diagnostic assessment performed in front of supervisor     (Structured Assessment of Clinical Encounter Form-STACER; not required)     End-of-rotation ITER with input from inpatient team

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
		<ul> <li>Provides psychotherapeutic interventions</li> <li>Assesses and manages high risk behaviors</li> <li>Provides psychoeducation</li> <li>Demonstrates proficiency in managing comorbid medical issues</li> <li>Demonstrates knowledge of epidemiology, etiology, diagnosis, and course of acute psychiatric</li> <li>illnesses in children and adolescents requiring inpatient stabilization</li> </ul>		
Communicator	To effectively communicate details of psychiatric assessments, including diagnoses, formulations, management plans, and prognoses to children and adolescents, families, other clinicians, and learners	Obtains and organizes detailed history and collateral information from the patients, families, clinicians involved in care, health records, and other sources     Effectively obtains necessary consultations     Effectively conveys pertinent information and opinions to medical colleagues, allied health professionals, patients, and families     Prepares accurate and complete medical records in a timely manner	Attending psychiatrist's observation of resident interactions with feedback     Clinical teaching of other clinicians, including trainees	Mid-rotation review in written format     ITER     Formal observation of procedural skills (brief clinical encounter)     STACER

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
		Establishes and maintains therapeutic rapport with children and families     Expertly uses nonverbal and verbal communication     Demonstrates respect for patient confidentiality, privacy and autonomy     Ensures that communications and interactions are develop-mentally and culturally appropriate		
	To work in partnership with children and adolescents, families, allied professionals on the team, and professionals in the community to ensure the best possible care for patients and their families	Includes family members as important members of the health care team Engages with allied health professionals that contribute positively to the care of patients	Participation in a multidisciplinary inpatient team     Attending psychiatrist's observation of resident interactions with feedback	ITER     Multidisciplinary team feedback regarding communication with patients, families and team members     Mid-rotation review in written format     Feedback from other learners
Collaborator		Competently functions in a shared care model with family doctors Participates in discharge planning, effectively networking with outpatient, residential, educational, and community services Facilitates learning of others including patients, families,		

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
		other clinicians, and students  • Demonstrates respect and willingness to teach and learn from other team members		
Manager	To apply practice management principles, demonstrating the ability to balance patient care with personal learning needs and activities	Shows understanding of the cost of health care and practices effective use of resources  Sets realistic priorities and uses time effectively to optimize professional performance  Serves administrative committees or working groups  Uses information technology to optimize patient care and life-long learning  Demonstrates the ability to lead a multidisciplinary inpatient team	Observation with feedback by attending psychiatrist and other clinicians	Annual written exams     ITER     Mid-rotation review in written format     Multidisciplinary team feedback regarding managerial skills

### **Specific Emergency And Urgent Care Clinic**

For this rotation, we will focus on 4 roles: medical expert, communicator, collaborator and manager.

CanMEDS Role	Learning Outcomes:	Specific Competencies	Instructional Method	Evaluation
Kole	Goals/Objectives	Competencies	Wethou	
Medical Expert	To function effectively as an attending child and adolescent psychiatrist, performing accurate diagnostic assessments and creating comprehensive, evidence-based treatment plans for children and adolescents with psychiatric emergencies	Performs     comprehensive     diagnostic     interviews     Requests     appropriate     investigations,     consultations, and     collateral     information     Develops     biopsychosocial     formulations     Develops     comprehensive     treatment plans     Appropriately     prescribes and     monitors     psychiatric     medications     Provides     psychotherapeutic     interventions     Assesses and     manages high-risk     behavior     Provides psychoeducation     Provides psychoeducation     Demonstrates     proficiency in     managing comorbid     medical issues     Demonstrates     knowledge of     epidemiology,     etiology, diagnosis,     and course of acute     psychiatric illnesses     in children with     psychiatric     emergencies	Attending psychiatrist's observation of resident performing specific medical expert role     Feedback and supervision sessions utilizing questions and issues raised during observations of clinical work     Tutorial series     Journal club	Formal review and feedback on a comprehensive diagnostic interview Feedback on comprehensive treatment and management plans (face-to-face) Mid-rotation review in written format Evaluation of a formal diagnostic assessment performed in front of supervisor (STACER Form not required) End-of-rotation ITER with input from inpatient team

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
Communicator	To effectively communicate details of psychiatric assessments, including diagnoses, formulations, management plans, and prognoses to children and adolescents, families, and other clinicians, including emergency room physicians, staff, and learners	Obtains and organizes detailed history and collateral information from the patient, families, clinicians involved in care, health records and other sources     Obtains necessary consultations effectively     Effectively conveys Pertinent information and opinions to medical colleagues, allied health professionals, patients and families     Prepares accurate and complete medical records in a timely way     Establishes and Maintains therapeutic rapport with Children and Families     Expertly uses Nonverbal and Verbal communication     Demonstrates respect for patient confidentiality, privacy and autonomy     Ensures that communications and interactions are developmentally and culturally appropriate	Attending psychiatrist's observation of resident interactions with feedback     Chart audits, including review of orders, notes, labs, other tests, and discharge summaries     Clinical teaching of other clinicians, including trainees     Tutorial series	Mid-rotation review in written format  ITER  Multidisciplinary team feedback regarding communication with patients, families, and team members  Formal observation of procedural skills (brief clinical encounter)  STACER

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
Collaborator	To work in partnership with children and adolescents, families, allied professionals on the team, and professionals to ensure the best possible care for patients and their families	Includes family members as important members of the health care team Engages with allied health professionals that contribute positively to the care of patients Consults effectively with other physicians and health care professionals Participates in discharge planning, effectively networking with outpatient, residential, educational, and community services Facilitates learning of others including patients, families, other clinicians, and students Demonstrates respect and willingness to teach and learn from other team members	Participation in multidisciplinary urgent care team     Attending psychiatrist's observation of resident interactions with feedback	Multidisciplinary team feedback regarding communication with patients, families, and team members     Mid-rotation review in written format     Feedback from other learners
Manager	To practice management principles, demonstrating the ability to balance patient care with personal learning needs and activities	Shows understanding of the cost of health care and practices effective use of resources	Observation with feedback by attending psychiatrist and other clinicians     Tutorial series	ITER     Mid-rotation review in written format     Multidisciplinary team feedback regarding managerial skills

# **ROTATION-SPECIFIC GOALS AND OBJECTIVES**

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
		Sets realistic priorities and uses time effectively to optimize professional performance Serves on administrative committees or working groups Uses information technology to optimize patient care and life-long learning Demonstrates the ability to effectively lead a multidisciplinary inpatient team		

# **Specific Emergency And Urgent Care Clinic Rotation (Final Year Experience) Objectives**

For this rotation, we will focus on 4 roles: medical expert, communicator, collaborator, and manager

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
Medical Expert	To establish and maintain theoretical and practical knowledge of the clinical, developmental, and basic sciences relevant to expertise of urgent and emergency care in child and adolescent psychiatry To function effectively as an attending child and adolescent psychiatrist, performing accurate diagnostic assessments and creating comprehensive, evidence-based treatment plans for children and adolescents with psychiatric emergencies	Performs comprehensive diagnostic interviews Possesses advanced knowledge and skill in diagnosis-specific screening and symptom- monitoring instruments Requests appropriate investigations, consultations, and collateral information Demonstrates advanced knowledge and skill in prescribing and monitoring psychiatric medications in emergencies for children and adolescents with psychiatric disorders Demonstrates advanced knowledge of evidence-based psychotherapeutic interventions in emergencies for children and adolescents with psychiatric disorders disorders  permonstrates advanced knowledge of evidence-based psychotherapeutic interventions in emergencies for children and adolescents with psychiatric disorders	Attending psychiatrist's observation of resident performing specific medical expert role     Feedback and supervision sessions utilizing questions and issues raised during observations of clinical work     Tutorial series     Journal club	Formal review and feedback on a comprehensive diagnostic interview Feedback on comprehensive treatment and management plans (face-to-face) Mid-rotation review in written format Evaluation of a formal diagnostic assessment performed in front of supervisor (STACER Form not required) End-of-rotation ITER with input from inpatient team

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
		Assesses and manages high-risk behaviors     Provides psychoeducation     Demonstrates proficiency in managing comorbid medical Issues     Demonstrates knowledge of epidemiology, etiology, diagnosis, and course of acute psychiatric illnesses in children and adolescents with psychiatric emergencies		
Communicator	To effectively communicate details of psychiatric assessments, including diagnoses, formulations, management plans, and prognoses to children and adolescents, families, and other clinicians, including emergency room physicians, staff, and learners	Obtains and organizes detailed history and collateral information from the patient, families, clinicians involved in care, health records and other sources Obtains necessary consultations effectively Effectively conveys Pertinent information and opinions to medical colleagues, allied health professionals, patients and families Prepares accurate and complete medical records in a timely way	Attending psychiatrist's observation of resident interactions with feedback     Chart audits, including a review of orders, notes, labs, other tests, and discharge summaries     Clinical teaching of other clinicians, including trainees     Tutorial series	Mid-rotation review in written format     ITER     Multidisciplinary team feedback regarding communication with patients, families, and team members     Formal observation of procedural skills (brief clinical encounter)     STACER

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
		Establishes and maintains therapeutic rapport with Children and Families     Expertly uses nonverbal and verbal communication     Demonstrates respect for Patient confidentiality, privacy and autonomy     Ensures that communications and interactions are developmentally appropriate		
Collaborator	To work in partnership with children and adolescents, families, allied professionals on the team, and professionals in the community to ensure the best possible care for patients and their families	Includes family members as important members of the health care team     Engages with allied health professionals that contribute	Participation in a multidisciplin ary urgent care team Attending psychiatrist's observation of resident interactions with feedback	ITER     Multidisciplinary team feedback regarding communication with patients, families, and team members     Mid-rotation review in written format     Feedback from other learners

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
		Demonstrates respect and willingness to teach and learn from other team members		
Manager	To apply practice management principles, demonstrating the ability to balance patient care with personal learning needs and activities	Understanding of the cost of health care and practices effective use of resources     Sets priorities and uses time effectively to optimize professional performance     Serves on committees or working groups     Uses technology to optimize patient care and lifelong learning     Demonstrates ability to lead multidisciplinary inpatient team	Observation with feedback by attending psychiatrist and other clinicians     Tutorial series	ITER Mid-rotation review in written format Multidisciplinary team feedback regarding managerial skills  Items of the second sec

# **Ambulatory Rotation Educational Objectives**

#### Medical Expert

Functions effectively as a consultant, performing efficient and comprehensive diagnostic assessments, and building broad, evidence-based treatment plans for children and adolescents with psychiatric disorder in outpatient, emergency, and consultation-liaison settings.

#### Communicator

Effectively communicates details of outpatient, emergency, and medical-surgical consultation psychiatric assessments to children and adolescents, families, other clinicians, and learners.

#### Collaborator

Works in partnership with children and adolescents, families, allied professionals on the team, and other physicians to ensure the best possible care for the patients and their families who are treated in outpatient, emergency, and consultation-liaison settings.

#### Manager

Applies practice management principles. Demonstrates the ability to balance patient care with personal learning needs and activities.

#### Health Advocate

Advocates for improvements in the mental and physical health of children and adolescents with psychiatric disorders in outpatient, emergency, and consultation-liaison settings.

## Scholar

Develops and implements an effective personal continuing education strategy, maintaining and enhancing professional activities through ongoing learning and translating knowledge relevant to child and adolescent psychiatry to patients, families, other clinicians, and learners.

# Professional

Delivers high quality care to patients and their families in outpatient, emergency, and consultation-liaison settings. Adheres to a professional code at all times.

# **Specific Ambulatory Rotation Objectives**

(Neurodevelopmental, mood and anxiety disorders, and eating disorders)

CanMEDS	Learning	Specific	Instructional	Evaluation
Role	Outcomes:	Competencies	Method	
Medical Expert	To function effectively as a consultant, performing efficient and comprehensive diagnostic assessments and building broad, evidence-based treatment plans for children and adolescents with psychiatric disorders (neurodevelopmental, mood and anxiety disorders, and eating disorders) in an outpatient setting	Performs comprehensive diagnostic interviews Requests appropriate investigations, consultations, and collateral information Develops biopsychosocial formulations Develops comprehensive treatment plans Prescribes and monitors psychiatric medications Provides and supports evidence-based psychotherapeutic interventions Assesses and manages high-risk behaviors Provides psychoeducation on psychiatric illness Demonstrates proficiency in relevant comorbid medical issues Triages, assesses, and manages children and adolescents presenting with psychiatric disorders in outpatient settings Demonstrates advanced knowledge of the scientific literature and clinical practice guidelines	Attending psychiatrist's observation of resident performing specific medical expert role     Feedback and supervision sessions utilizing questions and issues raised during observations of clinical work     Tutorial series     Academic grand rounds     Journal club	Feedback on comprehensive treatment and management plans Mid-rotation review in written format Evaluation of a formal diagnostic assessment performed in front of supervisor (STACER) End-of-rotation ITER with input from multidisciplinary outpatient team team

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
		Demonstrates knowledge of epidemiology, ethology, diagnosis, and course of acute psychiatric illnesses in children and adolescents		
Communicator	To effectively communicate details of outpatient, emergency, and medical-surgical consultations or psychiatric assessments to children and adolescents, families, other clinicians, and learners	Obtains and Organizes detailed history and collateral information from the patient, families, clinicians involved in care, health records and other sources     Obtains necessary consultations effectively Effectively conveys pertinent information and opinions to medical colleagues, allied health professionals, patients and families     Prepares accurate and complete medical records in a timely way     Establishes and maintains therapeutic rapport with children and families     Expertly uses nonverbal and verbal communication     Demonstrates respect for patient confidentiality, privacy and autonomy     Ensures that communications and interactions are developmentally and culturally appropriate	Participation in a multidisciplinary outpatient team     Attending psychiatrist's observation of resident interactions with feedback	ITER     Multidisciplinary team feedback regarding communication with patients, families, and team members     Mid-rotation review in written format     STACER

