

2012 Fellowship Program Outline

2012 Fellowship Program overview	<p>The RANZCP has adopted the seven CanMEDS roles to articulate the Fellowship Competencies. The Fellowship Competencies are end point competencies for all trainees engaged in attaining Fellowship of the College.</p> <p>Typically 60 months full time equivalent (FTE) to complete.</p> <ul style="list-style-type: none"> ○ Stage 1 (12 months FTE) ○ Stage 2 (24 months FTE) ○ Stage 3 (24 months FTE) ● Progression between stages depends on attainment of Fellowship Competencies as demonstrated by successful completion of all mandatory assessments AND time spent in rotations.
Formal Education Course	<ul style="list-style-type: none"> ● All trainees must be enrolled in a Formal Education Course. ● Stage 1 and 2 syllabuses developed to inform Formal Education Courses.
Formative assessment: Workplace-based Assessments (WBAs)	<ul style="list-style-type: none"> ● WBAs are used for formative assessment of competencies, NEVER as a mechanism to ‘mark’ or ‘pass/fail’ – they provide an indicator to both the supervisor and the trainee as to how the trainee is progressing. ● Supervisors are required to be competent in conducting WBAs and able to provide the trainee with meaningful and effective feedback. ● Supervisors will use a minimum of three WBAs to inform their assessment of each EPA. ● Trainees are responsible for arranging WBAs with a supervisor. ● WBAs tools have been selected by the College and include: Case-based Discussion (CbD), Mini-Clinical Evaluation Exercise, Observed Clinical Activity (OCA), Professional Presentation and Direct Observation of Procedural Skills (DOPS) ● Although formative, it is mandatory to do one OCA every 6-month FTE rotation.
Summative assessment: Entrustable Professional Activities (EPAs)	<ul style="list-style-type: none"> ● Progression through training requires trainees to be entrusted to perform specific EPAs to an appropriate standard for the stage of training; these are Basic, Proficient and Advanced. ● Each 6-month FTE rotation requires two EPAs to be entrusted. ● Trainees are responsible for planning their EPAs throughout their training. Typically, 3–5 is recommended. Please refer to the Trainee Progress Trajectory. ● Fellowship EPAs across all Stages DO NOT have to be signed off by a supervisor who has a Certificate in the respective area of practice; however, supervisors must be accredited and current.
In-Training Assessment (ITA) mid-rotation forms and end-of-rotation reports	<ul style="list-style-type: none"> ● Formative mid-rotation In-Training Assessment Forms must be completed between the supervisor and trainee and should be held in the trainee’s record. ● Formative mid-rotation ITA’s should be completed at the mid-point of the rotation but may be completed earlier if required. ● Summative end-of-rotation In-Training Assessment Reports MUST be submitted to the College Head Office within 60 days of completion of the rotation.
Summative assessment: Psychotherapy Written Case	<ul style="list-style-type: none"> ● Competence to end of stage 3 standard ● Trainees are required to complete the Psychotherapy Written Case, consisting of one long psychotherapy intervention (minimum of 40 sessions) and an 8000–10,000 word write-up of the case.
Summative assessment: Scholarly Project	<ul style="list-style-type: none"> ● College-approved project of 3000–5000 words must be successfully completed to attain Fellowship, which will be marked at end of stage 3 standard. ● Trainees are encouraged to plan their Scholarly Projects, considering the time it will take to complete the project and the availability of their proposed supervisor. ● The Scholarly Project Subcommittee governs the conduct and assessment of the Scholarly Project. ● Examples of appropriate Scholarly Projects include: a quality assurance project or clinical audit; a systematic and critical literature review; original and empirical research (qualitative or quantitative); a case series. ● Other Scholarly Projects may be approved on a case-by-case basis. ● Trainees may be exempt from undertaking a Scholarly Project if, in the last 10 years, they have demonstrated competency with a substantially comparable project, completed a doctoral, research Masters or Honours thesis in a field relevant to psychiatry or were a major author of an article published in a recognised peer-reviewed English-language journal relevant to psychiatry.
