CURRICULUM

ADVANCED TRAINING

CONSULTATION-LIAISON

PSYCHIATRY

Curriculum to be read in conjunction with the Regulations and Logbook for Advanced Training in Consultation-Liaison Psychiatry
CURRICULUM ADVANCED TRAINING
CONSULTATION LIAISON PSYCHIATRY

Goals

1. To advance training in consultation liaison psychiatry including the ability to establish and maintain such a service at another institution.

2. To teach the clinical skills of making precise observations and utilising such information in formulating recommendations and implementing psychosocial therapeutic interventions in the medical setting.

3. To enhance understanding of the interrelationships among psychosocial and biomedical factors in the medically ill.

4. To train academic leaders in consultation liaison psychiatry and stimulate interest in clinical research in this field.

5. To create services with the organisational and administrative skills needed to work within the financial and political realities of general hospitals and health care systems and to maintain links with both mental health services and general hospital services.

6. To develop an understanding of and an ability to work with interdisciplinary teams in the care and management of the medically ill patient.

7. To educate psychiatric trainees and colleagues and non-psychiatric health care workers and medical students about psychiatric complications of medical illness.

Attitudes

Consultation liaison trainees should develop the following attitudes:

1. An appreciation of the issues facing the patient and the psychiatrist in a non-mental health care setting.

2. Commitment to working within the broader health care system.

3. Advocating for patients with psychiatric/psychosocial problems in the non mental health care setting.

4. An appreciation of cultural diversity with particular attention to the needs of indigenous populations and with an understanding of the ways this affects illness experience and treatment.
Advanced trainees in consultation liaison psychiatry are expected to demonstrate an advanced stage of competency and knowledge in the following:

**Emotions and Behaviours**

**Skills**

Ability to:

1. Collect a history, conduct a mental state evaluation and create a formulation in the presence of complex and changing emotional states in the context of illness
2. Utilise information from other sources in the assessment and ongoing monitoring of these states, including data from family and friends, and from other health professionals
3. Assess reaction to illness and consequent behaviour, and to determine the adaptive and maladaptive components
4. Recognise the presentation of depression and anxiety in the medical setting
5. Assess and safely manage symptoms of overwhelming distress, suicidality and extreme agitation
6. Recognise and evaluate the symptoms and processes of grief and bereavement
7. Recognise and evaluate the symptoms and processes of stress and trauma including acute stress reactions and post traumatic stress disorders
8. Assess and manage patients with pre-existing and new psychotic illnesses within the medical setting
9. Recognise the impact on staff of distressing situations, and the ability to evaluate the effect on staff behaviour and to modulate its effects where necessary
10. Manage a wide variety of behavioural disturbances.

**Knowledge**

1. Understand the common patterns of psychological morbidity in patients with medical illness in differing medical settings and in both inpatient and outpatient presentations
2. Understand the common physical and biological causes of psychological symptoms
3. Understand the core symptoms that occur in response to loss
4. Understand the core symptoms of depression and anxiety in the medically ill and recognise their clinical presentation including specific understanding of demoralisation; major depression; acute stress reactions
5. Understand the pattern and presentation of suicidal ideation and potential suicide in the medically ill
6. Understand the common response patterns to acute medical illness including the impact of personality factors and the impact of the features of the illness itself
7. Understand the epidemiology, core symptoms, course and impact on illness of major depression
8. Understand the epidemiology, core symptoms, course and impact of anxiety disorders especially panic disorder
9. Familiarity with the different presentations, epidemiology and course of depression and anxiety in a variety of medical settings including the use of measurement tools and their limitations
10. Detailed understanding of the assessment and management of grief reactions in the medically ill, including their common and specific features
11. Detailed understanding of the acute and long term response to trauma and its management.
Development and Adaptation

Skills

Ability to:

1. Identify the effects of illness on the patient and their social networks with reference to general and disease-specific characteristics
2. Create a formulation from the longitudinal history of the patient which takes into account the patient's strengths and vulnerabilities
3. Develop a clinical formulation that identifies the key developmental issues across the life cycle for the individual patient
4. Take a developmental perspective when assessing the burden of illness, and when assessing the combined trajectories of the illness and the patient as a person
5. Develop a clinical formulation taking into account cultural issues with special attention to indigenous peoples
6. Assess the strengths and needs within the patient's support systems
7. Consider the family or other social unit to which the patient belongs
8. Develop a clinical formulation addressing the longitudinal effects of illness and treatment on the patient's social network and/or family system
9. Formulate the needs and strengths in terms of the medical setting and the involved health professionals
10. Assess and formulate the impact of illness on gender roles, body image and sexuality across the life cycle
11. Conduct clinical assessments in the setting of terminal illness including interactions between patient, family and staff
12. Appreciate and respond to the varying personal responses to death and dying among patients, their families and among health professionals
Knowledge