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
Collaborator	To work in partnership with children and adolescents, families, allied professionals on the team, and other physicians to ensure the best possible care for patients who are treated in the outpatient settings and their families	Includes family members as important members of the health care team Engages with allied health professionals that contribute positively to the care of patients Effectively consults with other physicians and health care professionals in outpatient settings Facilitates learning of others including patients, families, other clinicians, and students Demonstrates respect and willingness to teach and learn from other team members	<ul> <li>Participation in a multidisciplinary inpatient team</li> <li>Role modeling after the attending psychiatrist</li> <li>Attending psychiatrist's observation of resident interactions with feedback</li> </ul>	ITER     Multidisciplinary team feedback regarding communication with patients, families, and team members     Mid-rotation review in written format
Manager	To apply practice management principles, demonstrating the ability to balance patient care with personal learning needs and activities	Shows understanding of the cost of health care and practices effective use of resources Sets realistic priorities and uses time effectively to optimize professional performance Serves on administrative committees or working groups to accomplish health care related projects Utilizes information technology to optimize patient care and life- long learning Directs patients to relevant community resources	Observation with feedback by attending psychiatrist and other clinicians	Annual written exams     ITER     Mid-rotation review in written format     Multidisciplinary team feedback regarding managerial skills

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
Health Advocate	To advocate for improvements in the mental and physical health of children and adolescents with psychiatric disorders in the outpatient settings	Identifies the determinants of mental health for children and teens     Identifies methods of community advocacy to improve mental health in the psychiatrically ill outpatient population     Actively promotes mental and physical health in the daily care of child and adolescent psychiatric outpatients	<ul> <li>Tutorial series</li> <li>Role modeling on the part of the attending psychiatrist</li> <li>Observation with feedback by attending psychiatrist, other clinicians</li> </ul>	Mid-rotation review in written format     ITER
Scholar	To develop and implement an effective personal continuing education strategy, maintain and enhance professional activities through ongoing learning and translate knowledge relevant to child and adolescent psychiatry to patients, families, other clinicians and learners	Facilitates education of other learners through guidance, teaching, and constructive feedback     Contributes to the dissemination and translation of new medical knowledge and practices in the area of child and adolescent psychiatry     Incorporates critical appraisal and evidence in informed medicine into daily practice     Demonstrates the use of scientific knowledge in caring for outpatients	Medical educator workshop focusing on methods of teaching in child and adolescent psychiatry     Assignment of fellows to didactic and case-based teaching sessions for medical students, prefellowship residents and non-psychiatry trainees     Journal club presentation     Academic Grand rounds presentation	Mid-rotation review in written format     ITER
Professional	To deliver high quality care to patients and their families in the outpatient settings To adhere to a professional code of conduct at all times	Demonstrates     collaborative and     respectful relationships,     including gender and     cultural awareness     Demonstrates     responsibility,     dependability, self-     direction, and     punctuality	Observation and feedback from attending psychiatrist, team members and families     Tutorial series	Mid-rotation     review in written     format     ITER     Formal     observation of     procedural skills     (clinical     encounter)     STACER

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
		Is able to accept and make constructive use of supervision and feedback and demonstrates awareness of own limitations     Behaves in accordance with professional standards when treating patients or conducting research		

# **Collaborative Care Consultation Rotation**

(Family Health Team, Regional Child Mental Health Agencies, School-Based Treatment Classrooms) Educational Objectives

# **Medical Expert**

Functions effectively as a consultant, performing efficient and comprehensive diagnostic assessments, and building broad, evidence-based treatment plans for children and adolescents with psychiatric orders in outpatient collaborative care settings.

# Communicator

Effectively communicates details of outpatient collaborative care psychiatric assessments to children and adolescents, families, other clinicians, and learners.

### Collaborator

Works in partnership with children and adolescents, families, allied professionals on the team, and other physicians to ensure the best possible care for the patients and their families who are treated in outpatient collaborative care settings.

#### Manager

Applies practice management principles. Demonstrates the ability to balance patient care with personal learning needs and activities.

## **Health Advocate**

Advocates for improvement in the mental and physical health of children and adolescents with psychiatric disorders in outpatient collaborative care settings.

## **ROTATION-SPECIFIC GOALS AND OBJECTIVES**

## Scholar

Develops and implements an effective personal continuing education strategy, maintaining and enhancing professional activities through ongoing learning, and translating knowledge relevant to child and adolescent psychiatry to patients, families, other clinicians, and learners.

#### **Professionals**

Delivers high quality care to patients and their families in outpatient collaborative care settings. Adheres to a professional code of conduct at all times.

# **Collaborative Care Rotation Objectives**

(Family Health Teams, Regional Child Mental Health Agencies, School-Based Treatment Classrooms)

CanMEDS	Learning	Specific	Instructional	Evaluation
Role	Outcomes:	Competencies	Method	
	Goals/Objectives     To function effectively as a consultant, performing efficient and comprehensive diagnostic assessment, and building broad, evidence-based	consultation, and	Attending psychiatrist's observation of resident performing specific medical expert role     Feedback and	Feedback on comprehensive treatment and management plans     Mid-rotation review in
Medical Expert	evidence-based treatment plans for children and adolescents with psychiatric disorders in a collaborative care setting	collateral information  Develops biopsychosocial formulations	Feedback and supervision sessions utilizing questions and issues raised during observations of clinical work Tutorial series Academic grand rounds Journal club	review in written format  Evaluation of a formal diagnostic supervisor assessment performed in front of supervisor  (STACER)  End-of-rotation ITER with input from community mental health centers, emergency services, or consultation-liaison teams

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
		Demonstrates     advanced knowledge     of the scientific     literature and clinical     practice guidelines     Demonstrates     knowledge of     epidemiology, etiology     diagnosis, and course     of most acute     psychiatric illnesses in     children and     adolescents		
Communicator	To effectively communicate details of psychiatric consultation to community agencies, classrooms, or family health teams, children and adolescents, families, other clinicians, and learners	Obtains and organizes detailed history and collateral information from the patient, families, clinicians involved in care, health records and other sources obtains necessary consultations effectively     Effectively conveys pertinent information and opinions to medical colleagues, allied health professionals, patients and families     Demonstrates ability to provide consultation-liaison services to community agencies, family health teams and classrooms     Effectively communicates and shares information relevant to treatment and management within community settings (schools, community mental health agencies, family health team)	Participation in a multidisciplinary community mental health center     Attending psychiatrist's observation of resident interactions with feedback	ITER     Multidisciplinary team feedback regarding communication with patients, families, and team members     Mid-rotation review in written format     STACER

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
		Prepares accurate and complete medical records in a timely way Establishes and maintains therapeutic rapport with children and families Expertly uses nonverbal and verbal communication Demonstrates respect for patient confidentiality, privacy and autonomy Ensures that communications and interactions are developmentally and culturally appropriate		
Collaborator	To work in partnership with children and adolescents, families, allied professionals on the team, and other physicians to ensure the best possible care for the patients who are treated in the community mental health agencies, school classrooms, and family health teams, and for their families as well	Includes family members as important members of the health care team  Ingages with allied health Professionals that contribute positively to the care of patients Competently functions in a shared care model with family doctors, community mental health agency staff, and school staff in the treatment of outpatients  Networks effectively with residential, educational, and community services Facilitates learning of others including patients, families, other clinicians, and students	<ul> <li>Participation in a multidisciplinary inpatient team</li> <li>Role modeling on the part of the attending psychiatrist</li> <li>Attending psychiatrist's observation of resident interactions with feedback</li> </ul>	ITER     Multidisciplinary team feedback regarding communication with patients, families, and team members     Mid-rotation review in written format

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
		Demonstrates respect and willingness to teach		
Manager	To apply practice management principles; demonstrate ability to balance patient care with personal learning needs and activities	Is aware of the cost of health care and practice effective use of resources Serves on administrative committees, working groups to accomplish health care related projects Sets realistic bpriorities and uses time effectively in order to optimize professional performance Utilizes information technology to optimize patient care and life-long learning Directs patients to relevant community resources	Observations of team members and management in inter-professional interactions with feedback and discussion Feedback from supervisor on time management and prioritizing of clinical managerial and educational duties	Midterm and ITER evaluation
Health Advocate	To advocate for improvements in the mental and physical health of children and adolescents with psychiatric disorders in community mental health agencies, schools and family health teams	determinants of mental health for children and teens I dentifies methods of community advocacy to improve mental health in the	Tutorial series     Observation with feedback by attending psychiatrist and other clinicians	ITER Mid-rotation review in written format STACER

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
Scholar	To develop and implement an effective personal continuing education strategy, maintain and enhance professional activities through ongoing learning, and translate knowledge relevant to Child and Adolescent Psychiatry to patients, families, other clinicians, and learners	Facilitate education of other learners through guidance, teaching and constructive feedback     Contribute to the dissemination and translation of new medical knowledge and practices in the area of child and adolescent psychiatry     Incorporates critical appraisal andevidence-informed medicine into daily practice     Demonstrates the use of scientific knowledge in caring for outpatients, emergency and consultation-liaison patients	Medical educator workshop focusing on methods of teaching in child and adolescent psychiatry     Journal club presentation     Academic grand rounds presentation	Mid-rotation review in written format     ITER
Professional	To deliver high quality care to patients and their families in the collaborative care (schools, community mental health agency, and family health teams) setting To adhere to a professional code of conduct at all times	Demonstrates collaborative and respectful relationships including gender and cultural awareness     Demonstrates responsibility, dependability, self-direction, and punctuality     Able to accept and make constructive use of supervision and feedback and demonstrate awareness of own limitations     Behaves in accordance with professional standards when treating patients or conducting research	Observation and feedback from attending psychiatrist, team members and families Tutorial series	Mid-rotation review in written format     ITER     Formal observation of procedural skills (Clinical Encounter)     STACER

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
Professional	To deliver high quality care to patients and their families in the collaborative care (schools, community mental health agency, and family health teams) setting To adhere to a professional code of conduct at all times	Demonstrates collaborative and respectful relationships including gender and cultural awareness     Demonstrates responsibility, dependability, self-direction, and punctuality     Able to accept and make constructive use of supervision and feedback and demonstrate awareness of own limitations     Behaves in accordance with professional standards when treating patients or conducting research	Observation and feedback from attending psychiatrist, team members and families     Tutorial series	Mid-rotation review in written format     ITER     Formal observation of procedural skills (Clinical Encounter)     STACER

# Specialized And Complex Ambulatory Care (Final Year Experience)

The following rotations are included: first episode psychosis, transitional youth service, autism spectrum disorder, and eating disorders.

# **Medical Expert**

Establishes and maintains theoretical and practical knowledge of the clinical, developmental, and basic sciences relevant to special areas to expertise in child and adolescent psychiatry: first episode psychosis, transitional youth, autism spectrum disorder, and eating disorders.

#### Communicator

Effectively communicates evidence-informed practices in child and adolescent psychiatry to children and adolescents, caregivers and families, other clinicians, and learners within these specialized areas.

#### Collaborator

Facilitates learning for others, including patients, families, other clinicians, and students. Demonstrates respect and willingness to teach and learn from other team members.

## Manager

Develops and applies practice management principles for psychiatric care in these specialized areas.

#### **Health Advocate**

Promotes the advancement of the mental health of individual youths, communities, and the wider population with regard to seriously psychiatrically ill children and youth requiring longer term intensive care.

#### Scholar

Develops and implements an effective personal continuing education strategy, maintaining and enhancing professional activities through ongoing learning, and contributing to the dissemination and translation of new medical knowledge and practices in these specialized areas of child and adolescent psychiatry.

#### **Professional**

Demonstrates responsibility and self-direction for lifelong learning. Demonstrates an understanding of the unique ethical principles associated with treating patients with chronic and severe mental illness.

