

Addiction psychiatry learning and development plan

*For trainees and Fellows completing a Certificate of Advanced training in Addiction Psychiatry.*

Please complete this plan in conjunction with your Director of Advanced Training (DOAT) and submit prior to the commencement of certificate training.

**A learning and development plan should be agreed and submitted to your DOAT for every 12 months FTE of training.**

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| --- | --- | --- | --- | --- | --- |
| RANZCP ID | enter ID | | | |  |
| Name | enter name | | | |  |
| Training program | enter training program | | | |  |
| Director of Advanced Training | enter DoAT name | | | |  |
| Learning plan timeframe | From | select date | To | select date |  |

PLAN FOR TRAINING POSTS

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Describe the overall plan for posts across this period, as far as can be currently determined. | | | | | | |
| enter plan | | | | | | |
| If details can be determined, please note them below. *(Attach extra pages as needed.)* | | | | | | |
| **Training post 1** | | | | | | |
| (Probable) | From | select date | To | select date | FTE (e.g. 0.5, 0.6, 1.0) | enter FTE |
| Hospital or health service | enter hospital or health service | | | | | |
| Supervisor(s) | enter supervisor name | | | | | |
| **Training post 2** | | | | | | |
| (Probable) | From | select date | To | select date | FTE (e.g. 0.5, 0.6, 1.0) | enter FTE |
| Hospital or health service | enter hospital or health service | | | | | |
| Supervisor(s) | enter supervisor name | | | | | |

**Please see the** [**appendix**](#Appendix) **for a guide to completing the learning plan.**

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| Learning and development plan for: | Year 1 | | Year 2 |  |  |  |
| Learning objectives | | CanMEDS role(s) | | Activity/activities | Review Date\* | Outcome |
| enter learning objective | | enter CanMEDS role | | enter activity | enter date | enter outcome |
| enter learning objective | | enter CanMEDS role | | enter activity | enter date | enter outcome |
| enter learning objective | | enter CanMEDS role | | enter activity | enter date | enter outcome |
| enter learning objective | | enter CanMEDS role | | enter activity | enter date | enter outcome |
| enter learning objective | | enter CanMEDS role | | enter activity | enter date | enter outcome |
| enter learning objective | | enter CanMEDS role | | enter activity | enter date | enter outcome |
| enter learning objective | | enter CanMEDS role | | enter activity | enter date | enter outcome |

\*The *Learning and development plan* must be reviewed for every 12 months FTE of training and a new plan developed. Shorter timeframes can be utilised where appropriate.

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| --- | --- | --- | --- |
| Trainee signature |  | Date | select date |

DIRECTOR OF ADVANCED TRAINING DECLARATION

I confirm that the proposed learning and development plan is appropriate for a period of certificate training in addiction psychiatry. It contains:

appropriate clinical attachments and proposed duties

suitable training posts and appropriate supervision (if known)

appropriate training and professional development goals.

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| Director of Advanced Training signature |  | Date | select date |
|  |  | RANZCP ID | enter ID |

**Trainees only – Fellowship Program assessments (optional)**

Stage 3 trainees may wish to use this page to outline their plan for achievement of any outstanding centrally administered summative assessments required for Fellowship, including any relevant courses or relevant activities they are doing to facilitate completion.

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| --- | --- | --- | --- | --- |
| Learning objectives | CanMEDS role(s) | Activity/activities | Review Date | Outcome |
| Fellowship Program assessment | Multiple |  |  | Complete; or Ongoing and next review date |
| Psychotherapy Written Case | Multiple | Planned submission date (by 60 months FTE training):  Supervisor:  Targeted Learning Plan (post 60 months FTE) attached | enter date | enter outcome |
| Essay-style Exam | Multiple | Planned sitting date (by 54 months FTE training):  Targeted Learning Plan (post 60 months FTE) attached | enter date | enter outcome |
| OSCE | Multiple | Planned sitting date (by 54 months FTE training):  Targeted Learning Plan (post 60 months FTE) attached | enter date | enter outcome |
| Scholarly Project | Multiple | Proposal submission date:  Supervisor(s):  Planned submission date (by 60 months FTE training):  Targeted Learning Plan (post 60 months FTE) attached | enter date | enter outcome |

Appendix – Guide to learning and development plan

A learning and development plan will support you in developing skills in addiction psychiatry. You must complete a learning and development plan for each year of addiction psychiatry certificate training in collaboration with your Director of Advanced Training. Details as to how a learning objective might be achieved can then be elaborated in supervision.

