



The Royal  
Australian &  
New Zealand  
College of  
Psychiatrists



## Education and Training

Certificate of Advanced Training in Youth Psychiatry Regulations

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# CERTIFICATE OF ADVANCED TRAINING IN YOUTH PSYCHIATRY

<b>Authorising committee/department:</b>	Committee for Training
<b>Responsible committee/department:</b>	Subcommittee for Advanced Training in Youth Psychiatry
<b>Document code:</b>	REGS EDT-TRN Certificate of Advanced Training in Youth Psychiatry
<b>Date:</b>	June 2026

## INTRODUCTION

The Certificate of Advanced Training in Youth Psychiatry provides an opportunity for accredited training in Youth Psychiatry for trainees working towards Fellowship and Fellows of the Royal Australian and New Zealand College of Psychiatrists (RANZCP) who meet the selection and mandatory requirements for the Certificate of Advanced Training in Youth Psychiatry. The award of the Certificate of Advanced Training in Youth Psychiatry, or “Cert. Youth Psych” recognises completion of such training.

Trainees who undertake the Certificate of Advanced Training in Youth Psychiatry and Stage 3 of the Fellowship Program concurrently must follow the [Stage 3 Mandatory Requirements Education Training Policy](#) for both programs.

The Certificate of Advanced Training in Youth Psychiatry is under the governance of the Committee for Training (CFT) of RANZCP through the Subcommittee for Advanced Training in Youth Psychiatry (SATYP). In each Branch of the RANZCP, where a Youth Psychiatry program exists, a Director of Advanced Training (DoAT) coordinates this training and the processes described in these regulations.

Regulations to be read in conjunction with the Curriculum for the Certificate of Advanced Training in Youth Psychiatry.

For the purpose of this document, trainee refers to both trainees and Fellows-in-training unless stipulated otherwise.

### 1 Eligibility

- 1.1 Applicants must satisfy all requirements to enter the Certificate of Advanced Training in Youth Psychiatry.
  - 1.1.1 Applicants must hold current, general or specialist registration as a medical practitioner in Australia or current registration within a general, vocational or special scope of practice in New Zealand, as appropriate to the country where the applicant is to be employed and trained.
  - 1.1.2 Fellow applicants who have any special conditions, limitations, notations, undertakings or provisional requirements imposed on their medical registration must provide full disclosure of the nature of these at the time of application.
  - 1.1.3 If the DOAT deem the applicant’s appropriate for training having determined that the conditions do not impact on Youth Psychiatry training, the DOAT will make recommendations to the SATYP to grant entry to an applicant who has any special conditions, limitations, notations, undertakings or provisional requirements imposed on their medical registration.
  - 1.1.4 Applicants must be in good standing and hold registration as a trainee or are a Fellow of the RANZCP.
  - 1.1.5 Trainees must have completed all Stage 2 training requirements.
  - 1.1.6 Trainees must have passed the Multiple Choice Questions (MCQ) Examination.
  - 1.1.7 Applicants must have participated in an interview with their relevant DOAT or delegate [where progression in other assessments can be considered, e.g., Psychotherapy Written Case, Clinical Competency Portfolio Review (CCPR)- replacing the CCA-MPR from Sep 2026, Scholarly Project]

- 1.1.8 Trainees must hold an appropriate accredited youth training position. While Fellows do not occupy accredited training positions, their position must be able to meet the certificate requirements.
- 1.2 Specialist International Medical Graduates (SIMG) on the Specialist Pathway are not eligible to enter the Certificate until Fellowship is awarded.