# **Specific Objectives: First Episode Psychosis**

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
Medical Expert	To establish and maintain theoretical and practical knowledge of the clinical, developmental, and basic sciences relevant to special areas of expertise with respect to adolescents with psychiatric disorders presenting to the First Episode Psychosis clinic	Performs specialty-specific diagnostic interviews, formulations, and treatment plans Possesses advanced knowledge and skill in diagnosis-specific screening and symptom-monitoring instruments Requests appropriate investigations, consultations, and collateral information Demonstrates advanced knowledge and skill in prescribing and monitoring psychiatric medications for psychotic disorders Demonstrates advanced knowledge of evidence-based psychotherapeutic interventions in psychotic disorders Assesses and manages high-risk behaviors Demonstrates proficiency in relevant comorbid medical issues	Role modeling: the attending psychiatrist performing the medical expert role Attending psychiatrist's observation of resident performing specific medical expert role Feedback and supervision sessions utilizing questions and issues raised during observations of clinical work Tutorial series	Formal review and feedback on diagnostic interviews, treatment plans, and medication regimens     Mid-rotation review in written format     ITER

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
		Demonstrates knowledge of epidemiology, etiology, diagnosis, and course of psychiatric problems in adolescents with psychotic disorders		
Communicator	To effectively communicate evidence-informed practices to adolescents, caregivers and families, other clinicians, and learners in the First Episode Psychosis Clinic	Obtains and organizes detailed history and collateral information from the patient, families, clinicians involved in care, health records and other sources     Effectively conveys pertinent information and opinions to medical colleagues, allied health professionals, patients and families     Prepares accurate and complete medical records in a timely way     Establishes and maintains therapeutic rapport with children and families     Expertly uses nonverbal and verbal communication	Participation in a multidisciplinary team in the First Episode Psychosis Clinic     Attending psychiatrist's observation of resident interactions with feedback	ITER     Multidisciplinary team feedback regarding communication with patients, families, and team members     Mid-rotation review in written format     Feedback from other learners     STACER

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
		Demonstrate respect for patient confidentiality, privacy and autonomy     Ensures that communication and interactions are developmentally and culturally appropriate		
Collaborator	To demonstrate facilitation of the learning of others, including patients, families, other clinicians, and students in the First Episode Psychosis Clinic To demonstrate respect and willingness to teach and learn from other team members	Includes family members as important members of the health care team Engages with allied health professionals in ways that contribute positively to the care of patients Competently functions in a shared care model with family doctors Networks effectively with inpatient, outpatient, emergency, and community services Facilitates learning of others including patients, families, other clinicians, and students Demonstrates respect and willingness to teach and learn from other members	Participation in multidisciplinary inpatient team     Attending psychiatrist's observation of resident interactions with feedback	ITER     Multidisciplinary team feedback regarding communication with patients, families, and team members     Mid-rotation review in written format

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
Manager	To develop and apply practice management principles for psychiatric care in adolescents presenting to the First Episode Psychosis Clinic	Shows understanding of the economic and societal costs of psychiatric care for adolescents in the First Episode Psychosis Clinic     Set realistic priorities and use time effectively in order to optimize professional performance     Demonstrate medical leader role in patient care with other team members     Utilizes information technology to optimize patient care and lifelong learning	Observations of team members and management in interprofessional interactions with feedback and discussion     Feedback from supervisor on time management and prioritizing of clinical managerial and educational duties	Midterm and ITER evaluation
Health Advocate	To promote the advancement of mental health of individual youths, communities and populations with regard to seriously psychiatrically ill youth (with psychotic disorders) requiring longerterm intensive care	Identifies the determinants of mental health for children and teens Identifies methods of community advocacy to improve mental health for teens with psychotic disorders Actively promotes mental and physical health in adolescent presenting to the First Episode Psychosis Clinic	Tutorial series     Observation with feedback by attending psychiatrist and other clinicians	ITER     Mid-rotation     review in written     format     STACER

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
Scholar	To develop and implement an effective personal continuing education strategy, maintain and enhance professional activities through ongoing learning, contributing to the dissemination and translation of new medical knowledge Practices in Psychotic Disorders in Adolescents	Facilitate     education of     learners through     guidance, teaching     and feedback     Contribute to the     dissemination and     translation of     medical knowledge     and practices in     Psychotic Disorders     in adolescents     Incorporate critical     appraisal and     evidence-informed     medicine into     practice for     populations	Medical educator workshop focusing on methods of teaching in Child and     Adolescent Psychiatry     Assignment of fellows to didactic and case based teaching sessions for medical students, prefellowship residents and non-psychiatry trainees	Mid-rotation review in written format     ITER
Professional	To demonstrate responsibility and self-direction for lifelong learning Demonstrate an understanding of the unique ethical principles in treating patients with chronic and severe mental illness such as psychotic disorders	Demonstrate collaborative and respectful relationships including gender and cultural awareness     Demonstrate responsibility, dependability, self-direction, and punctuality     Accept and make use of supervision and feedback and show awareness of own limitations     Behaves in sync with professional standards when treating or conducting research Identifies the ethical considerations in caring for patients with psychotic disorders	Observation and feedback from attending psychiatrist, team members and families     Tutorial series	Mid-rotation review in written format     ITER     Formal observation of procedural skills (Clinical Encounter)     STACER

# **Specific Objectives: Transitional Youth Service**

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
Medical Expert	To establish and maintain the theoretical and practical knowledge of the clinical, developmental and basic sciences relevant to special areas of expertise in youth in the transitional service	Performs specialty-specific diagnostic interviews, formulations, and treatment plans Possesses advanced knowledge and skill in diagnosis-specific screening and symptommonitoring instruments Requests appropriate investigations, consultations, and collateral information Demonstrates advanced knowledge and skill in prescribing and monitoring psychiatric medications for the youth referred to the transitional clinic Demonstrates advanced knowledge of evidence-based psychotherapeutic interventions in youth referred to the transitional service Assesses and manages high-risk behaviors	Role modeling: attending psychiatrist performing medical expert role Attending psychiatrist's observation of resident performing specific medical expert role Feedback and supervision sessions utilizing questions and issues raised during observations of clinical work Tutorial series	Formal review and feedback on diagnostic interviews, treatment plans, and medication regimens Mid-rotation review in written format ITER STACER

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
		Demonstrates proficiency in relevant comorbid medical issues     Demonstrates knowledge of epidemiology, etiology, diagnosis, and course of psychiatric problems in adolescents referred to transitional youth service		
Communicator	To effectively communicate evidence-informed practices in adolescents, caregivers and families, other clinicians, and learners in Transitional Youth Service	Obtains and organizes detailed history and collateral information from the patient, families, clinicians involved in care, health records and other sources Effectively conveys pertinent information and opinions to medical colleagues, allied health professionals, patients and families Prepares accurate and complete medical records in a timely way Establishes and maintains therapeutic rapport with adolescents and families Expertly uses nonverbal and verbal communication	Participation in a multidisciplinary team in the Transitional Youth Service     Attending psychiatrist's observation of resident interactions with feedback	ITER     Multidisciplinary team feedback regarding communication with patients, families, and team members     Mid-rotation review in written format     Feedback from other learners     STACER

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
		Demonstrate respect for patient confidentiality, privacy and autonomy     Ensures that communication and interactions are developmentally and culturally appropriate		
Collaborator	To demonstrate facilitation of the learning of others, including patients, families, other clinicians, and students in the Transitional Youth Service To demonstrate respect and willingness to teach and learn from other team members	Includes family members as important members of the health care team Engages with allied health professionals in ways that contribute positively to the care of patients Competently functions in a shared care model with family doctors Networks effectively with inpatient, outpatient, emergency, and community services Facilitates learning of others including patients, families, other clinicians, and students Demonstrates respect and willingness to teach and learn from other members	Participation in a multidisciplinary inpatient team     Attending psychiatrist's observation of resident interactions with feedback	ITER     Multidisciplinary team feedback regarding communication with patients, families, and team members     Mid-rotation review in written format

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
Manager	To develop and apply practice management principles for psychiatric care in adolescents referred to the Transitional Youth Service	Shows understanding of the economic and societal costs of psychiatric care for youth in the Transitional Service Set realistic priorities and use time effectively in order to optimize professional performance Demonstrate medical leader role in patient care Works collaboratively with other team members Utilizes information technology to optimize patient care and lifelong learning	Observations of team members and management in interprofessional interactions with feedback and discussion     Feedback from supervisor on time management and prioritizing of clinical managerial and educational duties	Midterm and ITER evaluation
Health Advocate	To promote the advancement of mental health of individual youths, communities and populations with regard to seriously psychiatrically ill youth requiring longer-term intensive care	Identifies the determinants of mental health for teens     Identifies methods of community advocacy to improve mental health for teens in youth in the transitional Service     Actively promotes mental and physical health in Youth in the Transitional Service	Tutorial Series     Observation with feedback by attending Psychiatrist, other clinicians	ITER     Mid-rotation review     In written format
Scholar		Facilitate education of other learners through guidance, teaching and constructive feedback	Medical educator workshop focusing on methods of teaching in Child and Adolescent Psychiatry	Mid-rotation review in written format     ITER

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
	To develop and implement an effective personal continuing education strategy, and enhance professional activities via ongoing learning, adding to the dissemination and translation of new medical knowledge and practices in Transitional Youth Service	Contribute to the dissemination and translation of new medical knowledge and practices in this transitional population Incorporate critical appraisal and evidence-informed medicine into daily practice for these populations	Assignment of fellows to didactic and case based teaching sessions for medical students, pre- fellowship residents and non-psychiatry trainees	
Professional	To demonstrate responsibility and self-direction for lifelong learning Demonstrate an understanding of the unique ethical principles in treating patients with chronic and severe mental illness such as transitional youth	Collaborative and respectful relationships with gender and cultural awareness Demonstrate responsibility, dependability, dependability, self-direction, and punctuality To accept and make constructive use of supervision and feedback and demonstrate awareness of own limitations Behaves in accordance with professional standards when treating or conducting research Identifies the ethical concerns in caring for patients with severe and chronic mental illnesses	Observation and feedback from Attending Psychiatrist, team members and families     Tutorial series	Mid-rotation review in written format     ITER     STACER

# **Specific Objectives: Spectrum Disorders**

CanMEDS	Learning	Specific	Instructional	Evaluation
Role	Outcomes: Goals/Objectives	Competencies	Method	
Medical Expert	To establish and maintain the theoretical and practical knowledge of the clinical, developmental and basic sciences relevant to special areas of expertise in Autism Spectrum Disorders in children and adolescents	Performs specialty-specific interviews, formulations, and treatment plans Possesses knowledge and skill in specific screening and monitoring instruments Requests appropriate investigations, consultations, and information Demonstrates advanced knowledge/skill in prescribing and monitoring psychiatric medications for autism spectrum disorders Assess and manages high-risk behaviors Demonstrates proficiency in relevant comorbid medical issues Demonstrates knowledge of epidemiology, etiology, diagnosis, and course of psychiatric problems in autism spectrum disorders	Role modeling: attending psychiatrist performing medical expert role Attending psychiatrist's observation of resident performing specific medical expert role Feedback and supervision sessions utilizing questions and issues raised during observations of clinical work Tutorial series	Formal review and feedback on diagnostic interviews, treatment plans, and medication regimens Mid-rotation review in written format ITER STACER

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
Communicator	To effectively communicate evidence-informed practices to children and adolescents, caregivers and families, other clinicians, and learners in autism spectrum disorders	Obtains and organizes detailed history and collateral information from the patient, families, clinicians involved in care, health records and other sources     Effectively conveys pertinent information and opinions to medical colleagues, allied health professionals, patients and families     Prepares accurate and complete medical records in a timely way     Establishes and maintains therapeutic rapport with children and families     Expertly uses nonverbal and verbal communication     Demonstrate respect for patient confidentiality, privacy and autonomy     Ensures that communication and interactions are developmentally appropriate	Participation in a multidisciplinary autism spectrum disorders team     Attending psychiatrist's observation of resident interactions with feedback	ITER     Multidisciplinary team feedback regarding communication with patients, families, and team members     Mid-rotation review in written format     Feedback from other learners     STACER
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CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
Collaborator	To demonstrate facilitation of the learning of others, including patients, families, other clinicians, and students in autism spectrum disorders To demonstrate respect and willingness to teach and learn from other team members	Includes family members as important members of the health care team  Engages with allied health professionals in ways that contribute positively to the care of patients  Competently functions in a shared care model with family doctors  Networks with inpatient, emergency, and community services  Facilitates learning of others including patients, families, other clinicians, and students  Demonstrates respect and willingness to teach and learn from other members	Participation in a multidisciplinary team     Attending psychiatrist's observation of resident interactions with feedback	ITER     Multidisciplinary team feedback regarding communication with patients, families, and team members     Mid-rotation review in written format
Manager	To develop and apply practice management principles for psychiatric care in autism spectrum disorders	Understanding of the economic and societal costs of care for autism spectrum disorder populations     Set realistic priorities and use time effectively in order to optimize professional performance	Observations of team and management in inter-professional interactions with feedback and discussion	Midterm and ITER evaluation

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
		Demonstrate medical leader role in patient care     Works collaboratively with other team members     Utilizes information technology to optimize patient care and lifelong learning	Supervisor's feedback on time management and prioritizing of clinical managerial and educational duties	
Health Advocate	To promote the advancement of mental health of individual youths, communities and populations with regard to seriously psychiatrically ill children and youth (with autism spectrum disorders) requiring longerterm intensive care	Identifies the determinants of mental health for children and teens of community advocacy to improve mental health for children and teens with autism spectrum disorders     Actively promotes mental and physical health in autism spectrum disorders	Tutorial series     Observation with feedback by attending psychiatrist, other clinicians	ITER     Mid-rotation review in written format     STACER
Scholar	To develop and implement an effective personal continuing education strategy, maintain and enhance professional activities through ongoing learning, contributing to the dissemination and translation of new medical knowledge and practices in autism spectrum disorders	Facilitate     education of other learners through guidance, teaching and constructive feedback     Contribute to the dissemination and translation of new medical knowledge and practices in autism spectrum disorders	Medical educator workshop focusing on methods of teaching in Child and Adolescent Psychiatry     Assignment of fellows to didactic and case based teaching sessions for medical students, pre-fellowship residents and non-psychiatry trainees	Mid-rotation review in written format     ITER

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
		Incorporate critical appraisal and evidence-informed medicine into daily practice for autism spectrum disorders populations		
Professional	To demonstrate responsibility and self-direction for lifelong learning Demonstrate an understanding of the unique ethical principles in treating patients with chronic and severe mental illness (with autism spectrum disorders)	Demonstrate collaborative and respectful relationships including gender and cultural awareness     Demonstrate responsibility, dependability, self-direction, and punctuality     Able to accept and make constructive use of supervision and feedback and demonstrate awareness of own limitations     Behaves in accordance with professional standards when treating patients or conducting research     Identifies the unique ethical considerations in caring for patients with severe and chronic mental illnesses	Observation and feedback from Attending Psychiatrist, team members and families     Tutorial series	Mid-rotation review in written format     ITER     STACER     Formal observation of procedural skills (Brief Clinical Encounter)