1. Understand the biological, psychological and social impact of illness and common patterns of response and adaptation

2. Understand the key determinants of adaptation in terms of personal, developmental, familial, and social factors within key theoretical frameworks

3. Understand characteristics of common acute and chronic illnesses and their contribution to response and adaptation

4. Understand the impact of illness on family, and the role of family, social networks, and maturation level on adjustment and outcome

5. Understand the different needs and challenges of different stages of life and how these impact on presentation in a general hospital

6. Knowledge of loss and bereavement across different life stages in relation to medical illness

7. Understand the key determinants of adherence to medical regimes and of strategies to modify this where necessary

8. Knowledge and understanding of common psychological responses and their determinants among health care professionals

9. Knowledge of the concept of "abnormal illness behaviour" and its application

10. Understand the issues facing patients, donors and their families, and health professionals in the area of live donor and cadaveric organ transplantation

11. Understand the disorders of obstetric and reproductive function and their impact on patients and their families, including assisted reproductive technologies

12. Understand parenting roles and their changing nature in illness and health

13. Understand the role of the child in illness and health

14. In depth knowledge of the role of psychiatry in the care of the dying patient and those participating in their care

15. In depth understanding of the life cycle as applied to at least one chronic condition and how this interacts with life span, with attention to its differential impact on men and women.
**Somatisation**

**Skills**

Ability to:

1. Form a therapeutic alliance with patients presenting with somatic symptoms of psychological distress
2. Take a history and perform a relevant mental state examination in patients presenting with somatic symptoms
3. Assess and formulate somatic symptoms in terms of their impact on function, and in relation to premorbid variables
4. Form a functional collaboration with health professionals in the care of patients with a somatic presentation
5. Utilise and set appropriate priorities for appropriate investigation
6. Assess and manage complex acute and chronic somatisation syndromes in a variety of settings.

**Knowledge**

1. Understand clinical presentation, epidemiology, public health significance, differential diagnosis and clinical course of somatoform disorders and factitious disorder
2. Knowledge of the importance of bodily function and appearance in health and illness
3. Understand somatisation as a common process
4. Understand the determinants of somatisation in terms of personality, culture, family, and health care professional behaviour
5. Knowledge of the neurophysiological, psychological and interpersonal aspects of pain experience and pain response
6. Understand the theoretical models of somatisation in terms of anthropological, cultural, social, psychodynamic, and behavioural theories
7. Detailed understanding of at least one chronic disabling variant of somatisation such as chronic fatigue syndrome, chronic pain syndrome or somatisation disorder
8. Understand the theories of body image and its disorders and its applications in eating disorders, chronic illness and its treatment, cosmetic surgery and body dysmorphic disorder.
Brain Function and Neuropsychiatry

Skills

Ability to:

1. Conduct a mental state examination with particular emphasis on cognitive and intellectual functioning both as a screen and as an extended evaluation
2. Conduct a physical examination focusing on the neurological system
3. Develop a formulation identifying key domains of intellectual deficits and impairments and their likely causes
4. Recognise the role of investigation, particularly neuropsychological assessment and neurological evaluation
5. Identify impact of cognitive deficit on key areas of psychological interpersonal and social function
6. Obtain relevant information from others e.g. family, health professionals, neighbours
7. Assess the following in depth:
   a) frontal lobe function
   b) the presence of extrapyramidal signs
   c) disorders of language
8. Conduct an assessment in the uncooperative patient, or the profoundly disabled patient in an effective and sensitive manner
9. Familiarity with the use and interpretation of specialised neurodiagnostic procedures including MRI, PET, SPECT, EEG.

Knowledge

1. Knowledge and understanding of delirium and disorders of consciousness
2. Knowledge and understanding of non-pharmacological and pharmacological interventions in the care of the delirious patient
3. Knowledge and understanding of dementia and other structural brain disorders
4. Knowledge and understanding of non-pharmacological and pharmacological interventions in the management of the patient with dementia
5. Knowledge and understanding of acute and chronic effects of substance abuse, dependence and withdrawal
6. Knowledge and understanding of organic illness producing psychiatric phenomenology including common endocrine disorders and cancer
7. Understanding of course, features and difficulties associated with common neurological disorders including stroke, Parkinson’s Disease, epilepsy, MS, head injury
8. Knowledge and understanding of psychiatric aspects of focal brain dysfunction (e.g. amnestic disorders)
9. Knowledge of uncommon dementia syndromes
10. Familiarity with specific variants of delirium and their causes
11. Familiarity with uncommon neurological disorders including Huntington’s Disease, Wilson’s Disease, Motor Neuron Diseases, Tourette’s Syndrome and detailed understanding of at least one of these.
Special Populations

Skills

Ability to:

1. Conduct assessment and management appropriately in patients whose characteristics alter the common patterns including the old, children and adolescents, the developmentally delayed, those with sensory impairment, non-English speakers, indigenous peoples, or those with varying cultural and sub-cultural influences

2. Assist in communication with these groups to ensure they receive and understand they are receiving high quality medical care with extra attention to their special needs

3. Assess wishes and fears in relation to medical treatment in these groups

4. Evaluate the patient’s capacity to consent to treatment and the factors that can be addressed to improve the patient’s competence in medical decision-making

5. Obtain informed consent where appropriate and to assess the presence of the need for substitute decision making where necessary in these groups

6. Appreciate the special role of family and support groups among these special populations and to interact appropriately with them

7. Collaborate with interpreters in the assessment and care of the patient

Knowledge

1. Understand the impact of age on presentation, course and management of psychological and psychiatric disorders in the medically ill

2. Understand the special developmental needs of children and adolescents with medical illness and the psychological consequences of these

3. Understand the cultural differences in understanding and responding to illness in indigenous people

4. Understand the cultural differences in other nationalities and the impact on response to illness

5. Understand the obstacles in managing illness in those with cognitive impairment and disability

6. Knowledge of local legal and administrative requirements for
   a) assessing competence in decision-making
   b) obtaining informed consent
   c) the use of Guardianship legislation and
   d) their application in groups of patients with special needs

7. Understand the role of culture and belief in determining the meaning of bodily symptoms and illness including anthropologic, socio-cultural and psychological factors.
Emergency Psychiatry

Skills

Ability to:

1. Assess patients presenting acutely in general hospital settings whether in emergency departments or in the wards in terms of immediate risks and management needs
2. Assess and manage medical emergencies in patients with psychiatric illness
3. Assess safety to staff and other patients in the general hospital setting in terms of a patient’s disturbed behaviour
4. Assess and manage medical and psychiatric risk in patients presenting with accidental or intentional self-poisoning
5. Assess and manage violence in the general hospital setting
6. Work with non-psychiatrically trained staff in assessment and management in the general hospital setting
7. Set up and manage protocols in the general hospital for assessment and management of suicidal behaviour and risk
8. Set up and manage protocols in the general hospital for assessment and management of violent behaviour
9. Manage safety and dangerousness in a variety of special settings including ICU, postnatal units and other clinical settings
10. Manage sudden, unexpected or particularly distressing death as a potential emergency for health professionals.

Knowledge

1. Detailed understanding of the risk factors for suicide, the assessment of suicide risk, and the management of suicidal intent
2. Understand risk factors for violence
3. Familiarity with mental health law and its application in situations of dangerousness
4. Familiarity with suicidality in specific medical populations and their specific management issues
5. Familiarity with health law as it concerns emergency decision making in the medical setting.
Treatment

Skills

Ability to:

1. Construct a management plan addressing the biological, psychotherapeutic and social aspects of the patient’s problems, with special attention to the medical problems
2. Communicate the plan in written and oral form to facilitate its implementation
3. Monitor progress and continue treatment alliance with patient and with treating team
4. Construct management strategies which will facilitate the work of the treating team in terms of environmental, medical, or personal flexibility
5. Formulate and address problems arising in the relationship between the patient and treatment team
6. Plan and implement treatment in a variety of inpatient and outpatient settings including intensive care settings
7. Provide psychotherapeutic interventions for patients with a variety of medical conditions including:
   - Individual psychotherapy
   - Family and couples therapy
   - Group-based interventions
8. Plan and monitor complex treatment regimes in conjunction with other health professionals
9. Assess, monitor and optimise adherence to medical and psychiatric treatment regime.

Knowledge

1. Understand the use of psychotropic medication including the impact of common unwanted effects in the presence of other drugs and in the context of medical illness
2. Understand common toxicity syndrome including serotonin syndrome and neuroleptic malignant syndrome
3. Knowledge of appropriate modifications for basic psychodynamic, cognitive behavioural, and supportive psychotherapy in the presence of medical illness with special attention to cognitive limitations
4. Understand supportive staff work and the need to manage the impact of trauma
5. Detailed knowledge of psychotropic medication use in the medically ill
6. Knowledge of the role of ECT in the medical setting
7. Detailed understanding of the theoretical framework for at least one modality of psychotherapy in the medically ill
8. Understand the variable impact of disease course and prognosis on treatment plans, including the impact on health professionals and the therapist
9. Understand the complex social interactions which exist in the patient’s intra- and extra-hospital environment and the impact of these on treatment
10. Understand the theoretical framework for group, couple and family therapy in the medically ill.
Systems

Skills

Ability to:

1. Function effectively as a psychiatrist in a multi-disciplinary team
2. Respond effectively to a psychiatric referral in the general hospital setting
3. Function within the environment of a general hospital taking into account the complexities of the system and the needs of its staff
4. Function within the environment of the broader community taking into account the complexities of the needs of both health and non-health care services
5. Conduct an interview identifying the impact of illness on family and other social networks
6. Develop a formulation including the role of the social system and the significant issues for health care professionals.
7. Formulate the impact of physical illness and treatments on health professionals, including countertransference and the effect this has in their work
8. Interpret the factors determining referral in the general hospital
9. Identify and respond effectively to the issues arising for health professionals in the assessment and treatment of patients with a particular emphasis on countertransference
10. Design interventions taking the systemic structures into account
11. Interface with systems in the hospital and within the community so as to create integrated care for patients and their families
12. Attend to interface between general health and mental services in a way which creates an optimal working environment
13. Develop, work in, and monitor a new liaison partnership
14. Attend to administrative issues within the liaison service including decisions regarding resource allocation
15. Monitor and optimise team structure and function within the service
16. Set up quality assurances processes with due attention to appropriate quality indicators and benchmarks.
Knowledge

1. Understand the various roles and skills within the multidisciplinary team
2. Knowledge and understanding of effective communication methods
3. Understand the importance of ward culture, how it is created and maintained
4. Understand the special character of specialised units and how it affects and is affected by the events in that unit
5. Theoretical understanding of the general hospital environment from systems, psychodynamic, and management perspectives
6. Knowledge and understanding of the different models of service delivery in consultation liaison services
7. Knowledge of management principles relevant to setting up and monitoring a service
8. Knowledge of the role consultation liaison psychiatry has in successful service delivery in medical settings
9. Knowledge of the factors that influence patterns of psychiatric referral in the general hospital setting
10. Knowledge of theoretical frameworks for understanding the culture and functioning within one specific unit and an understanding of the underpinning and determinants of this
11. Understand the impact within the hospital setting of different professional identities and roles and the strengths and vulnerabilities that arise
12. Understand and interpret the interactions of health professionals with one another and with patients in using a broad systemic view and understanding specific ward milieus and problems.
13. Understand the principles of budget management within a service.
Teaching and Research

Skills

Ability to:

1. Communicate with and educate health professionals from a wide variety of backgrounds about mental health issues with a particular emphasis on case-based and “bedside” teaching
2. Evaluate research and literature in the field of liaison psychiatry
3. Consider research questions and how they might be addressed within the general hospital
4. Plan, deliver, and assess the efficacy of a wide variety of teaching packages suitable for different professional groups and settings
5. Create a research hypothesis and to follow the required steps to implement it as a study
6. Critically appraise research literature
7. Evaluate research design applicable to consultation liaison psychiatry
8. Use, evaluate and understand basic statistical analysis.

Knowledge

1. Awareness of at least two specialist journals in psychosomatics and liaison psychiatry and their recent contents
2. Knowledge and understanding of local research in consultation liaison psychiatry and related fields
3. Knowledge of the specific research tools and methodologic issues applicable to the assessment and treatment of psychiatric morbidity in those with physical illness and/or somatisation
4. Knowledge of the role of education in the function and goals of consultation-liaison psychiatry
5. Knowledge of the key outcome studies regarding the efficacy of consultation liaison psychiatry
6. Knowledge of statistical methods for example parametric and non-parametric analyses, power analysis and basic multivariate statistical analysis
7. Knowledge of the research base for consultation liaison psychiatry role, functions and structure
8. Up-to-date knowledge of key areas of research, with detailed knowledge in an area of special interest
9. Understand teaching methods and their application in general hospital settings
10. Understand the principles of patient education.
Ethics

Skills

Ability to:

1. Identify common ethical issues in the practice of psychiatry within the general hospital setting
2. Formulate the key ethical dimensions within a specific clinical situation
3. Seek help, advice and consultation from appropriate local sources in regard to ethical dilemmas
4. Identify the role of psychiatry in the assessment, evaluation and response to ethical dilemmas arising in the care of the medical patient, with specific attention to
   a) withdrawal of a life-sustaining treatment
   b) organ donation and transplantation
   c) new medical technologies (such as genetic testing)
   d) allocation of high cost treatments
   e) the care of the “special patient”
   f) boundary violations in the medical setting.

Knowledge

1. Understand the concepts of autonomy, competence, informed consent, advance directives, confidentiality, and physician-patient relationship
2. Understand the professional ethical requirements of a psychiatrist and the special character of these within a general hospital setting
3. Knowledge of appropriate local health law applicable to situations in a general hospital
4. Familiarity with the literature concerning
   a) withdrawal of life-sustaining treatment
   b) organ donation and transplantation
   c) new medical technologies
   d) allocation of resource
   e) boundary violations
   f) stigma with regard to the needs of the patient with mental health issues.

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