## 2 Selection

- 2.1 The selection process must be based on the published selection criteria and adhere to equal opportunity principles. The process is designed to be impartial and transparent.
- 2.2 The DOAT in conjunction with the local Subcommittee of Advanced Training (SAT) or Branch Training Committee (BTC) conducts the selection process to ensure all applicants have the requisite skills, competency and qualifications to enter the Certificate.
- 2.3 Applicants must provide the following prior to entry to the Certificate for the purpose of the interview:
  - Completed application form.
  - Current curriculum vitae detailing medical experience and past psychiatric posts.
  - Training records and In-Training Assessments (for trainees only).
  - Work performance reports (for Fellows only).
  - Contact details of three referees including current supervisor, clinical lead or equivalent.
- 2.4 Referee Reports
  - 2.4.1 Applicants are asked to nominate three referees who are able to provide information about the applicant's professional capabilities. A confidential pro forma referee report may be sent to each referee. The DOAT may follow up references by telephone if necessary and appropriate.
  - 2.4.2 The referee reports should include information on the following:
    - The applicant's competency in psychiatry including any other relevant aspects of medicine
    - The applicant's ability to work within a multidisciplinary team
    - The applicant's verbal and written communication skills and management of documentation tasks
    - The applicant's professionalism (e.g. reliability, responsibility, organisation, initiative and ethical attitudes).
    - The applicant's academic ability and attitudes towards developing their knowledge and skills
    - Applicant's collegiality with their peers, consultants and others in the workplace
    - Applicant's suitability to commence Certificate training.
  - 2.4.3 The shortlisting of applications for interview is the responsibility of the DOAT in conjunction with the local delegated body where relevant.
  - 2.4.4 The shortlisting process must be objective and transparent and may be used to reduce the number of interviews to approximately double the number of available places.
  - 2.4.5 Shortlisted applicants are to be interviewed with the relevant DOAT and/or local delegates.

## 3 Entry

- 3.1 Trainees who have been selected to the Certificate must notify the RANZCP via submission of the Advanced Training Selection Notification (ATSN) form.
- 3.2 Trainees are able to undertake two Certificates of Advanced Training concurrently (Dual Certificate training) or a maximum of two individual advanced certificates at any one time.

## 4 Duration of Training

- 4.1 Trainees are required to complete of 24 months full-time equivalent (FTE) training in an accredited Youth Psychiatry training post.
- 4.1.1 A patient care plan or 80% of the case load which consists of patients between the age range of 12-25 years. Exemptions can be applied in the following cases:
- The post must provide specialised youth care to patients over 15 years. And/ Or
  - The local service in consultation with the DoAT can arrange for suitable training experiences to meet the requirements of the certificate.
- 4.2 Up to 12 months FTE of research or medical education can be prospectively approved on a case-by-case basis by SATYP.
- 4.2.1 Trainees are expected to maintain their clinical currency by spending at least 0.2 FTE (or 1 day per week) in direct clinical work. Any application would need to detail how the required youth psychiatry EPAs and other aspects of the training program are to be completed.

## 5 Learning and Development Plan

- 5.1 An outline of proposed training (including rotations) must be drafted for years 1 and 2 of training. The learning and development plan must be agreed with and submitted to the DOAT and submitted to the RANZCP prior to the commencement of training.
- 5.2 The learning and development plan may need to be revised over the course of Certificate training. It is recommended that the learning and development plan be revised prior to the commencement of the second year of training.

## 6 Mandatory Requirements for Training Posts

- 6.1 Trainees need to be in an accredited training post and program must undertake after-hours and emergency duties as required (see Section 4 of [Stage 3 Mandatory Requirements Training Policy](#)).
- 6.1.1 Where a trainee believes there are exceptional circumstances that would prevent them from undertaking these duties, they should submit an application for exemption from afterhours experience for a specified or temporary time period to their employer and should notify their DOAT of this application.
- 6.1.2 If the application for exemption is approved, this exemption must be communicated to the BTC.
- 6.2 Fellows-in-training should discuss their duties, hours and supervision with their DOAT to fulfil the Advanced Training requirements. Fellows-in-training themselves are not in accredited training posts but must be able to demonstrate how they meet the training requirements of the Certificate.

## 7 Workplace Based Assessments Requirements

- 7.1 Trainees are subject to the requirements outlined in the [WBA Policy and Procedure v2.5](https://www.ranzcp.org/getmedia/a151f88f-ed1a-40f5-a214-fa060306162f/Policy-and-Procedure-Workplace-based-Assessments.pdf) (<https://www.ranzcp.org/getmedia/a151f88f-ed1a-40f5-a214-fa060306162f/Policy-and-Procedure-Workplace-based-Assessments.pdf>)(15.1)
- 7.2 A minimum of three Workplace-based Assessments (WBAs) are required to contribute to the evidence base for each required EPA.
- 7.3 Trainees and Fellows-in-training must complete a mandatory minimum of one Observed Clinical Activity (OCA) WBA during each 6-month FTE rotation as per the specific training requirements of their Certificate of Advanced Training.

- i. The OCA will be recorded on the end-of-rotation In-Training-Assessment (ITA) form.
- ii. The Certificate of Advanced Training OCA requirement will satisfy the Fellowship OCA requirement.