# **Specific Objectives: Eating Disorders**

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
Medical Expert	To establish and maintain theoretical and practical knowledge of the clinical, developmental, and basic sciences relevant to special areas of expertise in eating disorders	Performs specialty-specific diagnostic interviews, formulations, and treatment plans Possesses advanced knowledge and skill in diagnosis-specific screening and symptom-monitoring instruments Requests appropriate investigations, consultations, and collateral information Demonstrates advanced knowledge and skill in prescribing and monitoring psychiatric medications for eating disorders Demonstrates advanced knowledge of evidenced-based psychotherapeutic interventions in eating disorders populations Assess and manages high-risk behaviors Demonstrates proficiency in relevant comorbid medical issues	Role modeling: attending psychiatrist performing medical expert role Attending psychiatrist's observation of resident performing specific medical expert role Feedback and supervision sessions utilizing questions and issues raised during observations of clinical work Tutorial series	Formal review and feedback on diagnostic interviews, treatment plans, and medication regimens     Mid-rotation review in written format     ITER     STACER

CanMEDS Role	Learning Outcomes:	Specific Competencies	Instructional Method	Evaluation
	Goals/Objectives			
		Demonstrates knowledge of epidemiology, etiology, diagnosis, and course of psychiatric problems in the eating disorder population		
Communicator	To effectively communicate evidence-informed practices to children and adolescents, caregivers and families, other clinicians, and learners in the area of eating disorders	Obtains and organizes detailed history and collateral information from the patient, families, clinicians involved in care, health records and other sources     Effectively conveys pertinent information and opinions to medical colleagues, allied health professionals, patients and families     Prepares accurate and complete medical records in a timely way     Establishes and maintains therapeutic rapport with children and families     Expertly uses nonverbal and verbal cues     Demonstrate respect for patient confidentiality, privacy and autonomy	Participation in a multidisciplinary team in the setting of eating disorders     Attending psychiatrist's observation of resident interactions with feedback	ITER     Multidisciplinary team feedback regarding communication with patients, families, and team members     Mid-rotation review in written format     Feedback from other learners     STACER

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
		Ensures that communication and interactions are developmentally and culturally appropriate		
Collaborator	To demonstrate facilitation of the learning of others, including patients, families, other clinicians, and students in these special areas To demonstrate respect and willingness to teach and learn from other team members	Includes family members as important members of the health care team Engages with allied health professionals in ways that contribute positively to the care of patients Competently functions in a shared care model with family doctors Networks effectively with inpatient, outpatient, emergency and community services Facilitates learning of others including patients, families, other clinicians, and students Demonstrates respect and willingness to teach and learn from other members	Participation in a multidisciplinary eating disorder team     Attending psychiatrist's observation of resident interactions with feedback	Multidisciplinary team feedback regarding communication with patients, families, and team members     Mid-rotation review in written format
Manager	To develop and apply practice management principles for psychiatric care in the eating disorder clinic setting	Shows understanding of the economic and societal costs of psychiatric care for autism spectrum disorders populations	Observations of team members and management in inter- professional interactions with feedback and discussion	Midterm and     ITER Evaluation

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
		Sets realistic priorities and uses time effectively in order to optimize professional performance Demonstrates medical leader role in patient care Works collaboratively with other team members Utilizes information technology to optimize patient care and lifelong learning	Feedback from supervisor on time management and prioritizing of clinical managerial and educational duties	
Health Advocate	To promote the advancement of mental health of individual youths, communities and populations with regard to seriously psychiatrically ill children and youth requiring longerterm intensive care (with eating disorders)	Identifies the determinants of mental health for children and teens of community advocacy to improve mental health for children and teens in the eating disorders populations     Actively promotes mental and physical health in these special settings	Tutorial series     Observation with feedback by attending Psychiatrist, other clinicians	ITER     Mid-rotation review in written format     STACER
Scholar	To develop and implement an effective personal continuing education strategy, maintain and enhance professional activities through ongoing learning, contributing to the	Facilitate education of other learners through guidance, teaching and constructive feedback     Contribute to the dissemination and translation of new medical knowledge and practices in the	Medical educator workshop focusing on methods of teaching in Child and Adolescent Psychiatry	Mid-rotation review in written format     ITER

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
	dissemination and translation of new medical knowledge and practices in the specialized area of eating disorders	specialized area of eating disorders Incorporate critical appraisal and evidence-informed medicine into daily practice for autism spectrum disorders populations	Assignment of fellows to didactic and case based teaching sessions for medical students, pre-fellowship residents and non-psychiatry trainees	
Professional	To demonstrate responsibility and self-direction for lifelong learning Demonstrate an understanding of the unique ethical principles in treating patients with chronic and severe mental illness	Demonstrate collaborative and respectful relationships including gender and cultural awareness     Demonstrate responsibility, dependability, self-direction, and punctuality     Able to accept and make constructive use of supervision and feedback and demonstrate awareness of own limitations     Behaves in accordance with professional standards when treating patients or conducting research Identifies the unique ethical considerations in caring for patients with severe and chronic mental illnesses (eating disorders	Observation and feedback from attending psychiatrist, team members, and families     Tutorial series	Mid-rotation review in written format     ITER     STACER     Formal observation of procedural skills (Brief Clinical Encounter)

# Advanced Area Of Focus (Teaching And Education Scholarship, Health Care Delivery)

# **Specific Objectives**

# **Medical Expert**

Establishes and maintains theoretical and practical knowledge of health care delivery, research principles, and education scholarship as pertaining to the practice of child and adolescent psychiatry at the level of the subspecialist.

#### Communicator

Effectively communicates evidence-informed practices in child and adolescent psychiatry to children and adolescents, caregivers and families, other clinicians, and learners.

### Collaborator

Facilitates learning for others, including patients, families, other clinicians, and students. Demonstrates respect and willingness to teach and learn from other team members.

## Manager

Develops and applies practice management principles for health care delivery, research, and education scholarship.

#### **Health Advocate**

Promotes the advancement of the mental health of individual youths, communities, and the general population with regard to child and adolescent psychiatry.

# Scholar

Develops and implements an effective personal continuing education strategy, maintaining and enhancing professional activities through ongoing learning, and translating knowledge relevant to child and adolescent psychiatry for patients, families, other clinicians and learners.

#### **Professional**

Demonstrates responsibility and self-direction for lifelong learning. Demonstrates an understanding of the ethical principles in research and education.

# Advanced area of focus (teaching and education scholarship, health care delivery) - Specific objectives

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
Medical Expert	To establish and maintain theoretical and practical knowledge of the clinical, developmental, and basic sciences relevant to child and adolescent psychiatry at the level of the subspecialist	Demonstrates advanced knowledge of the scientific literature and clinical practice guidelines relevant to child and adolescent psychiatry	Tutorial Clinical experiences in therapeutic modalities Attendance at academic grand rounds and workshop Journal club Scholarly/managerial project with faculty supervisor	ITER     Mid-rotation review in written format     Formal presentation of scholarly project
Communicator	To effectively communicate evidence-informed practices in child and adolescent psychiatry to children and adolescents, caregivers and families, other clinicians, and learners	Delivers information in an understandable way that is culturally and developmentally appropriate     Demonstrate ability to use effective knowledge translation methods	Medical educator     workshop focusing on     methods of teaching     in child and adolescent     psychiatry     Role modeling     Teaching of other     learners     Journal club     Required presentation     at grand rounds     Presentation at loca/     national academic     meeting	Teaching evaluations from learners and grand rounds participants ITER Mid-rotation written review from supervisors Evaluation of presentation at meeting
Collaborator	To demonstrate facilitation of the learning of others, including patients, families, other clinicians, and students To demonstrate respect and to teach and learn from members	Works with others collaboratively in accomplishment of the academic task     Demonstrates knowledge of team dynamics	<ul> <li>Project work with research or manager team</li> <li>Tutorial series</li> <li>Journal club</li> </ul>	Teaching evaluations from learners ITER (multisource feedback) Mid-rotation written review by supervisors
Manager	To develop and practice management principles for psychiatric care		Tutorial series     Role modeling     Journal club	ITER     Mid-rotation written review from supervisors

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
		Identifies the characteristics of administrative and managerial roles in academic child and adolescent psychiatry Identify methods of time management Demonstrate use of information technology to enhance patient care and promote lifelong learning Demonstrate ability to balance time and effort between clinical and academic tasks	Organization and completion of scholarly or managerial project	Faculty evaluation of terminal project
Health Advocate	To promote the advancement of mental health of individual youths, communities and populations with regard to Child and Adolescents Psychiatry	Identifies and understands the determinants of health affecting patients and communities     Describe structures of governance in mental health care, and demonstrate awareness of major regional, national and international advocacy groups in mental health care for children and adolescents	Tutorial series Attendance at national or local academic meetings Attending psychiatrist role modeling	ITER     Mid-rotation written review from supervisors
Scholar		Facilitate     education of other     learners through     guidance, teaching     and feedback	Medical educator workshop focusing on methods of teaching in Child and Adolescent Psychiatry	Teaching     evaluations     from learners,     grand rounds     participants

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
	To develop and implement an effective personal continuing education strategy, maintain and enhance professional activities through ongoing learning, and translate knowledge relevant to Child and Adolescent Psychiatry to patients, families and other clinicians and learners	Contribute to the dissemination and translation of new medical knowledge and practices in the area of child and adolescents Child and Adolescents Psychiatry Demonstrate critical appraisal skills in evaluating medical literature Demonstrate the ability to general a scientific question, design a study, and write a simple proposal in Child and Adolescents Psychiatry Demonstrate the ability to competently review and present a body of literature relevant to child and adolescent psychiatry	Assignment of fellows to didactic and case based teaching sessions for medical students, PGY 1-4 residents and non-psychiatry trainees     Tutorial series     Journal club     Presentation at grand rounds     Presentation at local or national academic meeting     Scholarly project	ITER     Mid-rotation written review from supervisors     Evaluation of presentation at meeting     Faculty evaluation of terminal project
Professional	To demonstrate responsibility and self-direction for lifelong learning Demonstrate an understanding of the ethical principles in research and education	Make constructive use of supervision and feedback, demonstrating awareness of own limitations     Possesses advanced knowledge and skill in applying ethical principles in Child and Adolescent Psychiatry Research and Education	<ul> <li>Tutorial series</li> <li>Role modeling from faculty</li> </ul>	ITER     Mid-rotation written review from supervisors     Annual written examination     Feedback from learners     Evaluation of terminal project

# **Specific Objectives**

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
Medical Expert	To demonstrate an understanding of the basic principles of research design, methodology, biostatistics, and clinical epidemiology in topics of child and adolescent psychiatry	Identifies an area of research interest and a mentor     Critically appraises the background literature of the research project     Reviews the relevant literature and distills from it a scientific questions that can be answered using the available facilities and within an appropriate time period	psychiatrist performing medical expert	Weekly in-person feedback Mid-rotation review in written format Feedback from other members of the health care team Presentation of research data at grand rounds ITER
Communicator	To effectively communicate research findings in child and adolescent psychiatry to scientific communities through posters, abstracts, teaching slides, manuscripts, grant applications, or other scientific communication	Obtains and organizes detailed data from the patient, families, clinicians involved in care, health records and other sources     Effectively communicates and collaborates with research team members to conduct the research     Prepares accurate and complete research records in a timely way     Demonstrate respect for patient confidentiality, privacy and autonomy	Attending psychiatrist's observation of resident interactions with feedback	ITER Mid-rotation review in written format Feedback from other learners STACER Review of data

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
		Ensures that communications and interactions are developmentally and culturally appropriate		
Collaborator	To facilitate the learning of others—including patients, families, and other clinicians—in a variety of research topics To demonstrate respect and willingness to teach and learn via team members	Identifies, consults, and collaborates with appropriate experts to conduct research	Participation in research-related team meetings     Attending psychiatrist observation of resident interactions with feedback	ITER     Multidisciplinary research team feedback regarding communication with team members     Mid-rotation review in written format
Manager	To develop and demonstrate leadership and administrative abilities in leading a research team	Shows understanding of economic and societal costs of research for children and adolescents in psychiatry settings Set realistic priorities and use time in order to optimize professional performance in a research setting Demonstrate research leader role Collaborate with other team members Utilize information technology to optimize research findings	Observations of team members and management in interprofessional interactions with feedback and discussion     Feedback from supervisor on time management and prioritizing of clinical managerial and research duties	Midterm and ITER evaluation
Health Advocate	To promote the advancement of mental health of individual youths, communities and populations through research	Identifies the determinants of mental health for children and teens     Recognize the contributions of research in improving health of patients and communities	Tutorial series Role modeling by attending psychiatrist Observation with feedback by attending psychiatrist, other clinicians	ITER     Mid-rotation review in written format     STACER

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
Scholar	To develop and implement an effective personal continuing education strategy, maintain and enhance professional activities through ongoing learning, contributing to the dissemination and translation of new medical knowledge and practices in research in Child and Adolescents Psychiatry	Pose a research questions and develops a proposal to solve the research question Conducts an appropriate literature search based on the questions Propose a methodological approach to solve the question carry out the research outlined in the proposal Critically analyze and disseminates the results of the research Identify areas for further research Contribute to the dissemination and translation of new medical knowledge and practices in these specialized areas of child and adolescent psychiatry	teaching in Child and Adolescent Psychiatry	Mid-rotation review in written format     ITER     Feedback from learners
Professional	To demonstrate responsibility and self-direction for lifelong learning Demonstrate an understanding of the unique ethical principles in research in Child and adolescent psychiatry	Uphold ethical professional expectations of research consistent with institutional board guidelines, including maintenance of meticulous data and conduct of ethically sound human or animal subjects research     Demonstrate personal responsibly for setting research goals and working with mentors to set and achieve research timeline objectives	Observation and feedback from attending psychiatrist, team members and families     Tutorial series	Mid-rotation review in written format     ITER

CanMEDS Role	Learning Outcomes: Goals/Objectives	Specific Competencies	Instructional Method	Evaluation
		Participate in specialty organizations that promote scholarly activity and continuous professional development     Publish accurate and reliable research results with attention to appropriate authorship attribution criteria     Disclose potential financial conflicts of interest (including speaker fees, consultative relationships, investment, etc) as appropriate when engaging in and disseminating research results     Able to accept and make constructive use of supervision and feedback and demonstrate awareness of own limitations     Behaves in accordance with professional standards when treating patients or conducting research		

# **Selective School Consultation**

## **Education Objectives**

#### Medical Expert

Functions effectively as a senior resident performing relevant child and adolescent psychiatric examinations and assessments in a school setting, and contributing to evidence-based treatment plans for children and adolescents presenting in the school setting.

