

# THE JOINT MEDICAL PROGRAM®



**Joint Medical Program  
BMedSc MD**

**MEDI6101**

**Psychiatry Handbook 2022**

Student name \_\_\_\_\_

Student number \_\_\_\_\_

# PSYCHIATRY HANDBOOK

You are considered to be a 'pre-intern with the clinical team'. The key components of this attachment include:

- Participation in clinical activities (under supervision where required), including:
  - Clerking admissions/referrals including reviewing and obtaining collaborative history
  - Assessing patients, including working with carers, family and other service providers where appropriate
  - Keeping abreast of the physical state of your patients
  - Attending at least one 'after-hours' shifts (of 4 hours duration) (or alternatively, if this option is not available at your Clinical site, attending a designated number of acute psychiatry presentations to the unit/ED in normal hours)
  - Participation in other clinical activities, for e.g., Mental Health Review Tribunal hearings, Multidisciplinary Team Meetings, Ward Rounds, Electroconvulsive Therapy (ECT) observation
  
- Participation in scheduled teaching activities
  
- Completion of **at least two Case Based Discussions (CBDs)** and **at least two Mini Clinical Examinations (Mini-CEX)** in order to provide feedback on the development of your skills and knowledge (evaluation forms for these are located in your Logbook)

Your performance during your psychiatry clinical placements will be evaluated via review of your **Logbook and the Clinical Supervisor and Professional Conduct Report** (which is in your Logbook).

If there are concerns regarding satisfactory development of skills and knowledge, your performance may also be evaluated by **relevant faculty staff** including the Year 4 Coordinator in Psychiatry.

At least 35 hours per week of attendance is expected; this includes clinical placement, scheduled teaching/tutorials and self-directed learning.

The teaching timetables will vary slightly at each Clinical site. Please check Canvas for details of teaching sessions at your clinical school; however, the key components of this attachment include:

### **1. Orientation**

Students will have an orientation session at the start of the term at their designated Clinical site. A recorded Orientation session is also available on the MEDI6101 BB Course –Psychiatry– Educational Resources. Students should watch this recording prior to the first day of their Psychiatry attachment.

### **2. Psychiatry Clinical Supervisor and Professional Report**

Evaluation will be completed by the supervisor using the Clinical Supervisor and Professional Conduct Report form, located at the end of your Logbook.

Students are asked to remind their supervisor at the end of the block to complete this form. Students are advised to discuss their progress with their supervisor during their attachment so that any problem(s) identified by the supervisor can be addressed. A Not Satisfactory Supervisor Report Form may result in a Fail grade for the block. Your supervisor is welcome to liaise with faculty staff, including the Year 4 Coordinator in Psychiatry if there are concerns regarding development of skills during the block.

### **3. Psychiatry Logbook**

Students will be issued with a Logbook in which attendance records, clinical competency tasks, case-based discussions, mini CEXs and participation in other dedicated activities must be recorded. Students must keep a daily record of their attendance and have this attendance verified by their supervisor (or delegate, such as a Psychiatry Registrar or alternative Ward Consultant) at the end of each week.

The Logbook is due for submission on the Monday immediately following the Psychiatry block. Please check with your Clinical site administration officer on how the Logbook is expected to be submitted. It will vary from Clinical site to site. Any student who does not submit the Logbook by the due date will not be eligible to undertake summative assessment in Psychiatry.

### **4. Clinical Competency Tasks**

Students are expected to use available opportunities in the workplace setting to develop their interviewing, synthesis, and presentation skills.

It is anticipated that students will be able to engage in clinical interactions whilst being observed by their supervisor (or delegate) and use the feedback to achieve relevant clinical competencies during the attachment. A list of clinical competencies can be found in your Logbook. These should be ticked off as they are achieved.

### **5. Case Based Discussion (CBD)**

A Case Based Discussion (CBD) involves presenting and discussing a patient case to your supervisor (or delegate) using a structured feedback assessment tool and is a form of workplace-based assessment (WBA). The evaluation form is in your Logbook.

You should see patients who are able to give a good history of their condition. You are then expected to write up these patients and include any relevant history from their records. Interviewing others about the

patient, such as a family member, GP and/or community mental health staff worker may also be a good idea. Remember to explore the patient's personal and developmental history.

Please select cases that relate to a topic from the following list:

- Aboriginal Mental Health
- Psychosis
- Mood Disorder
- Anxiety Disorder
- Personality Disorder
- Dependence / Addiction
- Trauma History

You should complete at least two CBDs during your block although you may have the opportunity to complete more than that. **You will need to pass at least two CBDs and have these documented in your Logbook. If your results are borderline, it is expected you complete another until you pass.** You will have up to four attempts for a satisfactory result, otherwise Remediation may need to be considered. Two CBD evaluation forms are located in your Logbook. If you require more than two CBD evaluation forms, please ask your Clinical site administrator.

For each CBD you should prepare and provide a brief summary of the case to your assessor (10 – 15 minutes). The aim is not to present a full history but to discuss the patient as if you were an intern giving a handover to a Registrar or Consultant. It is perfectly okay to present using a structured handover format (for e.g., ISBAR).

The assessor will then ask you questions relevant to the case to better explore your understanding of the person, including issues in relation to risk assessment, medical comorbidities and your understanding of the management and discharge plan. Thus, even though you will be presenting reasonably succinctly, you will need to ensure you have gathered enough detail and given enough thought to the case to be able to answer the assessor's questions.

CBDs will normally take around 30 minutes to complete (including feedback).

CBDs are scored according to the outline on the evaluation form in your Logbook, with comments to reflect strengths in your presentation as well as how you might improve.

## **6. Mini Clinical Examination (Mini-CEX)**

A Mini Clinical Examination (Mini-CEX) is a form of workplace-based assessment (WBA) that involves assessing the student in the workplace setting and providing immediate feedback on performance using a structured tool.

You are expected to complete at least two Mini-CEXs during your block although it may be possible to do more. **You will need to pass at least two Mini-CEXs and have these documented in your Logbook. If your results are borderline, it is expected you complete another until you pass.** You will have up to four attempts for a satisfactory result, otherwise Remediation may need to be considered. Two Mini-CEX evaluation forms are located in your Logbook. If you require more than two Mini-CEX evaluation forms please ask your Clinical site administrator.

Before completing a Mini-CEX, you should see the patient first and practice interviewing them. You should take the time to talk to other members of the treating team about them and review their records. You should explain to the patient the purpose of the Mini-CEX and obtain their verbal consent to participate. You should also ensure that when your assessor is available to complete a Mini-CEX with you that the patient is available and there is also a suitable room available.

The interview component of the Mini-CEX involves you demonstrating your communication skills with a patient to your assessor. There should be a focus to the purpose of the interview. It is recommended that the initial focus be Mental State Examination and/or Risk Assessment.

At the end of the Mini-CEX interview and prior to receiving feedback from your assessor the patient will be invited to make a comment on your performance.

Mini-CEXs are scored according to the outline on the evaluation form in your Logbook, with comments to reflect strengths in your performance as well as how you might improve.

Mini-CEXs usually take 30 minutes to complete, including assessment feedback.

**\* N.B Assessors for CBDs and Mini-CEXs can be your block supervisor, psychiatry registrar, CMOs, an academic staff member or another delegate approved by your supervisor.**

## **7. Teaching Program**

Students are expected to attend the teaching sessions organised as per the teaching program at your Clinical site. These teaching sessions include Student Directed Seminars (SDS), Case Based Learning (CBL) sessions and Clinical Skills Teaching sessions. In addition, there will be opportunities for self-directed learning. Resources for self-directed learning can be found on Canvas.

*Please remember to sign the attendance sheet at your teaching sessions.*

## Student Directed Seminars (SDS)

This is a brief guide to the student directed seminar ('SDS') to ensure you get the most out of these sessions. These sessions are designed to be student driven, with a facilitator present in the room. The facilitator's role is simply to be a **resource**, and to assist with **guiding** discussion; the teaching is primarily **peer led** - i.e., you are teaching your peers.

The sessions will run for 90 minutes per week. Attendance is compulsory. For some distant sites, these sessions may take place via Zoom.

It is expected that you will work in small groups (typically 2-3 students per group) to teach your peers about a specific skill or topic. **You will be allocated to your group at the start of your block, and each group will be allocated a topic. At some clinical schools, you will present individually.**

The aim of the SDS is to teach around a specific skill or topic. You will need to do some background reading and identify appropriate and reliable sources of information around the specific skill or topic, then work together in your allocated group to develop a presentation and handout. In your group's presentation, you should:

- 1.) describe the skill/topic
- 2.) explain the theoretical underpinning or mechanism of action
- 3.) explain the clinical application
- 4.) briefly outline the evidence base for effectiveness (e.g., provide an effect size measure from a meta-analysis or reference good quality reviews, reputable clinical practice guidelines, and textbooks)
- 5.) demonstrate the application of the skill or the required task to the group (for example with a 'simulated patient' or a clinical scenario).
- 6.) provide a brief one-page handout to your peers outlining points 1-4.

Your presentation to the group should take approximately 20 minutes. This will be followed by about 10 minutes for questions from the larger group and discussion around points of interest. The larger group will be asked to give feedback regarding each group's presentation.

It is expected that your presentation will be your own work, and that all members of the group will contribute.

<b>Suggested skills/topic areas may include but are not limited to the following:</b>
Structured problem solving
Motivational interviewing
Compliance (adherence) therapy
Graded Exposure

Psychoeducation in regard to commencing a patient with a recently diagnosed psychotic disorder on an atypical antipsychotic medication
Assessment of a patient presenting with sleep problems and psychoeducation about strategies to manage this
Application of the Mental Health Act in the Emergency department
Eye-Movement Desensitization and Reprocessing (EMDR) therapy
Transcranial Magnetic stimulation (TMS)
Psychoeducation regarding lithium carbonate for a man with bipolar disorder who has been recommended to take this medication.
Psychoeducation to be provided to a young woman with depression who has been recommended to take an SSRI antidepressant.
Metabolic syndrome and its management
Screening tools commonly used in Psychiatry (e.g., DASS, K-10, Addenbrooke's Cognitive Examination) and their clinical application
Evidence-based treatment of Delirium and Dementia
Medical conditions commonly presenting with psychological symptoms
Psychological reactions to medical illness
Eating disorders

**Please note:** If there is a particular topic you or your group are keen to present on, which does **NOT** appear on the list above, please email the teaching facilitator and site administration officer at least 4 days prior to the teaching sessions, as it may be possible to present on your preferred topic, as long as it has been deemed appropriate by faculty staff.

### **Case Based Learning (CBL) Sessions**

These will comprise of up to 120 mins total per week of teaching time, dependent on your clinical school. Attendance is compulsory. For some distant sites, these sessions may take place via Zoom.

Each CBL will involve two to three cases that will be presented by different students and discussed by the entire small student group. The number of cases presented each week will be determined by the number of students in each clinical block. Each student is responsible for presenting a case, based on a patient whom they have seen on the ward.

The lead student(s) will present the facts of the case: history, mental state examination and a summary of the main issues relevant to the case together with the learning points they feel are covered by discussion of this particular case. The presentation should take no longer than 20 minutes

Following each student case presentation, the clinician facilitator will facilitate a group discussion of approximately 20 minutes around diagnostic and management issues highlighted by the case, realising that there may be important learning outcomes that may not feasibly be covered within this short time frame. The facilitator should direct to the extent that students are kept to a discussion of a couple of key issues (e.g., differential diagnosis, required investigations, an important management or recovery-model issue). The student group should be engaged in discussing the case (rather than solely the tutor/facilitator), as this allows students a chance to apply knowledge they have learnt from their pre-reading or gained from recent experience on the ward.

### **Clinical Skills Teaching Sessions**

These sessions will be completed 3 times per block on a Monday afternoon for 120 minutes. Two topics will be conducted per session. Attendance is compulsory. All students across the JMP will be invited and they will be broadcast via Zoom. Please check your teaching timetable on Canvas for specific dates and topics.

The purpose of the Clinical Skills Teaching sessions is to develop core clinical skills in psychiatry, including interviewing skills, mental state examination, case formulation, managing difficult patient encounters, and assessing and managing risk. In addition, a session on OSCE preparation will be offered.

These teaching sessions are interactive and based around clinical scenarios.

### **Psychiatry Skills Remediation**

Any student who fails to achieve a satisfactory standard based on the Logbook and Clinical Supervisor and Professional Conduct evaluation form will be required to undertake Remediation in order to meet these requirements. More information on Remediation can be found in the course outline on Canvas.

### **Assessment:**

Please see the OSCE and MCQ information on Canvas MEDI6101 Assessment Guides for more information.