Please note: - completing one OCA WBA during each 6-month FTE rotation is required of the Certificates of Advanced Training and applies to all trainees (including transitioning trainees) and Fellows-in-training.

- *From August 2025 Stage 3 trainees who intend to apply for the CCPR from September 2026 will need to complete an [independent OCA \(IOCA\)](#) during one of their Stage 3 rotations. The IOCA can replace the mandatory OCA for that rotation.*

7.4 Once completing 24 FTE months of Certificate training, Fellows-in-training are not required to complete further WBAs.

## 8 Entrustable Professional Activities EPAs

8.1 Trainees are subject to the requirements outlined in the [Entrustable Professional Activities policy and procedure \(8.1\)](#) and [Part-time Training policy \(20.1\)](#)

8.2 Trainees must attain a minimum of eight Stage 3 Youth psychiatry Entrustable Professional Activities (EPAs) from the available list of EPAs (see Appendix I).

## 9 Completion of Rotation

9.1 Trainees must complete (formative) mid-rotation and (summative) end-of-rotation In-Training Assessment (ITA) for each 6 calendar months rotation.

9.2 Mid-rotation and end-of-rotation ITAs are to be reviewed and signed off by the principal supervisor and the DOAT prior to submission to the RANZCP.

9.3 The end-of-rotation ITA forms for each rotation must be fully completed, signed by the trainee's DOAT and submitted online via InTrain within 60 days of the completion of a rotation. Should the forms not be submitted within 90 days the rotation is deemed an automatic fail.

## 10 Formal Education Course

10.1 It is a requirement that all trainees complete a formal Youth Psychiatry teaching program.

10.2 Details of the teaching program requirements are outlined in the Training Requirements.

10.3 The formal education course can be undertaken while on a break-in-training depending on the arrangements with the course provider, DOAT and with the employing health service, where relevant.

## 11 Structured Psychotherapy

11.1 Trainees are required to treat four young people with a mental disorder for at least six sessions each with structured psychotherapy.

11.1.1 The four young people must comprise of patients under the age bracket of 12-25 years with at least one under the age of 16 years.

11.1.2 Of the treatment modalities used, at least one must be structured or manualised (e.g. CBT, IPT) and at least one must be family in any model (e.g. family, network).

11.1.3 If the supervisor is satisfied with the psychotherapy provided to each young person by the trainee and Fellow-in Training, they may sign off Advance Training Psychotherapy form after the sixth session, but the therapeutic contact may continue after the sign off date.

11.2 For Pre-Fellowship trainees, approval signature on any of the three cases handled will fulfil the Stage 3 Fellowship requirement.

## **12 Vignettes**

12.1 Trainees are required to complete 20 vignettes while enrolled in the certificate.

12.1.1 The vignettes must include at least six young people under the age of 16 and at least six aged 16 to 25.

12.1.2 The vignettes must include at least two but not more than four from each of the following diagnostic areas:

- psychosis
- mood / anxiety disorder
- intellectual disability or significant cognitive impairment
- deliberate self-harm
- attention deficit hyperactivity
- autism spectrum
- substance use
- eating disorder

12.2 They must be de-identified, typed and approximately 50-100 words in length are required for each case and should include the following:

- young person's age and gender,
- brief details of the presenting context and symptoms and,
- a formulation based on the discussion with supervisor

12.3 They are formative but must be signed by the trainee's principal supervisor and submitted to the DOAT for feedback. The number of completed vignettes per rotation will be noted on the end-of-rotation ITA form.

## **13 Submission of Final Checklist**

13.1 The final checklist must be signed by the trainee, DOAT and SATAP Chair via InTrain as declaration and confirmation that the trainee has satisfactorily completed the requirements of the Certificate.

## **14 Supervision Requirements**

14.1 Clinical supervision for trainees must be maintained at a minimum of 4 hours per week over 40 weeks for full-time trainees. Of these hours, at least 1 hour per week must be individual supervision of a trainee's current clinical work.

14.2 While 1 hour per week of individual clinical supervision is required in full for all trainees no matter FTE, the other 3 hours of supervision per week can be on a pro-rata basis for trainees working less than full time.

14.3 Fellows-in-training are required to undertake 1 hour per week FTE of individual clinical supervision for at least 40 weeks of the year.

## **15 Selection of Supervisor for Advanced Certificate Training Post**

15.1 A supervisor must be accredited in the specific area of practice by the BTC/NZTC and the DOAT in order to supervise a trainee or Fellow undertaking a Certificate.