#### Communicator

Works in partnership with patients and families, multidisciplinary school team members, and other physicians to ensure the best possible care for the patients and their families who are treated in the family medicine setting.

## Manager

Applies practice management principles. Demonstrates the ability to balance patient care with personal learning needs and activities.

#### **Health Advocate**

Advocates for improvements in the mental and physical health of children and adolescents in the school setting.

#### Scholar

Develops and implements an effective personal education strategy through ongoing learning, and translating knowledge relevant to child and adolescent psychiatry for patients, families, other clinicians, and learners in the school setting.

#### Professional

Delivers high quality care to patients and their families in the school setting. Adheres to a professional code of conduct at all times.

## **Selective Community Mental Health Agencies**

## **Educational Objectives**

#### **Medical Expert**

Functions effectively as a senior resident performing relevant child and adolescent psychiatric examinations and assessments in a community mental health setting, and contributing to evidence-based treatment plans for children and adolescents presenting in a community mental health setting.

#### Communicator

Effectively communicates details of mental health examinations and assessment results to patients and families, as well as other clinicians.

#### Collaborator

Works in partnership with patients and families, community mental health agency members, and other physicians to ensure the best possible care for the patients and their families.

# Manager

Applies practice management principles. Demonstrates the ability to balance patient care with personal learning needs and activities.

#### **Health Advocate**

Advocates for improvements in the mental and physical health of children and adolescents in a community mental health setting.

#### Scholar

Develops and implements an effective personal education strategy through ongoing learning, and translating knowledge relevant to child and adolescent psychiatry for patients, families, other clinicians, and learners in a community mental health agency setting.

#### Professional

Delivers high quality care to patients and their families in the community mental health agency setting. Adheres to a professional code of conduct at all times.

# **Selective Developmental Disabilities**

# **Educational Objectives**

### **Medical Expert**

Functions effectively as senior resident performing relevant developmental disability assessments, and contributing to evidence-based treatment plans for children and adolescents with developmental disabilities in an outpatient setting.

# Communicator

Effectively communicates details of developmental disability assessment results to patients and families, as well as other clinicians.

#### Collaborator

Works in partnership with patients and families, developmental disabilities team members, and other physicians to ensure the best possible care for patients and their families.

#### Manager

Applies practice management principles. Demonstrates ability to balance patient care with personal learning needs and activities.

#### **Health Advocate**

Advocates for improvements in the mental and physical health of children and adolescents with developmental disabilities and/or psychiatric disorders seen in the developmental disabilities setting.

#### Scholar

Develops and implements an effective personal education strategy through ongoing learning. Translates knowledge relevant to child and adolescent psychiatry to patients, families, other clinicians, and learners in the outpatient setting.

#### Professional

Delivers high quality care to patients and their families in the outpatient setting. Adheres to a professional code of conduct at all times.

# **Selective Family Medicine**

## **Educational Objectives**

# **Medical Expert**

Functions effectively as a senior resident performing relevant child and adolescent psychiatric examinations and assessments in a shared care family medicine setting, and contribute to evidence-based treatment plans for children and adolescents presenting in a primary care setting.

### Communicator

Effectively communicates details of mental health examination and assessment results to patients and families, as well as other clinicians.

## Collaborator

Works in partnership with patients and families, family medicine team members, and other physicians to ensure the best possible care for the patients and their families who are treated in the family medicine setting.

#### Manager

Applies practice management principles. Demonstrates the ability to balance patient care with personal learning needs and activities.

#### **Health Advocate**

Advocates for improvements in the mental and physical health of children and adolescents in a family practice setting.

#### Scholar

Develops and implements an effective personal education strategy through ongoing learning. Translates knowledge relevant to child and adolescent psychiatry for patients, families, other clinicians, and learners in family practice setting.

#### Professional

Delivers high quality care to patients and their families in the family practice setting. Adheres to a professional code of conduct at all times.

#### **Selective General Pediatrics**

# **Educational Objectives**

## **Medical Expert**

Functions effectively as a senior resident performing relevant general pediatric examinations and assessments, and contribute to evidence-based treatment plans for children and adolescents with pediatric illnesses in an outpatient setting.

#### Communicator

Effectively communicates details of pediatric examination and assessment results to patients and families, as well as other clinicians.

#### Collaborator

Works in partnership with patients and families, pediatrics team members, and other physicians to ensure the best possible care for the patients and their families who are treated in the outpatient general pediatric setting.

# Manager

Applies practice management principles. Demonstrates the ability to balance patient care with personal learning needs and activities.

# **Health Advocate**

Advocates for improvements in the mental and physical health of children and adolescents in the general pediatric setting.

# Scholar

Develops and implements an effective personal education strategy through ongoing learning. Translates knowledge relevant to child and adolescent psychiatry for patients, families, other clinicians, and learners in a general pediatric setting.

#### Professional

Delivers high quality care to patients and their families in the general pediatric setting. Adheres to a professional code of conduct at all times.

# **Selective Eating Disorders**

# **Educational Objectives**

#### Medical Expert

Functions effectively as senior resident performing relevant eating disorders assessments, and contributing to evidence-based treatment plans for children and adolescents with eating disorders in an outpatient setting.

## Communicator

Effectively communicates details of eating disorders assessment results to patients and families, as well as other clinicians.

#### Collaborator

Works in partnership with patients and families, eating disorders team members, and other physicians to ensure the best possible care for the patients and their families who are treated in outpatient settings for eating disorders.

# Manager

Applies practice management principles. Demonstrates the ability to balance patient care with personal learning needs and activities.

#### Health Advocate

Advocates for improvements in the mental and physical health of children and adolescents with eating disorders in the psychiatric setting.

### Scholar

Develops and implements an effective personal education strategy through ongoing learning. Translates knowledge relevant to child and adolescent psychiatry to patients, families, other clinicians, and learners in an outpatient psychiatric setting.

# Professional

Delivers high quality care to patients and their families in outpatient settings. Adheres to a professional code of conduct at all times.

## **Selective Forensics**

# **Educational Objectives**

#### Medical Expert

Functions effectively as a senior resident performing relevant forensics and parental capacity assessments and contributing to evidence-based treatment plans for adolescents in the juvenile justice system. Demonstrates an understanding of medico-legal issues as they relate to out-of-home placement and issues of confidentiality in the juvenile justice setting.

#### Communicator

Effectively communicates details of forensic examinations and assessment results. Demonstrates the capacity to relate and work well with multidisciplinary teams and staff. Demonstrates the capacity to be empathic toward and develop rapport with youth involved in the juvenile justice system.

#### Collaborator

Understands and interacts with the various systems of care involved with youth in the juvenile justice system. Appropriately interacts with such systems to include input for special education placement, and recommendations for evaluation regarding neglect, abuse, custody, or visitation.

#### Manager

Applies practice management principles. Demonstrates the ability to balance patient care with personal learning needs and activities.

#### **Health Advocate**

Advocates for improvements in the mental and physical health of children and adolescents with forensic needs in the psychiatric setting.

#### Scholar

Develops and implements an effective personal education strategy through ongoing learning. Translates knowledge relevant to child and adolescent psychiatry for patients, families, justice staff, other clinicians, and learners in the forensic setting.

#### **Professional**

Delivers high quality care to patients and their families in forensics settings. Adheres to a professional code of conduct at all times.

# Selective Research

## **Educational Activities**

# **Medical Expert**

Critically appraises the background literature of the research project. Identifies an area of research interest and a mentor. Reviews the relevant literature and distills from it a scientific question that can be answered using available resources within an appropriate time period. Demonstrates in-depth knowledge of the research topic of interest.

# Communicator

Demonstrates skills in conveying and discussing scientific research within the scientific community through posters, abstracts, teaching slides, manuscripts, grant applications, or other scientific communications. Communicates and collaborates effectively with research team members to conduct the research.

#### Collaborator

Identifies, consults, and collaborates with appropriate experts to conduct the research.

#### Manager

Independently identifies an area of research interest and a research mentor in order to engage in the scholarship of scientific inquiry and dissemination. Independently utilizes available resources and regularly meets with the identified research mentor. Demonstrates effective time management in a research setting, as well as leadership and administrative abilities, where appropriate, in leading a research team.

#### Health Advocate

Recognizes the contributions of scientific research in improving the health of patients and communities

#### Scholar

Poses a research question (clinical, basic or population health). Develops a proposal to solve the research question. Conducts an appropriate literature search based on the question. Proposes a methodological approach to solve the question. Carries out the research outlined in the proposal. Critically analyzes and disseminates the results of the research. Identify areas for further research.

#### **Professional**

Upholds ethical and professional expectations consistent with institutional review board guidelines, including maintenance of meticulous data and conduct of ethically sound human or animal subjects research. Demonstrates personal responsibility for setting research goals and working with mentors to set and achieve research timeline objectives. Participates in specialty organizations that promotes scholarly activity and continuous professional development. Publishes accurate and reliable research results, with attention to appropriate authorship attribution criteria. Discloses potential financial conflicts of interest (including speaker fees, consultative relationship, investments, etc.), as appropriate, when engaging in and disseminating research results.

## **General Principles**

- Teaching and learning will be structured and programmatic with more responsibility for self-directed learning.
- Every week at least 4–6 hours of formal training time should be reserved. Formal teaching time is an activity that is planned in advance with an assigned tutor, time slot, and venue. Formal teaching time excludes bedside teaching, clinic postings, etc.
- 3. The Core Education Program (CEP) will include the following three formal teaching and learning activities:
  - Universal topics: 20–30%
    Core specialty topics: 40–50%
    Trainee selected topic: 20–30%
- 4. At least 3 hours per week should be allocated to CEP.
- 5. CEP will be supplemented by other practice based learning (PBL) such as :
  - Morning report or case presentations
  - · Morbidity and mortality reviews
  - Journal clubs
  - Systematic reviews, etc.
  - Hospital grand rounds and other continuous medical education (CME) activities.
- Every week at least 1 hour should be assigned to meeting with mentors, portfolio review, mini-CEX, etc.

# A. Universal Topics

Universal topics are developed centrally by the Saudi Commission and are available as an elearning module. These are high value, interdisciplinary topics of utmost important to the trainee. The reason for delivering the topics centrally is to ensure that all the trainees receive high quality teaching and develop essential core knowledge. These topics are common to all specialties. Following is a list of universal topics for trainees:

- 1. Safe Drug Prescribing: At the end of the learning unit, a candidate should be able to:
  - a) Recognize the importance of safe drug prescription
  - Describe various adverse drug reactions with examples of commonly prescribed drugs that can cause such reactions
  - Apply principles of drug-drug interactions, drug-disease interactions, and drug-food interactions into common situations
  - Apply principles of prescribing drugs in special situations such as renal failure and liver failure
  - e) Apply principles of prescribing drugs in elderly or pediatric patients, as well as during pregnancy or lactation
  - f) Promote evidence-based, cost-effective prescribing
  - g) Discuss the ethical and legal frameworks governing safe-drug prescribing in Saudi Arabia

- Hospital Acquired Infections (HAI): At the end of the learning unit, a candidate should be able to:
  - a) Discuss the epidemiology of HAI with special reference to HAI in Saudi Arabia
  - b) Recognize HAI as one of the major emerging threats in health care
  - c) Identify the common sources and set-ups of HAI
  - d) Describe the common risk factors of HAIs, such as ventilator-associated pneumonia, methicillin-resistant Staphylococcus aureus (MRSA), central line associated bloodstream infection (CLABSI), vancomycin resistant enterococcus (VRE)
  - e) Identify the role of health care workers in the prevention of HAI
  - Determine appropriate pharmacological (e.g., selected antibiotic) and nonpharmacological (e.g., removal of indwelling catheter) measures in the treatment of HAI
  - g) Propose measures to prevent HAI in the workplace
- Surveillance and Follow-Up with Cancer Patients: At the end of the learning unit, a candidate should be able to:
  - a) Describe the principles of surveillance and follow-up of patients with cancers
  - b) Enumerate the surveillance and follow-up plans for common forms of cancer
  - Describe the role of primary care physicians, family physicians, and others in the surveillance and follow-up of cancer patients
  - d) Liaise with oncologists to provide surveillance and follow-up for patients with cancer
- 4. Comorbidities of Obesity: At the end of the learning unit, a candidate should be able to:
  - a) Screen patients for the common and important comorbidity of obesity
  - b) Manage obesity related comorbidities
  - c) Provide dietary and life-style advice for the prevention and management of obesity
- **5. Chronic Pain Management:** At the end of the learning unit, a candidate should be able to:
  - a) Review biopsychosocial and physiological bases of chronic pain perception
  - Discuss various pharmacological and non-pharmacological options available for chronic pain management
  - c) Provide adequate pain relief for uncomplicated patients with chronic pain
  - Identify and refer patients with chronic pain who may benefit from specialized pain services
- 6. Occupational Hazards of Health Care Workers (HCW): At the end of the learning unit, a candidate should be able to:
  - a) Recognize common sources and risk factors of occupational hazards among HCWs
  - b) Describe common occupational hazards in the workplace
  - Develop familiarity with legal and regulatory frameworks governing occupational hazards among the HCW

- d) Proactively promote workplace safety
- e) Protect oneself and one's colleagues against potential occupational hazards in the workplace

# 7. Evidence-Based Approach to Smoking Cessation: At the end of the learning unit, a candidate should be able to:

- a) Describe the epidemiology of smoking and tobacco usages in Saudi Arabia
- b) Review the effects of smoking on the smoker and family members
- c) Effectively use pharmacologic and non-pharmacologic measures to treat tobacco usage and dependence
- Effectively use pharmacologic and non-pharmacologic measures to treat tobacco usage and dependence among special population groups such as pregnant women, adolescents, and patients with psychiatric disorders

# 8. Patient Advocacy: At the end of the learning unit, a candidate should be able to:

- a) Define patient advocacy
- b) Recognize patient advocacy as a core value governing medical practice
- c) Describe the role of patient advocates in patient care
- d) Demonstrate a positive attitude towards patient advocacy
- e) Be a patient advocate in conflicting situations
- f) Be familiar with local and national patient advocacy groups

# 9. Ethical Issues Regarding Treatment Refusal and Patient Autonomy: At the end of the learning unit, a candidate should be able to:

- a) Predict situations where a patient or family is likely to decline prescribed treatment
- b) Describe the concept of "rational adult" in the context of patient autonomy and treatment refusal
- c) Analyze key ethical, moral, and regulatory dilemmas in treatment refusal
- d) Recognize the importance of patient autonomy in the decision making process
- e) Counsel patients and families declining medical treatment in the light of best interest of patients

# **10. Role of Doctors in Death and Dying:** At the end of the learning unit, a candidate should be able to:

- a) Recognize the important role a doctor can play during the dying process
- b) Provide emotional as well as physical care to a dying patient and their family
- c) Provide appropriate pain management for a dying patient
- d) Identify suitable patients and refer them to palliative care services.