Each rotation has specific tasks, including attaining mandatory and/or other EPAs, a mandatory OCA and appropriate case summaries. Over the total period of training the trainee must attain all mandatory clinical experiences. The *Learning and development plan* must be reviewed for every 12 months FTE of training and a new plan developed, but shorter timeframes can be used if appropriate.

For example, you may wish to attain EPA2 *Long-term management of severe alcohol use disorders* in the first rotation so use supervision to further identify the goals and tasks to meet this learning/training objective. (The following example is intended simply as a guide and is not prescriptive or ideal.)

Perform a literature review of pharmacotherapy of alcohol use disorders, conduct medical assessment sessions of patients with severe alcohol use disorders within AOD service (e.g. alcohol withdrawal and/or treatment service), complete treatment under supervision of at least 15 patients with severe alcohol use disorders including consideration and initiation of pharmacotherapy treatment in patients with severe alcohol use disorders at an AOD service, attend a meeting of a mutual help program, visit a non-clinical alcohol rehabilitation service.

You should consider the specific mandatory tasks of addiction psychiatry certificate training that you will need to complete during the term of the learning and development plan and ensure that they are complete as this plan can be used to support their achievement and serve as a checklist that you have completed the mandatory requirements.

In completing the plan, you should note which CanMEDS role(s) relates to each learning objective. See the [Fellowship competencies](https://www.ranzcp.org/Files/PreFellowship/2012-Fellowship-Program/Fellowship-Competencies.aspx) for the statements iterating the College’s understanding of psychiatry in Australia and New Zealand, described through the CanMEDS roles, i.e.:

* + Medical Expert
  + Communicator
  + Collaborator
  + Manager
  + Health Advocate
  + Scholar
  + Professional.

In order to develop your skills, you may wish to plan for WBAs associated not only with the EPAs you intend to achieve in year 1 but EPAs you will attain in year 2. The addiction psychiatry EPAs are listed below (and are available on the [Certificate of Advanced Training in Addiction Psychiatry](https://www.ranzcp.org/Pre-Fellowship/2012-Fellowship-Program/Certificates-of-Advanced-Training/Addiction-psychiatry.aspx) web page) but you may wish to achieve extra (elective) EPAs from other areas of practice as well.

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| ***EPAs 1–6: Mandatory EPAs*** |
| EPA1: Acute assessment and diagnosis of substance use. |
| EPA2: Long-term management of severe alcohol use disorders. |
| EPA3: Advanced management of substance intoxication and substance withdrawal. |
| EPA4: Management of comorbid substance use, including tobacco dependence, and other mental health problems. |
| EPA5: Treatment of substance use disorder with psychological methods. |
| EPA6: Provide training for other clinicians in delivery of brief interventions for substance use disorder. |

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| ***EPAs 7–12: Trainees are to choose two EPAs from the list below*** |
| EPA7: Alcohol and other drug (AOD) consultation–liaison. |
| EPA8: Management of chronic pain with comorbid substance misuse. |
| EPA9: Assess and manage a patient with opioid drug use problems. |
| EPA10: Treatment of people with gambling disorder and other behavioural addictions. |
| EPA11: Assess and manage complex comorbid substance use and physical health problems, including tobacco use. |
| EPA12: To be advised. |

On the following pages, the Subcommittee of Advanced Training in Addiction Psychiatry (SATADD) has provided an example learning plan with some experiences that are highly recommended.

