

ST3-CL-AOP-EPA7 – Psychiatric illness in a patient with a chronic medical illness

Area of practice	Consultation–liaison psychiatry	EPA identification	ST3-CL-AOP-EPA7	
Stage of training	Stage 3 – Advanced	Version	v0.5 (EC-approved 10/04/15)	
<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>				
Title	Assess and manage psychiatric illness in patients with a chronic medical illness.			
Description Maximum 150 words	The trainee must demonstrate an ability to assess, identify and manage psychological distress and/or psychiatric illness in a patient with a chronic medical illness.			
Fellowship competencies	ME	1, 2, 3, 4, 5, 6, 7, 8	HA	1, 2
	COM	1, 2	SCH	1, 2
	COL	1, 2, 3, 4	PROF	1, 2, 3, 4
	MAN	1, 2, 4		
Knowledge, skills and attitude required 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>Ability to apply an adequate knowledge base</p> <ul style="list-style-type: none"> • Common psychological responses of individuals with a chronic medical illness including abnormal illness behaviour. • Common psychiatric comorbidities in individuals with a chronic medical illness. • Common psychological symptoms related to the underlying chronic medical illness. • Psychodynamic factors, eg. countertransference, transference and therapeutic nihilism, and how these factors can influence the behaviour of the health provider. • Appropriate biological, psychological and social therapies to manage psychiatric symptoms in patients with a chronic medical illness. • Challenges of the use of medications in patients with a chronic medical illness, eg. drug interactions. • Aware of the evidence basis for psychological and other interventions for improving quality of life in chronic illness. <p>Skills</p> <ul style="list-style-type: none"> • Provides a comprehensive biopsychosocial assessment including consideration of: 			

	<ul style="list-style-type: none"> - treatment adherence - family and cultural factors - the patient's understanding of the illness - illness related behaviour. <ul style="list-style-type: none"> • Works collaboratively with other health professionals to provide a psychiatric assessment and manage patients with chronic medical illness. • Develops and recommends an appropriate management plan in a consultation or liaison role. • Demonstrates effective verbal and written communication skills. • Ability to take into consideration the patient's expressed will and preferences, prioritise these and negotiate tensions when these cannot be the primary consideration. • Ability to instil hope in the patient and their carers. <p>Attitude</p> <ul style="list-style-type: none"> • Understands the importance of advocacy. • Aware of the impact on the treating team of caring for people with chronic medical illness. • Aware of the limitations of a consultation–liaison role. • Models a hopeful and optimistic attitude with an understanding of patient dignity. • Attitude of openness to a range of views about potentially helpful strategies.
Assessment method	Progressively assessed during individual and clinical supervision, including at least three appropriate WBAs.
Suggested assessment method details	<ul style="list-style-type: none"> • Mini-Clinical Evaluation Exercise. • Case-based discussion. • Observed Clinical Activity (OCA).
<p>References</p> <p>COGHLAN R, LAWRENCE D, HOLMAN CDJ & JABLENSKY AV. <i>Duty to care: physical illness in people with mental illness</i>. Perth: The University of Western Australia, 2001.</p>	

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