# **Table: Universal Topics**

No.	Universal topic	FY
1	Safe Drug Prescribing	1
2	Hospital Acquired Infections (HAI)	1
3	Surveillance and Follow-Up with Cancer Patients	1
4	Comorbidities of Obesity	1
5	Chronic Pain Management	1
6	6 Occupational Hazards of Health Care Workers (HCW)	
7	7 Evidence-Based Approach to Smoking Cessation	
8	Patient Advocacy	2
9	Ethical Issues Regarding Treatment Refusal and Patient	2
	Autonomy	
10	Role of Doctors in Death and Dying	2

# B. Core Specialty Topics

This includes weekly lectures, seminars, and workshops.

- 1) Introduction to Child Psychiatry
- 2) Child and Adolescent Development
- 3) Infancy and Attachment
- 4) Communication Disorders
- 5) Reactive Attachment Disorder
- 6) Autism Spectrum Disorders
- 7) Attention Deficit Hyperactivity Disorder
- 8) Conduct Disorder
- 9) Oppositional and Impulse Control Disorder
- Oppositional and I
   Major Depression
- 11) Bipolar Disorder
- 12) Other Mood Disorders
- 13) Obsessive Compulsive Disorder
- 14) Separation Anxiety and Other Anxiety Disorders
- 15) Psychotic Illnesses in Childhood
- 16) Elimination Disorders
- 17) Treatment in Child Psychiatry: An Overview
- 18) Pharmacotherapy of Child Psychiatric Disorders
- 19) Cognitive Behavior Therapy in Children and Adolescents
- 20) Psychometrics Test in Children and Adolescents
- 21) Psychodynamic Psychotherapy
- 22) Play Therapy and Other Interventions
- 23) Family Therapy
- 24) School Consultation
- 25) Forensic Psychiatry
- 26) Psychiatric Approach to Pediatric Inpatient Consults

- 27) Sleep Disorders
- 28) Eating Disorders
- 29) Neurocognitive Disorders in Children and Adolescents
- 30) Research Methodology

# 1. Case Discussions and Interactive Lectures

# **Junior-level Topics**

No	Subject Title	Objectives
1	Introduction to Child Psychiatry (History Taking and Mental Status Examination)	Define child and adolescent psychiatry     Review the general principles of history taking and mental status examination, including addressing the differences between age groups     Become familiar with structured and semi-structured interviews and when to use them     Become familiar with current DSM 5 criteria for child and adolescent disorders
2	Child and Adolescent Development	Understand normal development so to fully understand what constitutes abnormality at a given age
3	Infancy and Attachment	<ul> <li>Define attachment</li> <li>Understand theories of attachment and psychological consequences of insecure forms of attachment</li> </ul>
4	Speech and Language Disorders	<ul> <li>Discuss types of language and speech disorders, including etiological factors</li> <li>Clinical presentation</li> <li>DSM 5 criteria</li> <li>Management</li> </ul>
5	Reactive Attachment Disorder	<ul> <li>Definition and etiological factors</li> <li>Clinical presentation</li> <li>DSM 5 criteria</li> <li>Management</li> </ul>
6	Autism Spectrum Disorders part 1	Outline the history of Autistic Spectrum Disorder as a mental disorder     Describe the core symptoms of Autistic Spectrum Disorder

No	Subject Title	Objectives
		<ul> <li>Discuss associated impairments and comorbid psychiatric disorders</li> <li>Explain the typical developmental course and demographic distribution of Autistic Spectrum Disorder</li> <li>Discuss the various etiologies that contribute to the development of Autistic Spectrum Disorder</li> <li>Apply a theoretical model of executive function and self-regulation to the clinical management of Autistic Spectrum Disorder</li> </ul>
7	Attention Deficit Hyperactivity Disorder, Part 1	Outline the history of Attention     Deficit Hyperactivity Disorder as a mental disorder     Describe the core symptoms of Attention Deficit Hyperactivity     Disorder     Discuss associated impairments and comorbid psychiatric disorders     Explain the typical developmental course and demographic distribution of Attention Deficit Hyperactivity Disorder     Discuss the various etiologies that contribute to the development of Attention Deficit Hyperactivity Disorder     Apply a theoretical model of executive function and self-regulation to the clinical management of Attention Deficit Hyperactivity Disorder
	Conduct Disorder	<ul> <li>Definition and etiological factors</li> <li>Clinical presentation</li> <li>DSM 5 criteria</li> <li>Comorbid mental illnesses</li> <li>Management and outcome</li> </ul>
9	Oppositional and Impulse Control Disorder	<ul> <li>Definition and etiological factors</li> <li>Clinical presentation</li> <li>DSM 5 criteria</li> <li>Management</li> </ul>

No	Subject Title	Objectives
10	Major Depression	<ul> <li>Definition and epidemiology</li> <li>Etiological factors</li> <li>Clinical presentation</li> <li>DSM 5 criteria</li> <li>Comorbid mental illnesses</li> <li>Management and outcome</li> </ul>
11	Bipolar Disorder, Part 1	<ul> <li>Definition and epidemiology</li> <li>Etiological factors</li> <li>Clinical presentation</li> <li>DSM 5 criteria</li> <li>Management</li> </ul>
12	Other Mood Disorders	<ul><li>Clinical presentation</li><li>DSM 5 criteria</li><li>Management</li></ul>
13	Obsessive Compulsive Disorder	<ul> <li>Definition and epidemiology</li> <li>Etiological factors</li> <li>Clinical presentation</li> <li>DSM 5 criteria</li> <li>Comorbid mental illnesses</li> <li>Management and outcome</li> </ul>
14	Separation Anxiety and Other Anxiety Disorders	Definition and epidemiology     Etiological factors     Clinical presentation     DSM 5 criteria     Management and outcome
15	Psychotic Illnesses in Childhood and Adolescence	<ul> <li>Definition and epidemiology</li> <li>Theory and etiological factors</li> <li>Clinical presentation</li> <li>DSM 5 criteria</li> <li>Management</li> </ul>
16	Elimination Disorders	<ul> <li>Definition and etiological factors</li> <li>Clinical presentation</li> <li>DSM 5 criteria</li> <li>Comorbid medical illnesses</li> <li>Management</li> </ul>
17	Treatment in Child Psychiatry: An Overview	Bio-psycho-social approach to child and adolescent psychiatry

No	Subject Title	Objectives
18	Pharmacotherapy of Child Psychiatric Disorders	<ul> <li>Guidelines to safe drug prescription in children and adolescents</li> <li>Common psychotropics used in the pediatric age group</li> </ul>
19	Psychiatric Approach to Pediatric Inpatient Consults	<ul> <li>Biopsychosocial models</li> <li>Stages of psychosomatic involvement</li> <li>Psychological aspects of chronic diseases and their impact on development</li> <li>Assessment and management</li> </ul>
20	Child Abuse	Introduction to child and adolescent abuse     Definition of abuse     Types of abuse     Prevention     Psychological consequences     Management
21	Suicidality/Homicidally	Introduction to suicide and homicide in pediatric age group     Epidemiology     Risk factors associated with safety compromise     Prevention     Management
22	Psychometric Tests in Children and Adolescents	<ul> <li>Definition</li> <li>Orientation to tests used in child and adolescent psychiatry</li> <li>How to choose proper testing tools</li> <li>Interpretation of results</li> </ul>

# Senior-level Topics

No	or-level Topics Subject Title	Objectives
1	Autism Spectrum Disorders, Part 2	<ul> <li>Conduct clinical interviews with parents, teachers, and children/adolescents for assessment of Autistic Spectrum Disorder</li> <li>Utilize appropriate behavioral rating scales for evaluating Autistic Spectrum Disorder in clients</li> <li>Discuss the role of psychological tests and direct observations in the evaluation of Autistic Spectrum Disorder</li> <li>Provide an effective feedback session to parents</li> <li>Discuss the treatment choices for Autistic Spectrum Disorder</li> <li>Apply knowledge of developmental issues to the management of Autistic Spectrum Disorder</li> <li>Provide treatment suggestions for classroom management of children/adolescents with Autistic Spectrum Disorder</li> </ul>
2	Attention Deficit Hyperactivity Disorder, Part 2	Conduct clinical interviews with parents, teachers, and children/adolescents for assessment of Attention Deficit Hyperactivity Disorder  Utilize appropriate behavioral rating scales for evaluating Attention Deficit Hyperactivity Disorder in clients  Discuss the role of psychological tests and direct observations in the evaluation of Attention Deficit Hyperactivity Disorder  Provide an effective feedback session to parents  Discuss the treatment choices for Attention Deficit Hyperactivity Disorder  Apply knowledge of developmental issues to the management of Attention Deficit Hyperactivity

No	Subject Title	Objectives
		Disorder Provide treatment suggestions for classroom management of children/adolescents with Attention to Deficit Hyperactivity Disorder
3	Bipolar Disorder, Part 2	<ul> <li>Addressing comorbidities</li> <li>Management of complicated cases</li> <li>Family counseling/therapy</li> </ul>
4	Major Depressive Disorder in Adolescents	Etiological factors and co-morbid psychiatric disorders     Management
5	Schizophrenia in Children and Adolescents	<ul> <li>Definition and epidemiology</li> <li>Theory and etiological factors</li> <li>Clinical presentation</li> <li>DSM 5 criteria</li> <li>Comorbid mental illnesses</li> <li>Management and outcome</li> </ul>
6	Pharmacotherapy of Child Psychiatric Disorders (Psycho-stimulants)	<ul> <li>Definition and chemical structures</li> <li>Uses and dosing in pediatric age group</li> <li>Side effects of medication</li> <li>Safe drug prescription</li> </ul>
7	Pharmacotherapy of Child Psychiatric Disorders (Anti-depressants)	<ul> <li>Definition and chemical structures</li> <li>Uses and dosing pediatric age group</li> <li>Side effect of medication</li> <li>Safe drug prescription</li> </ul>
8	Pharmacotherapy of Child Psychiatric Disorders (Anti-psychotics)	<ul> <li>Definition and chemical structures</li> <li>Uses and dosing pediatric age group</li> <li>Side effects of medication</li> <li>Safe drug prescription</li> </ul>
9	Play Therapy and Other Interventions	<ul> <li>Definition of integrative play diagnosis and therapy</li> <li>Conditions where play therapy is helpful</li> <li>Indication of play therapy</li> <li>Other interventions</li> <li>Issues in therapy</li> <li>Efficacy</li> </ul>
10	Psychodynamic Psychotherapy	<ul> <li>Definition and indication</li> <li>Differences between psychodynamic therapy in child and adolescent age</li> </ul>

No	Subject Title	Objectives
		<ul> <li>and adults</li> <li>Methods of intervention</li> <li>Evidence based studies of efficacy in child and adolescent age group</li> </ul>
11	School Consultation	Definition     Models of school based consults     Consultation within school context (school culture)     Goals of consultation
12	Forensic Psychiatry	<ul> <li>Definition</li> <li>Overview of legal system in Saudi Arabia</li> <li>Legal processes and practitioners</li> <li>Ethical issues</li> <li>Professional liabilities</li> <li>Court consults</li> </ul>
13	Sleep disorders	Definition and epidemiology     Theory and etiological factors     DSM 5 criteria     Co-morbid illnesses     Management and outcome
14	Eating disorders	<ul> <li>Definition and epidemiology</li> <li>theory and etiological factors</li> <li>Clinical presentation</li> <li>DSM 5 criteria</li> <li>Comorbid illnesses</li> <li>Management</li> </ul>
15	Neurocognitive disorders	<ul> <li>Definition and epidemiology</li> <li>Theory and etiological factors</li> <li>Clinical presentation</li> <li>DSM 5 criteria</li> <li>Comorbid illnesses</li> <li>Management and outcomes</li> </ul>

# 2. Workshops and Simulations

# **Joint Workshops**

	Workshop Title	Objectives	
1	Child and Adolescent Psychiatry in DSM 5	History of DSM  Evolution of child psychiatry in the DSM  Changes of child and adolescent psychiatry disorder from DSM IV TR to	1 day
		<ul> <li>DSM 5</li> <li>Comparison between DSM 5 and ICD 10</li> <li>The pros and cons of the diagnostic manual in the child and adolescent field</li> <li>DSM 5 controversy</li> <li>Proper usage of diagnostic manuals</li> </ul>	

