ST3-CAP-AOP-EPA6 – Assess culturally and linguistically diverse children/adolescents

<table>
<thead>
<tr>
<th>Area of practice</th>
<th>Child and adolescent psychiatry</th>
<th>EPA identification</th>
<th>ST3-CAP-AOP-EPA6</th>
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<tbody>
<tr>
<td>Stage of training</td>
<td>Stage 3 – Advanced</td>
<td>Version</td>
<td>v0.7 (EC-approved 10/04/15)</td>
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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.

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<thead>
<tr>
<th>Title</th>
<th>Conducts an assessment of culturally and linguistically diverse children and adolescents.</th>
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**Description**

Maximum 150 words

The trainee:

- adapts interviewing style to accommodate language and cultural differences
- effectively utilises an interpreter when required
- demonstrates a respectful stance with regards to the family’s cultural background, acknowledging the limits of their own knowledge and seeking advice and information regarding culturally appropriate interactions as required
- demonstrates an understanding of how the family’s cultural background and experiences may have influenced the development of the identified child/adolescent and the expression of psychopathology
- is aware of the role of different cultural agencies.

**Detailed description**

If needed

The framework of this EPA could be used with Māori or Aboriginal and/or Torres Strait Islander children and adolescents.

**Fellowship competencies**

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<th>ME</th>
<th>1, 2, 3</th>
<th>HA</th>
<th>1</th>
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<td>COM</td>
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<td>COL</td>
<td>1, 2</td>
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<td>2</td>
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<tr>
<td>MAN</td>
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**Knowledge, skills and attitude required**

The following lists are neither exhaustive nor prescriptive.

Compentence is demonstrated if the trainee has shown sufficient aspects of the knowledge, skills and attitude described below.

**Ability to apply an adequate knowledge base**

- Understands the interaction between culture and the individual child and family’s presentation.
- Develops knowledge of cultural differences in the child/adolescent and family’s understanding of mental illness.
- Understands the principles of transcultural psychiatry.
- Aware of culturally appropriate support services.

**Skills**

- History taking and examination shows awareness of cultural issues in relation to the needs of the child and the needs of their family.
- Identifies and uses resources that are culturally, developmentally and socially relevant and available.
- Uses culturally and developmentally appropriate verbal and non-verbal communication.
- Encourages discussion, questions and interaction within the clinical encounter.
- Identifies when and how to utilise an interpreter appropriately.
- Identifies when, and how, to seek assistance from a cultural liaison worker (where available).
- Recognises complexity and is able, with supervision, to formulate a management plan.

**Attitude**

- Openness and respect for the diversity of children and their families.

**Assessment method**

Progressively assessed across different age groups during individual and clinical supervision, including three appropriate WBAs.

**Suggested assessment method details**

- Case-based discussion.
- Observed Clinical Activity (OCA).
- Mini-Clinical Evaluation Exercise.
- Direct Observation of Procedural Skills (DOPS).

**References**

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