As noted, the learning and development plan must be reviewed for every 12 months FTE of training and a new plan developed. Shorter timeframes can be utilised where appropriate. It is recommended that part-time trainees review their plan each year (i.e. each 12 calendar months) with their Director of Advanced Training.

When completing the learning plan for the first time, it is not necessary to fill in the ‘Outcome’ column. Instead, this column is to be utilised when reviewing the plan (and preparing subsequent plans) or when completing your initial RANZCP Professional Development Plan for post-Fellowship Continuing Professional Development. Trainees may wish to mark a task ‘complete’ or ‘ongoing’ so that it is put in a subsequent plan. If the learning outcome has been achieved through an activity that has been modified from the initial plan this could also be noted here.

Stage 3 trainees may also use the learning and development plan to plan achievement of any outstanding centrally administered summative assessments required for Fellowship (optional).

Example learning and development plan

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| --- | --- | --- | --- | --- | --- | --- |
| Learning and development plan for: | Year 1 | | Year 2 |  |  |  |
| ***Learning objectives*** | | ***CanMEDS role(s)*** | | ***Activity/activities*** | ***Review Date*** | ***Outcome*** |
| Understand requirements of RANZCP (or other) CPD program: generation of professional development plans. | | Scholar Professional | | Complete this learning and development plan for each training year. | [Max 12 FTE months] |  |
| Develop broad-based knowledge of addiction psychiatry. | | Medical Expert Professional Scholar | | [Describe how you plan to meet the curriculum requirements, e.g. formal teaching program, conferences, online modules, seminars/workshops, self-directed learning (texts to be read), etc. You may like to include a specific knowledge objective(s) and how you would achieve this.] |  |  |
| Attain the following Entrustable Professional Activities (EPAs): | | CanMEDS roles stated on EPA descriptions | | [State EPAs you plan to attain this training year and how they may be achieved.] |  |  |
| Achieve advanced/expert level competence in assessment and treatment in addiction psychiatry. | | Medical Expert | | Formative OCA to identify areas for improvement. |  |  |
| Gain understanding of and experience in psychological interventions in addiction psychiatry. | | Medical Expert | | Complete EPA5: *Treatment of substance use disorder with psychological methods.* |  |  |
| Gain expert understanding of and experience in the breadth of diagnostic presentations in addiction psychiatry. | | Medical Expert | | Complete case summaries. |  |  |
| Gain expert understanding of and experience in the biological, psychological and sociocultural interventions in addiction psychiatry. | | Medical Expert | | Complete case summaries. |  |  |

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| ***Learning objectives*** | ***CanMEDS role(s)*** | ***Activity/activities*** | ***Review Date*** | ***Outcome*** |
| Develop an evidence-based approach to reducing substance-related harms through consultations and liaison with other healthcare providers, including management of withdrawal or stabilisation of substance use in general medical settings and provision of training in AOD for other health practitioners. | Medical Expert Collaborator Communicator | Complete EPA7: *Alcohol and other drug (AOD) consultation–liaison.*  Consultation–liaison addiction psychiatry experience. |  |  |
| Achieve expert competence in leadership and management in addiction settings. | Manager Communicator Collaborator Professional | [E.g. Specific training in leadership and management in addiction setting, QI or QA project, leadership role with junior staff, management committee, etc.] |  |  |
| Gain proficiency in professional presentations in relation to addiction psychiatry. | Scholar Professional | Presentation in formal teaching program (Professional Presentation WBA). |  |  |
| Attain advanced understanding of gambling disorder and other behavioural addictions | Medical Expert Health Advocate | Complete EPA10: *Treatment of people with gambling disorder and other behavioural addictions.*  Plan strategy to identify patients with gambling problems within MH and AOD service. |  |  |
| Gain specific knowledge of the substance use disorders prevalence and treatment in other countries. |  | Complete literature review; select relevant articles and present at journal club. |  |  |