# Junior-level workshops

	or-level worksnops		
	Workshop Title	Objectives	
1	Professionalism and Ethics in Psychiatry	<ul> <li>Recognize ethical responsibilities, as per national and international guidelines governed by our Islamic regulations, toward patients, medical colleagues, health care facilities, the local community, and to their own wellbeing and competence.</li> <li>Obtain psychiatric-related consents from patients, while realizing the difference between consent and assent</li> <li>Justify the use of psychiatry patients for teaching medical students and residents while maintaining patient respect and safety</li> <li>Identify signs of impaired competence—whether their own or their colleagues'—and, where justified, report a threat to patients' life</li> <li>Generate an opinion of the limitations of ethics in relation to the pharmaceutical industry</li> <li>Apply basic ethics in different scenarios including research conduct</li> </ul>	1 day
2	Principles of Learning and	<ul> <li>Demonstrate critical thinking skills in</li> </ul>	1 day

	Workshop Title	Objectives	
3	Teaching in Health Sciences  Basic Life Support (BLS)	applying knowledge and understanding the scientific principles that guide the practice  Apply different styles of teaching to promote learning and utilizing the adult learning theory  Recognize opportunities for teaching in various clinical settings  Recognize the benefit of incidental teaching as trainers work with trainees  Build confidence in sharing what they know and learn to teach more effectively  Recognize opportunities for teaching practical skills in various clinical settings  Build an organized approach to teaching various clinical skills to trainees, junior colleagues, or peers.  Demonstrate competency in sharing knowledge and skills and teaching more effectively as "experts" through interactive small group exercises	1
		safety for the patient, rescuer, and bystanders  Carry out primary surveys  Demonstrate the effective use of resuscitation adjuncts and obtain appropriate and timely assistance	day
4	Communication Skills	Identify and capitalize on key verbal and non-verbal communications skills in the work place  Learn to answer questions and give justification, instruction, or education to patients  Articulate the importance of effective communication in personal and professional applications  Enhance small group dynamics for effective team work  Be able to break bad news in a sympathetic and effective manner	1 day

	Workshop Title	Objectives	
5	Cognitive Behavior Therapy in Children and Adolescents	Review basic principles in cognitive behavioral therapy How to apply cognitive behavioral therapy to children and adolescents Review disorders that benefit from cognitive behavioral therapy Challenges and management Case scenarios and practice	2 days
6	Research Methodology and Statistics, Section 1: Research Methods	This workshop is designed to provide a hands-on opportunity for trainees to acquire the necessary skills in basic research methods and biostatistics. The workshop comprises 2 sections: By the end of this first section, residents will be able to:  State research objectives Justify choosing a research design Discuss study variables and measurement issues, biases, study populations, and samples Document the above information in a comprehensive research proposal	1 day
7	Evidence-Based Medicine (EBM)	<ul> <li>Promote the use of EBM. Set a habit of lifelong learning in the use of principles of EBM</li> <li>Become familiar with the medical literature and its application to patient care</li> </ul>	1 day

# Senior Level Workshops

Sen	Senior Level Workshops				
	Workshop Title	Objectives			
1	Family Therapy	<ul> <li>Basic principles of family therapy</li> <li>How to apply family therapy in child and adolescent age group</li> <li>Disorders that benefit from therapy</li> <li>Challenges and management</li> <li>Case scenarios and practice</li> </ul>	2 days		
2	Approaches to Substance Use in Adolescent Age Groups	<ul> <li>DSM 5 diagnostic criteria for adolescent use disorders</li> <li>Difference between age groups</li> <li>Commonly used substances</li> <li>Prevention</li> <li>Management strategies</li> <li>Family counseling</li> </ul>	1 day		
3	Approaches to Suicide/Homicide in Adolescent Age Groups	<ul> <li>Epidemiology</li> <li>Risk factors associated with safety compromise</li> <li>Prevention</li> <li>Management</li> <li>Legal pathways in Saudi Arabia</li> </ul>	1 day		
4	Approaches to Child Abuse	<ul> <li>Definition of abuse</li> <li>Types of abuse</li> <li>Psychological consequences</li> <li>Management</li> <li>Legal pathways in Saudi Arabia</li> </ul>	1 day		
5	Research Methodology and Statistics, Section 2: Biostatistics	This workshop is designed to provide a hands-on opportunity for trainees to acquire the necessary skills in basic research methods and biostatistics. The workshop comprises 2 sections: By the end of this second section, residents will be able to:  • Understand the basic principles of the scientific method as applied to clinical research.  • Acquire skills to use the necessary methodology and statistical tools and techniques in analyzing collected data using standard supporting software.	1 day		

6	Evidence-Based Medicine in Psychiatry	<ul> <li>Promote the use of EBM in psychiatry</li> <li>Set a habit of lifelong learning in the use of principles of EBM</li> <li>Become familiar with the medical literature and its application to patient care</li> </ul>	1 day
7	Psychometric Tests in Children and Adolescents (IQ– Personality Assessment)	<ul> <li>Orientation to tests used in child and adolescent psychiatry</li> <li>How to choose proper testing tools</li> <li>Interpretation of results</li> <li>Approach to challenging cases</li> <li>By the end of this workshop, fellows should obtain the basic skills to help them apply tests to patients</li> <li>One day for each test group</li> </ul>	2 days

# C. Trainee Selected Topics

- 1) Mainly during second year of fellowship, comprising 20–30% of total study
- 2) Trainees will be the given choice to develop a list of topics on their own
- 3) They can choose any topics relevant to their needs
- 4) These topics must be intentionally chosen, not random
- 5) All topics need to be approved by the local education committee
- 6) Delivery will be local
- 7) Institution may work with trainees to determine the topics

# D. Learning Resources

- 1) Journals
  - American Academy of Child and Adolescent Psychiatry
  - European Child and Adolescent Psychiatry
  - Canadian Academy of Child and Adolescent Psychiatry
- 2) Textbooks
  - Rutter's Child and Adolescent Psychiatry, 5th Edition
  - Dulcan's Textbook of Child and Adolescent Psychiatry, Edited by Mina K. Dulcan, M.D.
- 3) Guidelines
  - National Institute for Mental Health

## ASSESSMENT

**Description:** Evaluation and assessment of fellows throughout the program are undertaken in accordance with the Commission's training and examination rules and regulations. This includes the following:

## **Annual Assessment**

#### **Continuous Appraisal**

This assessment is conducted toward the end of each training rotation throughout the academic year and at the end of each academic year as a continuous means of both formative and summative evaluation.

#### Continuous formative evaluation

To fulfill the CanMEDS competencies based on the end-of-rotation evaluation, the fellow's performance will be evaluated jointly by relevant staff members who will assess the following competencies:

- 1. Performance of the trainee during daily work.
- 2. Performance and participation in academic activities (see the "Evaluation of the presenter by staff supervisor" form below).
- Performance in 10 to 20 minutes of directly observed trainee—patient interaction.
   Trainers are encouraged to perform at least one assessment per clinical rotation, preferably near the end of the rotation. Trainers should provide timely and specific feedback to the trainee following each assessment of trainee—patient encounters (i.e., monthly evaluation, rotational Mini-CEX\*, CBDs,\*\* DOPS,\*\*\* and MSF\*\*\*\*) (Appendix).
- Trainee's performance of diagnostic and therapeutic procedural skills. Timely and specific feedback from the trainer to the trainee is mandatory following each procedure (direct observation of procedural skills).
- 5. The CanMEDS-based competencies end-of-rotation evaluation form must be completed (preferably in electronic format), with the signatures by the attending consultants, within two weeks of the end of each rotation. The program director discusses evaluations with fellows as necessary. The evaluation form is submitted to the SCFHS Regional Training Supervisory Committee within four weeks of the end of the rotation.
- Academic and clinical assignments should be documented on an electronic tracking system (e-Logbook, when applicable) on an annual basis. Evaluations are based on accomplishment of the minimum requirements for the procedures and clinical skills, as determined by the program.

#### **ASSESSMENT**

- \*Clinical evaluation exercises
- \*\*Case-based discussions
- \*\*\*Direct observation of practical skills
- \*\*\*\*Multisource feedback

## Summative continuous evaluation:

A summative continuous evaluation report is prepared for each fellow at the end of each academic year and may also involve clinical or oral examinations, an objective structured practical examination, or an objective structured clinical examination.

## End-of-first-year examination:

The end-of-year examination will be limited to F1 fellows. The number of examination items, eligibility, and passing score are established in accordance with the Commission's training and examination rules and regulations. Examination details and a blueprint are published on the Commission website, www.scfhs.org.sa

# Final In-training Evaluation Report (FITER)/Comprehensive Competency Report (CCR)

In addition to the local supervising committee's approval of the completion of the clinical requirements (via the fellow's logbook), the program directors prepare a FITER for each fellow at the end of the final year of fellowship (F2). This could also involve clinical or oral examinations or completion of other academic assignments.

## Final Child and Adolescent Psychiatry Saudi Fellowship Examination

The final Saudi Fellowship examination consists of two parts:

#### 1. Written Examination

This examination assesses the trainee's theoretical knowledge base (including recent advances) and problem-solving capabilities in the child and adolescent psychiatry specialty; it is delivered in MCQ format and is held at least once per year. The number of examination items, eligibility, and passing score are established in accordance with the Commission's training, and examination rules and regulations. Examination details and a blueprint are published on the Commission's website, www.scfhs.org.sa

## 2. Oral Structure Clinical Examination (OSCE):

This examination assesses a broad range of high-level clinical skills, including data gathering, patient management, communication, and counseling. The examination is held at least once per year, as an objective structured clinical examination (OSCE) in the form of patient management problems (PMPs). Eligibility and the passing score are established in accordance with the Commission's training and examination rules and regulations. Examination details and a blueprint are published on the Commission website, <a href="https://www.scfhs.org.sa">www.scfhs.org.sa</a>

## Certification

A certificate acknowledging training completion will only be issued to the fellow upon successful fulfillment of all program requirements. Candidates passing all components of the final specialty examination are awarded the "Saudi Fellowship of Child and Adolescent Psychiatry" certificate.

#### POLICIES AND PROCEDURES

## **Duty Hours Policy**

The training program conforms to the Saudi Commission for Health Specialties regulations.

#### **Duty Hours**

Schedules for fellows in child and adolescent psychiatry programs will be per assigned hospital policy or as follows:

#### Working hours

Sunday through Thursday, O.P.D and C/L: fellows are on duty 8:00 A.M.-5:00 P.M.

During working hours, fellows are expected to be readily available. It is the fellow's responsibility to inform the attending as to their whereabouts. Pagers should be carried at all times and pages must be answered promptly. If it is necessary for a fellow to leave work at any time, it is that fellow's responsibility to arrange for another physician to cover for him/her and to inform the supervisor, the chief fellow or the program director. If a fellow feels that his or her hours are repeatedly too long, this should be brought to the attention of the chief fellow who shall determine where the problem, if any, lies and attempt to solve it.

Fellows shall be responsible for all inpatients assigned to them with the understanding that the on-call fellow is only responsible for patients admitted after working hours as per assigned hospital policy. Coverage during leave or vacation must clearly be delineated.

## **On-Call Activities**

On-call duties are in compliance with assigned hospital duty hours policy and procedures. On-call occurs no more frequently than every third night, averaged over a four-week period. No distinction is made between fellows' levels in scheduling the night calls. Hospital on-call duty must not exceed 24 consecutive hours. Fellow may remain on duty for up to six additional hours to participate in didactic activities, transfer care of patients, conduct outpatient clinics, and maintain continuity of medical care. No new patients will be assigned to a fellow on-call after 24 hours of continuous duty.

The chief fellow shall construct an on-call schedule for each month. Any special requests will be considered prior to the formulation of the schedule. The call schedule will reflect the names of the on-call fellow and the faculty back-up. If a fellow is unable to take call for any reason, he should contact the chief fellow during working hours and the faculty on-call after working hours. The chief fellow and the on-call faculty bear ultimate responsibility for finding a replacement. When the fellow is on another service, the policy and procedures regarding availability and call shall be the same as any fellow on that service.

All fellows must have a home telephone number or mobile number on file with the fellow program, the on-call roster, and the hospital switchboard.

#### **On-Call Responsibilities**

The fellow (on-call or inpatient) who begins, at any time, an admission is responsible for completing the admission unless another resident explicitly agrees to take over.

## Changes in the Call Schedule:

After the call schedule has been distributed for the coming month, individual fellows may make changes with another upon mutual agreement of the parties. The chief fellow and the fellowship training coordinator must be notified of the changes by the fellow originally scheduled to be on call for a given day so that changes can be made on the hospital call list. If the appropriate parties are not notified of changes to the call schedule, for whatever reason, it will be assumed that the fellow originally listed on the schedule will be on call, and he or she will be held responsible for those call duties.

## Holiday and Weekend Call

Holiday and weekend on-call duties will be distributed as fairly as possible among all trainees at their respective call levels.

## **Work-Hour Monitoring**

The program conforms to the assigned hospital policy work hours monitoring program for all rotations. Work hour violations are monitored and corrections are made for compliance issues.

## Faculty Back-Up

The on-call attending must be available when he or she is called by the fellow on-call for backup when needed, whether at inpatient units or the emergency room.

## **Supervision and Graded Responsibilities**

The program adheres to SCFHS fellows' supervision and graded responsibilities policy located on the SCFHS website.

Fellows will be overseen by a teaching supervisor in such a way that the fellows assume progressively increasing responsibility according to their level of education, ability, experience, and clinical responsibilities

#### **General Statement**

During the rotations, each fellow will be under direct supervision every day. The supervisor observes the fellows' progress in developing and carrying out assessments and management plans. The supervisor observes fellows counseling and educating patients and their families and provides feedback as needed.