15.2 Non-RANZCP accredited supervisors must be approved by the BTC/NZTC and the DOAT.

## 16 Training Review

16.1 All trainees are required to adhere to the [Targeted Learning Plans Policy and Procedure \(6.2\)](#) and [Failure to Progress Education Training Policy and Procedure 19.1](#) throughout the course of certificate training.

16.2 A targeted learning plan is required for Fellows when there has been a failure to successfully complete a rotation. Targeted learning plan requirements in this instance must adhere to the guidelines provided in the [Targeted Learning Plans Policy and Procedure \(6.2\)](#)

16.3 Fellows are required to submit a training review application after three rotation fails. The training review requirements are outlined in the [Failure to Progress Education Training Policy and Procedure 19.1](#) noting that applications from Fellows are considered by the SATYP in the first instance.

## 17 Awarding the Certificate

17.1 In order to be awarded the Certificate, the applicant must hold RANZCP Fellowship.

17.2 To commence the Certificate award process, the Certificate checklist must be submitted to the DOAT once all Certificate requirements have been completed and submitted.

17.3 Upon approval of the Certificate checklist and sign off from the DOAT via inTrain, the trainees record will be audited to ensure all Certificate requirements have been satisfied. The trainee cannot progress if any of the Certificate requirements, documentation or RANZCP training administration fees are outstanding.

17.4 On confirmation that all Certificate requirements have been completed, the RANZCP organises approval from the Subcommittee Chair.

17.5 On approval from the Subcommittee Chair, the application progresses via the Subcommittee to the CFT for ratification.

17.6 The CFT ratifies the award of the Certificate and makes recommendation to the Education Committee (EC) for the award of the Certificate.

17.7 The EC shall make a determination to grant awarding of the Certificate. The EC reserves the right to reject the awarding of the Certificate, despite the recommendation of the Subcommittee and CFT.

17.8 Should EC award the Certificate, trainees will be eligible to use the respective post nominals.

17.9 The EC ratification date on the Admission to Fellowship schedule is when Certificates are awarded. CFT approval is required to be finalised by the paper due date outlined in the Fellowship schedule in order to make the award round.

17.10 The RANZCP shall endeavour to adhere to the ratification deadline, as outlined in the Admission to Fellowship schedule, though it may not always be possible. Trainees are encouraged to plan in accordance with the Fellowship schedule dates to be awarded a Certificate.

## 18 Recognition of Prior Learning (RPL)

18.1 Trainees are subject to the requirements outlined in [the Recognition of Prior Learning Policy and Procedure \(14.1\)](#)

18.2 Any training and/or work experience must have been completed within the past eight (8) calendar years in order to be eligible to be considered for RPL.

18.3 Training undertaken in the Fellowship Program prior to enrolment in Certificate of Advanced Training cannot be recognised as certificate training or credited RPL, except as outlined in clauses 18.3.1 and 18.3.2 below.

18.3.1 For enrolments from August 2026 to August 2029, training completed in the Fellowship Program prior to admission into a Certificate of Advanced Training (CAT) may be considered for Recognition of Prior Learning (RPL), provided the Stage 3 term was completed within the previous five (5) years.

18.3.2 From the August 2029 rotation onwards, training completed in the Fellowship Program prior to enrolment in a Certificate of Advanced Training cannot be recognised as Certificate training or credited as RPL.

18.4 Applicants who have undertaken training that is substantially equivalent to the Certificate training may be granted, on a case-by-case basis, exemption from up to 12 months FTE of Certificate training time, and/or specific EPAs or other elements of the Certificate training.

## 19 Maximum Training Duration

19.1 Trainees must complete certificate training within 6 calendar years from the commencement date of the Certificate. This is inclusive of any breaks-in-training or part-time training.

19.2 Prior to approaching the Certificate deadline, a trainee may submit a prospective application to the Subcommittee to extend their maximum training duration due to exceptional or mitigating circumstances.

19.3 Applications should include the reason(s) for the application, a plan setting out the proposed timeline for completion of the Certificate requirements and any other relevant information (e.g. evidence of medical condition or other, references, statements showing how the trainee has progressed to date). Trainees should also include letters from their DOAT or should the trainee not want to seek DOAT support, they should express their reasons for this in their application

19.4 If Certificate training has not been completed within 6 calendar years, the trainee must make application in writing to the Subcommittee as to why they should be able to continue towards the Certificate. Communication will be sent to the trainee with a copy to the DOAT advising of this requirement.