Summative assessment: MCQ and Essay (CEQ and MEQ) Examinations	<ul style="list-style-type: none"> ● The MCQ examination are set at a Junior Consultant standard, expected end of Stage 3 standard. <ul style="list-style-type: none"> ○ The 3-hour MCQ exam comprises Extended Matching Questions (EMQs) and Critical Analysis Problems (CAPs), covering foundational knowledge in psychiatry. Trainees should plan to attempt the MCQ exam during Stage 2. ○ The Essay examinations comprise of a Modified Essay Questions (MEQs) and a Critical Essay Question (CEQ). The Essay examinations have a clinical focus and assesses capacity for critical thinking about clinical practice. ● The Essay Style (CEQ and MEQ) examinations are assessed at the standard expected at the end of Stage 3. <ul style="list-style-type: none"> ○ The 50 minutes Critical Essay Question (CEQ) examination is a paper-based, hand-written exam completed a testing centre. ○ The Modified Essay Question (MEQ) 150 minutes examination is a paper-based, hand-written completed at a testing centre.
Progression through Training	<ul style="list-style-type: none"> ● Trainees must successfully complete the Fellowship Program’s assessments within the time requirements to progress through training towards Fellowship. ● The Progression through Training Policy and Trainee Progress Trajectory detail the mandatory deadlines for the completion of each summative assessment. ● The Failure to Progress Policy sets out the requirements for trainees who do not adhere to those deadlines, including the completion of a targeted learning and the requirement to show cause in order to remain in the Fellowship Program after continued unsuccessful attempts of exams, rotations not being passed, extended BITS, and who have not entering targeted learning (including failure to attempt and/or pass by the deadline as well as three or more fails of the same assessment). <ul style="list-style-type: none"> ○ This policy also affects trainees who are still not eligible for Fellowship after 13 years (calendar time), trainees on a break-in-training for 2 years continuously or 5 years in total and trainees who are not allocated to a training program.

Stage 1 Basic	Stage 2 Proficient	Stage 3 Advanced
<p>Minimum 12 months FTE accredited training in approved Adult Psychiatry training post which 6 months is in an acute setting.</p> <p>Supervision</p> <ul style="list-style-type: none"> Minimum 4 hours/week for 40 weeks, of this: <ul style="list-style-type: none"> 2 hours/week outside ward rounds and case review. Minimum 1 hour individual supervision of clinical work. WBAs will typically occur in supervision time. EPAs may or may not be formally signed off in supervision time. <p>Stage 1 Adult Psychiatry EPAs:</p> <ol style="list-style-type: none"> Use of an antipsychotic medication in a patient with schizophrenia/psychosis. Providing psychoeducation to a patient and their family and/or carers about a major mental illness. <p>The Stage 1 First 6 Months FTE Rotation Exception Rule</p> <p>A trainee in the first 6-month FTE rotation of Stage 1 may pass that rotation and its corresponding end-of-rotation ITA form before being entrusted with any EPAs. This rule may only be applied in the first 6-month FTE rotation of Stage 1 and cannot be applied in any other Stage or rotation.</p> <p>Attaining Stage 2 EPAs while in Stage 1:</p> <p>Trainees should, together with their Director of Training (DOT) and supervisor, refer to the 'Trainee Progress Trajectory' and plan for the 4 x Stage 2 General Psychiatry EPAs and the 3 x Psychotherapy EPAs.</p> <p>The trainee may also achieve these in Stage 1. In exceptional circumstances, the trainee may with their DOT's approval, achieve other Stage 2 Area of Practice EPAs. The expected standard for Stage 2 EPAs remains Proficient.</p> <p>Trainees should familiarise themselves with the following key policy documents:</p> <ul style="list-style-type: none"> Stage 1 Mandatory Requirements Progression through Training 	<p>Minimum 24 months FTE accredited training in an approved training program.</p> <p>Supervision</p> <ul style="list-style-type: none"> Minimum 4 hours/week for 40 weeks annually. 1 hour/week individual supervision of clinical work. <p>Mandatory Areas of Practice</p> <p>Mandatory area of practice rotations and Stage 2 EPAs (must be entrusted by end of Stage 2):</p> <ul style="list-style-type: none"> Consultation–Liaison Psychiatry (6 months FTE) <ol style="list-style-type: none"> Care for a patient with delirium EPA. Manage clinically significant psychological distress in the context of a patient's medical illness in the general hospital EPA. Child & Adolescent Psychiatry (6 months FTE) <ol style="list-style-type: none"> Develop a management plan for an adolescent where school attendance is at risk EPA. Clinical assessment of a prepubertal child EPA. <p>Trainees will achieve competent performance to a proficient level in the following areas of practice, which are achieved through entrustment of specific EPAs to a proficient standard:</p> <ul style="list-style-type: none"> Addiction Psychiatry <ol style="list-style-type: none"> Management of substance intoxication and substance withdrawal EPA. Comorbid mental health and substance use problems EPA. Psychiatry of Old Age <ol style="list-style-type: none"> Behavioural and psychological symptoms in dementia (BPSD) EPA. The appropriate use of antidepressants and antipsychotics in patients aged 75 years and over EPA. <p>Elective rotations</p> <p>Trainees will also undertake two elective 6-month (FTE) rotations in the following areas of practice, achieving competence to a proficient standard demonstrated by EPAs:</p> <ul style="list-style-type: none"> Addiction Adult Psychiatry of Old Age Forensic Indigenous Other areas of practice as approved by the College <p>Stage 2 General Psychiatry EPAs. Attain by the end of Stage 2, can be attained in Stage 1:</p> <ol style="list-style-type: none"> Demonstrating proficiency in all the expected tasks associated with prescription, administration and monitoring of ECT. The application and use of the Mental Health Act. Assessment and management of risk of harm to self and others. Assess and manage adults with cultural and linguistic diversity. <p>Stage 2 Psychotherapy EPAs. 2 of 3 must be attained by the end of Stage 2. Can be attained in Stage 1, or 3rd EPA can be attained by end of Stage 3:</p> <ol style="list-style-type: none"> Psychodynamically informed patient encounters and managing the therapeutic alliance. Supportive psychotherapy. Cognitive–behavioural therapy (CBT) for management of anxiety. <p>Trainees should familiarise themselves with the following key policy documents:</p> <ul style="list-style-type: none"> Stage 2 Mandatory Requirements Progression through Training 	<p>Minimum 24 months FTE accredited training in an approved program.</p> <p>Supervision</p> <ul style="list-style-type: none"> 4 hours per week for 40 weeks annually. 1 hour/week individual supervision of clinical work. <p>Advanced Certificates</p> <p>Trainees may undertake a Certificate of Advanced Training during this stage.</p> <p>College-established Areas of Practice</p> <p>Trainees can complete 24 months FTE in a single area of practice or could achieve competent performance to an advanced level in either a single or multiple areas of practice:</p> <ul style="list-style-type: none"> Addiction Child & Adolescent Forensic Psychiatry of Old Age Research/Academic Adult Consultation–Liaison Indigenous Psychotherapies Other areas of practice as approved by the College <p>EPAs</p> <p>A minimum of two EPAs should be entrusted at an advanced level for each 6 FTE month rotation in Stage 3.</p> <p>Stage 3 FELL (Fellowship) EPAs can be attained in any rotation whereas AOP (area of practice) EPAs can be attained in the relevant area of practice only.</p> <p>Clinical currency</p> <p>Trainees may undertake 12 months of research/academic or specialised administrative/managerial training during Stage 3.</p> <p>Leadership and Management</p> <p>Each Branch Training Committee (BTC) approves the options for formal leadership and management training in their state/country.</p> <p>Stage 3 Psychotherapy</p> <p>Trainees must provide psychotherapy to a minimum of three patients for at least six sessions each.</p> <p>Trainees should familiarise themselves with the following key documents:</p> <ul style="list-style-type: none"> Stage 3 mandatory requirements Progression through training
MCQ Exam		
Essay Examinations (CEQ and MEQ) examinations		
Clinical Competency Assessment and Modified Portfolio Review (CCA-MPR)		
Scholarly Project		
Psychotherapy Written Case		