#### **Inpatient Services**

During the inpatient rotation—if available—all fellows will be directly supervised on a daily basis and observe the fellow progress in developing and carrying out management plans in cooperation with a multidisciplinary team. Direct, teaching-oriented supervision is provided

for newly admitted patients to the service, direct supervision in individual patient care and family meetings by faculty. In the daily rounds to the inpatient units and the weekly multidisciplinary rounds, the attending supervisor should provide direct verbal feedback to the resident and a more structured written evaluation and feedback at the end of the rotation.

#### **Outpatient Services**

Every patient evaluated and treated in the outpatient departments of the psychiatry department is also evaluated and closely supervised by an attending. Fellows will have direct supervision of their interviewing skills and Mental Status Examination (MSE), followed by discussion and a management plan. The minimum expectation is for direct supervision of the MSE and management plan. Evaluation, treatment planning, and patient progress is reviewed by the attending and discussed with the resident on a regular basis. Fellows will receive regular feedback related to areas of improvement during and at the end of the rotation.

## **Documentation of Supervision**

All cases need to be documented in the log book

## Fellow's Responsibilities

Fellows should arrange their schedules to permit full and regular participation in scheduled seminars, regular supervision, and other educational activities of the department. Patient appointments, clinical duties, rounds, and research activities should be scheduled so that they do not conflict with supervision and seminars. Schedule conflicts should first be brought to the attention of the fellow's immediate supervisor. If satisfaction cannot be achieved, then such schedule conflicts should be appealed to the chief fellow and then to the program director.

#### **Graded Responsibilities**

- 1) Fellows will have graduated responsibilities based upon their successful progression through each year of training, with due concern for the benefit and safety of the patients.
- 2) Fellows cannot become competent to make judgments of increasing complexity or perform procedures of increasing difficulty without involvement in the decision-making process throughout their fellowship training. Whenever possible, the responsibility of "first decision" shall be relegated to fellows, with all patient care decisions subject to review and modification by faculty clinicians, who shall have the final decision in all cases.
- As appropriate, fellows will have some responsibility for the supervision and education of junior residents, in keeping with SCFHS residents' graded responsibilities policy.
- 4) While faculty have the ultimate authority for patient care, both faculty and fellows, at all levels, bear individual responsibility for their actions with respect to patient care, scholarly activities, and teaching others. During training, significant and varied supervision is offered through teaching-focused rounds and structured seminars, many of which implement case discussion.

# In-Training Evaluation Report (ITER) - Child Psychiatry Fellowship Program

Date:		
Fellow:		Supervisor:
Reg No:		
Rotation:		Date of Rotation:
Level (Please check one):	FY1 □	FY2 □

	Knowledge/Skill	Below Expected 1 2 3	Expected 4 5 6	Above Expected 7 8 9	N/A	Comments
	MEDICAL EXPERT KNOWLEDGE					
1)	Basic science: physiology, neuroanatomy, neurochemistry, genetics					
2)	Etiology, symptoms, and course of illness					
3)	Normal and abnormal development and psychology					
4)	Psychotherapeutic constructs: individual, family, group					
5)	Knowledge of indication, dosing, side effects, and interactions of psychotropic medications					
6)	Cultural, gender, and age specific theoretical, clinical and therapeutic issues					
7)	Community resources					
8)	Health care regulations and confidentiality					
9)	Ability to reference and use existing literature pertinent to clinical practice and ability to make a critical appraisal					
10)	Nosology (DSM V)					

	Knowledge/Skill	Below Expected 1 2 3	Expected 4 5 6	Above Expected 7 8 9	N/A	Comments
	MEDICAL EXPERT SKILLS					
1)	Establishes and maintains rapport and effective working relationships					
2)	Organizes and conducts appropriate interviews					
3)	Performs appropriate mental status examinations					
4)	Synthesizes differential diagnoses or diagnoses					
5)	Integrates and presents a biopsychosocial understanding					
6)	Develops and implements integrated treatment plans					
7)	Independently uses psychiatric, psychological, and medical diagnostics and investigations					
8)	Uses appropriate psychotherapies (specify types in comments section)					
9)	Manages own reaction to patients					
10)	Effectively uses pharmacotherapy					
11)	Effectively uses somatic therapy (electroconvulsive therapy)					
12)	Maintains accurate and complete medical records					
13)	Demonstrates overall proficiency in technical and procedural skills with minimal risk and discomfort for the patient					
14)	Possesses the ability to assess, document, and intervene regarding suicidal or homicidal risk and/or other emergencies					
	COMMUNICATOR					
1)	Listens effectively					

	Knowledge/Skill	Below Expected 1 2 3	Expected 4 5 6	Above Expected 7 8 9	N/A	Comments
2)	Ability to convey to patients and families accurate, coherent accounts of diagnoses, treatment plans, and prognoses					
3)	Discusses appropriate information with health care team					
4)	Effectively conveys pertinent information and opinions to medical colleagues					
5)	Prepares documentation that is accurate and timely; possesses the ability to write a comprehensive organized medical note					
	COLLABORATOR					
1)	Effectively consults with other physicians and health care professionals					
2)	Ability and willingness to teach and learn from colleagues					
3)	Ability to work collaboratively with other members of health care team, recognizing roles and responsibilities					
4)	Contributes to interdisciplinary team activities					
	MANAGER					
1)	Understands and makes effective use of information to optimize patient care, life-long learning, and other activities.					
2)	Makes cost-effective use of resources based on sound judgment					
3)	Evaluates the effectiveness of resource use					
4)	Ability and willingness to direct patients to relevant community resources					

ž.	Knowledge/Skill	Below Expected 1 2 3	Expected 4 5 6	Above Expected 7 8 9	N/A	Comments
5)	Sets realistic priorities and uses time effectively in order to optimize professional performance					
6)	Applies practice management principles					
7)	Coordinates the efforts of the treatment team					
	HEALTH ADVOCATE					
1)	Awareness of structures in mental health care					
2)	Awareness of major regional, national, and international advocacy groups in mental health care					
3)	Identifies and understands determinants of health affecting patients and communities, responding appropriately in advocacy situations					
	SCHOLAR					
1)	Demonstrates understanding of and commitment to the need for continuous learning; develops and implements personal learning strategies					
2)	Critically appraises medical information and successfully integrates information from a variety of sources					
3)	Helps others learn through guidance, teaching, and constructive feedback					
4)	Contributes to the development of new knowledge					
5)	Demonstrates awareness and application of research principles					
6)	Possesses the ability to supervise junior residents and students					
	PROFESSIONAL					

	Knowledge/Skill	Below Expected 1 2 3	Expected 4 5 6	Above Expected 7 8 9	N/A	Comments
1)	Demonstrates integrity, honesty, compassion, and respect for diversity					
2)	Fulfills the medical, legal, and professional obligations of a psychiatrist					
3)	Maintains collaborative and respectful patient relationships that demonstrate gender and cultural awareness					
4)	Demonstrates responsibility, dependability, self-direction, and punctuality					
5)	Accepts and makes constructive use of supervision and feedback					
6)	Shows awareness and application of ethical principles					
7)	Shows awareness of personal limitations					
8)	Understands and applies the regulations pertaining to access to health care records by patients or others					
	ADDITIONAL COMMENTS					
Nar	ne of fellow:					
Sigr	nature:		Date:			
Sup	ervisor's name:					
Sigr	nature:		Date:		-	
Inst	itute training supervisor:					
	nature:		Date:		-	
	owship training director:		Signature:		-	
Dat	e:					

## Portfolio and logbook

#### **Portfolio**

- 1) Portfolio will be an integral component of training.
- 2) Each fellow will be required to maintain a logbook.
- The educational supervisor should be in charge of monitoring and reviewing the portfolio and provide continuous feedback to the fellow.
- 4) Portfolio should include the following:
  - a) Curriculum vita
  - b) Professional development plan
  - c) Records of educational training events
  - d) Reports from the educational supervisors
  - e) Logbook
  - f) Case write-ups (selected)
  - g) Reflection
  - h) Other: patient feedback, clinical audits, etc.

## Logbook

The logbook is part of the portfolio. The purposes of the logbook are to:

- 1) Monitor fellow's performance on a continual basis
- 2) Document the cases seen or managed by the fellow
- 3) Record the procedures and technical intervention performed
- 4) Enable the fellow and supervisor to determine learning gaps
- 5) Provide a basis for feedback

#### **Principles**

The portfolio and logbook should be reviewed by the supervisor with the fellow weekly and, if found to be complete and satisfactory, reviewed by the main supervisor at the center. It should be completed to allow the fellow to sit for the promotion exam or the final exam.

## Mini-Clinical Evaluation Exercise (Mini-CEX)

## **Purpose**

- 1) To evaluate the psychiatry fellow's clinical skills by direct observation
- 2) To promote learning by providing structured feedback on performance within an authentic workplace context

## Method

Supervised clinical case interview with discussion and feedback: A supervisor assesses the fellow's clinical skills using an assessment form with listed competencies and provides relevant feedback.

## **Principles**

- Approximately one session of Mini-CEX is carried out monthly (for a total of 10–12 sessions annually)
- 2) Minimum of 15 minutes for observation and 15 minutes for feedback each session
- 3) Fellow should get at least 5 (satisfactory) out of 9 in the Mini-CEX to pass and to set for the end of 1<sup>st</sup> year promotion exam or to pass 2<sup>nd</sup> Year to set for the final exam.

## Assessment criteria

The Mini-Clinical Evaluation Exercise is intended to assess fellows' ability in the following competencies:

competences							
Criterion	Below Expected 1 2 3	Expected 456	Above Expected 7 8 9	N/A	Comments		
History taking process							
History taking content							
Mental state examination							
Physical examination skills							
Communication skills							
Risk assessment							
Management							
Overall clinical judgment and decisions							
Mini-CEX time:							
Observing: minutes Providing feedback: minutes							

## High-priority areas for mini-CEX

- 1) Assessment of a psychiatric emergency (acute psychosis)
- 2) Management of a psychiatric emergency (acute psychosis)
- 3) Assessment of a high prevalence psychiatric condition
- 4) Management of a high prevalence psychiatric condition
- 5) Assessment of a low prevalence psychiatric condition
- 6) Management of a low prevalence psychiatric condition
- 7) Assessment of a severe and enduring mental illness
- 8) Management of a severe and enduring mental illness
- 9) Assessment of a psychiatric emergency (suicidal feelings and acts)
- 10) Management of a psychiatric emergency (suicidal feelings and acts)
- 11) Clinical review of a patient
- 12) Assessment of response to treatment
- 13) Obtaining informed consent
- 14) Other (specify):

## **Mini-CEX Assessment Form**

# **Child Psychiatry Fellowship Program**

Date:			
Fellow:			_
Assessor:			_
Registration No:			
Rotation: Date	e of Rotation:	<u>-</u>	
Setting: Emergency Depart	ment/ward /outpatient clinic	/other:	
Patient age:			
Competency:		_	
Level: Please check one:	FY1 □	FY2 □	
	on the trainee's performance ur overall impression. If requi		
To what degree was this ca	ise an adequate test of the tr	ainee's abilities?	
1 2 3	4 5 6		7 8 9
Inadequate	Adequate		Superior
How did the candidate per	form?		
Not met expectations	Borderline	Net Expectations □	
Above Expectations □			
Assessor's signature:	Fellow's	signature:	
Date:			

## Multi-Source Feedback (360-degree evaluation)

## **Purpose**

To assess the psychiatry trainee for interpersonal communication, professionalism, interprofessional teamwork abilities, and advocacy for patients.

#### **Principles**

Supervisor should gather information about the trainee from resident peers, other physicians, medical students, psychologists, nurses, pharmacists, and receptionists in OPD or wards. Supervisor should provide feedback to the trainee in the following areas:

- Communication
- Availability
- · Emotional intelligence
- Decision-making
- Relationships with patients
- · Relationships with patients' families
- · Relationships with their team
- Relationships with other psychiatrists

Fellow should get at least 3 out of 5 in both self-assessment and assessment by colleagues and co-workers in order to sit for the end-of-first-year exam or to pass second-year residency and sit for the final exam.

## Method

Peers, supervisors, allied health staff, and co-workers should use a detailed feedback form, presented below.

## Multi-Source Feedback (360-degree evaluation) - Psychiatry Residency Program

Date:										
Fellow:	Superv	isor:								
Registration No:	Rotation									
Date of Rotation:										
Level: Please check one: FY1 □ FY2 □										
Please rate the following skills on a scale from 1 to 5	Self-Asses	ssmei	nt			Colleagu Assessm		l Co-V	Vorke	er
for the above mentioned trainee in the following areas	2 - D	trong isagr eutra		agre	е	2 - 1	Strong Disagro Neutra	ee	agree	e
	4 - A 5 - Si	_	ly agı	ree			Agree Strong	ly agr	ee	
		(	circle	one)	1		(	circle	one)	
1. Communication skills	1	2	3	4	5	1	2	3	4	5
2. Availability	1	2	3	4	5	1	2	3	4	5
3. Emotional intelligence	1	2	3	4	5	1	2	3	4	5
4. Decision-making	1	2	3	4	5	1	2	3	4	5
5. Relationships with patients	1	2	3	4	5	1	2	3	4	5
6. Relationships with patients' families	1	2	3	4	5	1	2	3	4	5
7. Relationships with their team	1	2	3	4	5	1	2	3	4	5
8. Relationships with other psychiatrists	1	2	3	4	5	1	2	3	4	5
Mean Score										

Please provide comments on the fellow's performance. Describe what was effective, what could be improved, and your overall impression. If required, suggest actions for improvement and expected timeline.
Supervisor's signature:
Fellow's signature:
Date: