

<<Mandatory Certificate EPA>>

**ST3-AP-FELL-EPA9 – First presentation**

<b>Area of practice</b>	Adult psychiatry	<b>EPA identification</b>	ST3-AP-FELL-EPA9	
<b>Stage of training</b>	Stage 3 – Advanced	<b>Version</b>	v0.5 (EC-approved 24/07/15)	
<p>The following EPA will be entrusted when your supervisor is confident that you can be trusted to perform the activity described at the required standard without more than distant (reactive) supervision. Your supervisor feels confident that you know when to ask for additional help and that you can be trusted to appropriately seek assistance in a timely manner.</p>				
<b>Title</b>	<b>First presentation of a complex mental disorder.</b>			
<b>Description</b> Maximum 150 words	<p>The trainee will be able to assess adults (18–65) with a first presentation of a complex mental disorder and develop and implement a management plan. This includes:</p> <ul style="list-style-type: none"> <li>• comprehensive assessment and consideration of differential diagnoses</li> <li>• engagement and provision of education</li> <li>• interventions to assist patients and their family/carers with stigma and barriers to care</li> <li>• development of a recovery plan with the patient and their family/carers</li> <li>• initiation of psychological and pharmacological treatment as appropriate</li> <li>• appropriate follow-up.</li> </ul>			
<b>Fellowship competencies</b>	<b>ME</b>	1, 2, 3, 4, 5, 6, 7, 8	<b>HA</b>	1, 2
	<b>COM</b>	1, 2	<b>SCH</b>	2
	<b>COL</b>	1, 2, 3	<b>PROF</b>	1, 2
	<b>MAN</b>	2		
<b>Knowledge, skills and attitude required</b> The following lists are neither exhaustive nor prescriptive.	<p>Competence is demonstrated if the trainee has shown sufficient aspects of the knowledge, skills and attitude described below.</p> <p><b>Ability to apply an adequate knowledge base</b></p> <ul style="list-style-type: none"> <li>• Demonstrate knowledge of evidence-based interventions in adults with a first presentation of a mental disorder, including their long-term effectiveness.</li> </ul>			

	<ul style="list-style-type: none"> <li>• Integrate knowledge from the scientific literature regarding adults with a first presentation of a mental disorder into clinical work. For example, knowledge about stigma, the significance of the duration of untreated psychosis, engagement and barriers to care.</li> </ul> <p><b>Skills</b></p> <ul style="list-style-type: none"> <li>• Conduct a comprehensive biopsychosociocultural assessment including a sophisticated risk assessment.</li> <li>• Integrate the information collected and develop a competent formulation, identifying gaps in the available information.</li> <li>• Develop and defend an appropriate differential diagnosis, acknowledging the degree of uncertainty that may be present in the first presentation of a mental disorder.</li> <li>• Gather collateral information from family/carers or other appropriate sources, with due regard to privacy considerations.</li> <li>• Plan and implement appropriate investigations to clarify the diagnosis.</li> <li>• Provide explanation and education to patients with a first presentation of a mental disorder and their family/carers regarding the differential diagnosis and treatment options.</li> <li>• Develop skills and strategies to engage patients with a first presentation of a mental disorder and their families/carers in ongoing care.</li> <li>• Develop an integrated and flexible biopsychosociocultural management plan in collaboration with the patient and their family/carers.</li> <li>• Develop a plan consistent with recovery framework principles in collaboration with the patient and their family/carers.</li> <li>• Implement this plan, under supervision, and in collaboration with the patient and their family/carers, the multidisciplinary team and other services and health professionals.</li> </ul> <p><b>Attitude</b></p> <ul style="list-style-type: none"> <li>• Advocate on behalf of patients and their family/carers to improve overall outcomes and access to services and supports.</li> <li>• Appreciate the ethical issues in the assessment and treatment of people with a first presentation of a mental disorder. In particular, the tension between beneficence and nonmaleficence and the maintenance of autonomy while managing risks appropriately and safely.</li> <li>• Respect the patient's goals for their care.</li> </ul>
<b>Assessment method</b>	Progressively assessed during individual or clinical supervision, including three appropriate WBAs.
<b>Suggested assessment method details</b>	<ul style="list-style-type: none"> <li>• Case-based discussion.</li> <li>• Mini-Clinical Evaluation Exercise.</li> <li>• Observed Clinical Activity (OCA).</li> <li>• Direct Observation of Procedural Skills (DOPS).</li> </ul>

## References

COL, Collaborator; COM, Communicator; HA, Health Advocate; MAN, Manager; ME, Medical Expert; PROF, Professional; SCH, Scholar