19.5 Trainees should detail the following within their application:

- Set out the facts
- Include any relevant reasons (i.e. the exceptional circumstances) for the non-attainment of the certificate by the mandatory deadline (including evidence where relevant, e.g. a medical certificate)
- Include any mitigating circumstances
- Include a proposed plan to complete the Certificate by a specified time

19.6 References and letters of support should be sought from the trainee's DOAT as well as from others where relevant. Should the trainee not want to seek either DOAT, they should express their reasons for this in their application.

19.7 Trainees are required to submit the application within 60 days of receipt of the request. Should an application not be submitted within this time, the trainee's status in the program will be considered by the Subcommittee and an outcome determined utilising the trainee's record.

19.8 Should the Subcommittee determine that not enough information has been provided to make a determination, they will request further information from the trainee by a specified time period.

- 19.9 The Subcommittee has the capacity to grant an extension of up to 1 calendar year or may make recommendation for exclusion from the certificate to the CFT.
- 19.10 If the Subcommittee makes recommendation to exclude the trainee from the Certificate, the recommendation will be made to the CFT and final decision reached by the EC.
- 19.11 Should a trainee be granted an extension but not complete the certificate requirements before the deadline provided, the trainee may request a further extension to their training.
- 19.12 Any additional extensions must be considered by the Subcommittee and a recommendation made to the CFT for final decision.
- 19.13 The CFT reserves the right to request information from the trainees DOAT and supervisors. In doing so, the Subcommittee (SAT) will maintain confidentiality of any trainee correspondence as requested.

## 20 Part Time and Breaks in Training

- 20.1 Trainees wishing to undertake training part time or may want a break in training should refer to [the Leave & Interruptions to Training Policy & Procedure](#) for more information.
- 20.2 Breaks in training can only be applied for and approved for 1 calendar year at a time. A trainee will need to apply for another break in training if they wish to extend their break in training beyond 1 calendar year.
- 20.3 Fellows-in-training can take as many breaks in training within the maximum 6 calendar year time limit.

## 21 Exiting Certificate Training

- 21.1 A trainee can exit the certificate by voluntary or involuntary means (withdrawal or exclusion).
- 21.2 A Fellow who exits a Certificate of Advanced Training is no longer a RANZCP trainee; exiting the training will not in itself affect their status as a Fellow of the RANZCP.
- 21.2.1 For more information on exiting certificate training, please refer to the [Training Exit and Re-Entry Policy and Procedure \(30.1\)](#).

## 22 Withdrawal

- 22.1 Trainees who wish to withdraw from the certificate program are required to complete and submit the [Withdrawal from training form](#).
- 22.2 A trainee can withdraw from the certificate at any time. The withdrawal from certificate does not impact a trainee's enrolment in the Fellowship program.
- 22.3 A Fellow can withdraw from the certificate at any time and this withdrawal does not impact their Fellowship status.
- 22.4 Withdrawal will be effective from the date written notice is provided to the RANZCP's head office. No further training will be credited to the trainee's training record from this date.
- 22.5 A trainee who has withdrawn may apply to re-enter Certificate of Advanced Training at a later date. They may be re-instated with previously completed training requirements if the training was completed within 8 years from their re-entry date.
- 22.6 If a Dual Certificate trainee withdrew from, or stopped, one of the Certificates of Advanced Training at any one point, a single certificate would only be awarded on the full completion of all requirements for the relevant certificate program.

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## 23 Exclusion

- 23.1 A trainee may be excluded from training on the following grounds ([please refer to Exit and Re-entry Policy and Procedure \(30.1\)](#) for more detail):
- 23.2 Non-payment of training fees following a period of nine calendar months from the invoice due date
- Note: If a trainee's grounds for exclusion only relate to unpaid fees and the trainee pays prior to their exclusion is ratified by RANZCP Board, their exclusion will be discontinued. A trainee who has already been excluded for non-payment will need to re-apply to enter training.
- 23.3 Not being able to complete the Certificate within the maximum timeframe of 6 calendar years including break in training time and not being granted additional training months by the Subcommittee to remain in the advanced training program.
- 23.4 Being excluded from the Fellowship program or the removal of RANZCP Fellowship will automatically result in exclusion from the Certificate.
- 23.5 Removal from the medical register or a lack of medical registration, or significant changes to a trainee's medical registration.
- Note:** trainees must formally advise the RANZCP head office within 14 days of any changes to, loss of or suspension of a trainee's medical registration, as per the Training Agreement.
- 23.6 A breach of the RANZCP's Constitution, Code of Ethics, Fellowship Regulations or other RANZCP policies, guidelines or professional breaches potentially resulting in dismissal from employment or changes to medical registration.

## 24 Fees

- 24.1 Trainees are required to pay their annual training & administration fees on time in order to continue their advanced certificate training.
- 24.2 Fellows are required to pay the training administration fee for the certificate. Once 24 months FTE certificate training is completed, Fellows are required to make payment of the training administration fee until the certificate is awarded.
- 24.3 Non-payment of the prescribed training fee may result in exclusion from the Certificate program.

## 25 Review and Appeals Process

- 25.1 Trainees are referred to the [RANZCP Appeals and complaints](#) webpage which provides guidance for those who aren't satisfied with the outcome of a decision relating to training or assessment or any other issue, in accordance with the [RANZCP Review, Reconsideration and Appeal Policy and Procedure](#)

## REVISION RECORD

<b>Regulation owner:</b>	Education and Training Department		
<b>Contact:</b>	Training Manager		
<b>Date approved</b>	<b>Version</b>	<b>Approver</b>	<b>Description</b>
19.06.2026	1.0	Education Committee	New document. Approved by CFT on 4 June 2026. Approved by EC on 19 June 2026.
<b>2029</b>			<b>NEXT REVIEW</b>

Appendix 1.

## **Mandatory EPAs**

ST3-YP-AOP-EPA1 - Commencing psychopharmacological treatment for a young person (12-25) who has not previously been treated with psychopharmacology

ST3-YP-AOP-EPA2 - Independently conducts an initial family interview involving a young person aged 12-25

ST3-YP-AOP-EPA5 - First presentation of a young person (12-25) with a complex mental disorder

ST3-YP-AOP-EPA10 - Conduct an assessment of a young person aged 12-25 with an Ultra-High Risk (UHR) for psychosis presentation using a structured, validated clinical instrument.

Four elective EPAs

## **Elective EPAs**

### **Addiction psychiatry**

ST3-ADD-FELL-EPA1 Advanced management of substance intoxication and substance withdrawal.

ST3-ADD-FELL-EPA4 Management of comorbid substance use, including tobacco dependence, and other mental health problems.

### **Adult psychiatry**

ST3-AP-FELL-EPA1 Teach and supervise.

ST3-AP-FELL-EPA2 Consult and collaborate with another health professional about their risk assessment.

ST3-AP-FELL-EPA4 Recovery and rehabilitation.

ST3-AP-FELL-EPA5 Complex work with families and/or carers.

ST3-AP-FELL-EPA7 Preparation and presentation of a treating doctor's report to a tribunal authorising treatment under mental health legislation.

ST3-AP-FELL-EPA8 Demonstrate leadership skills in a multidisciplinary team setting. (Adult)

ST3-AP-FELL-EPA9 First presentation of a complex mental disorder.

ST3-AP-FELL-EPA12 Advanced clinical work with people with cultural and linguistic diversity.

ST3-AP-FELL-EPA20 Review service delivery.

ST3-AP-FELL-EPA22 Review service delivery in an Early Intervention Service.

### **Medical education**

ST3-EDU-FELL-EPA1 Small and large group teaching.

ST3-EDU-FELL-EPA2 Deliver and evaluate clinical (bedside) teaching sessions.

ST3-EDU-FELL-EPA3 Assist learning through receiving and providing feedback.

ST3-EDU-FELL-EPA4 Training to become an effective and competent supervisor.

### **AOP Stage 3 EPAs - Youth Psychiatry**

ST3-YP-AOP-EPA3: Liaison with educational institutions or employers regarding management of academic or vocational concerns in a young person

ST3-YP-AOP-EPA4: Assess and manage metabolic concerns or side effects in a young person

ST3-YP-AOP-EPA6: Conducts an assessment of a culturally and linguistically diverse young person

ST3-YP-AOP-EPA7: Assess and manage psychiatric illness in a young person (12-25) with a chronic medical illness

ST3-YP-AOP-EPA8: Assesses and implements a management plan for a complex clinical presentation where there are ongoing protection concerns regarding a young person aged 12-25.

ST3-YP-AOP-EPA9: Assess and manage treatment-refractory psychiatric disorders in a young person (12-25)

ST3-YP-AOP-EPA11: Provides leadership in an interagency case conference focused on a young person aged 12-25.