

Goals and Objectives for Psychiatry Residents PSYCHOTHERAPY

Medical Expert

<u>Definition</u>: As Medical Experts, physicians integrate all of the CanMEDS Roles, applying medical knowledge, clinical skills, and professional attitudes in their provision of patient centered care. Medical Expert is the central physician role in the CanMEDS framework.

<u>Key Competencies:</u> Physicians able to . . .

- 1. Function effectively as consultants, integrating all of the CanMEDS Roles to provide optimal, ethical and patient centered medical care.
- 2. Establish and maintain clinical knowledge, skills and attitudes appropriate to their clinical practice.
- 3. Perform a complete and appropriate assessment of the patient.
- 4. Use preventative and therapeutic interventions effectively.
- 5. Demonstrate proficient and appropriate views of procedural skills, both diagnostic and therapeutic.
- 6. Seek appropriate consultation from other health professionals, recognizing the limits of their expertise.

Psychotherapy training should enhance the body of clinical knowledge, which should enhance patient centered care. Psychotherapy training should enhance the psychiatrist's ability to interpret information, make appropriate clinical decisions, and carry out diagnostic and therapeutic interventions. Psychotherapy training should also enhance an ethical and resource efficient clinical practice, as well as enhance effective communication with patients and other health-care providers and the community. The role of medical expert is central to the function of physicians and draws on the competencies included in the roles of communicator, collaborator, manager, health advocate, scholar and professional.

Psychotherapy training should enhance the psychiatrist's ability to perform psychiatric consultations and assessments. It should enhance empathic and listening abilities further enhancing the therapeutic alliance. Through clinical work, lectures and supervision the psychotherapy training should enhance ethical, compassionate and patient centered care. The psychotherapy training should enhance the quality of care that patients receive.

The psychotherapy training within the program would satisfy the requirements of the Royal College and U.B.C. Psychotherapy training and would enhance other Royal College requirements for Psychiatry.

Within the psychotherapy PGY-2 course there are lectures and opportunities to enhance assessment skills from a psychotherapeutic point of view. Throughout the PGY-2 and PGY-3 years there is teaching on psychotherapeutic assessments and formulations in both lectures and clinical rotations. The resident will be expected to be competent at diagnosis and management of clinical cases. The resident will also be expected to understand when to utilize psychotherapeutic interventions in order to come up with a differential diagnosis and management plans. Residents will be expected to enhance their understanding about patient's interpersonal and intrapsychic experiences, their empathic abilities and their therapeutic alliance with their patients.

Through both coursework and the four-month requirement of family therapy the resident will further develop their skills for family interventions. The resident will be expected to be competent at effective, appropriate and timely applications of preventative and therapeutic interventions. These skills will enhance the psychiatrist's ability to obtain informed consent.

The resident will be expected to pass a first year course on the introduction to psychotherapy, which is a year-long course that teaches core principles in psychotherapy. They include: the history of psychotherapies, initial interviewing and treatment agreements, boundary issues, formulation techniques therapeutic alliance, transference, counter-transference, supportive psychotherapy cognitive-behavioral psychotherapy, interpersonal psychotherapy, motivational interviewing, family therapy, couple therapy, medications and psychotherapy, psychotherapy in various psychiatric populations, psychotherapy research and termination. In addition, the resident will be expected to pass a year-long course, based on the textbook Psychodynamic Psychiatry in Clinical Practice as a basis for beginning an understanding of psychodynamic psychotherapy.

In the PGY-2 year the emphasis is on supportive psychotherapy which links up with clinical work on the trainees inpatient and outpatient rotations. In the PGY-3 year the resident will be expected to pass four Thursday afternoon courses. The first is a parent infant psychotherapy course, which attempts to educate residents about parent infant psychotherapies and observations. The second is a long-term psychodynamic psychotherapy course, which continues in more detail from the year before in the four schools of psychodynamic thought. There are additional lectures on psychodynamic case formulation, boundaries, working with dreams and practical issues in psychodynamic psychotherapy. The second course is a short-term psychodynamic psychotherapy course with an emphasis on modern short-term psychodynamic psychotherapy. The last course is a course on group psychotherapy and its various principles. A long-term psychodynamic psychotherapy case is required for the resident to complete. This case should continue for a minimum of two years with once a week supervision. There are three hours per week for the case and supervision that is protected time for the resident. The resident also has an option of having supervision on a short term individual case for six months. In the PGY-4 year the resident will be expected to pass courses in cognitive behavioral and interpersonal psychotherapy. In the PGY-5 year the psychotherapy review course for the Royal College examination is offered. Throughout the residency a minimum of co-leading or leading group psychotherapy for six months with weekly supervision will occur. To track the trainee's progress through the program the trainee will have a psychotherapy log, which will be updated regularly and reviewed with the Associate Director of Training at least once a year. As a result of the above training the trainee should be competent at various forms of psychotherapy and demonstrate proficient and appropriate use of procedural skills, both diagnostic and therapeutic.

The psychotherapy training should enhance the psychiatrist's limitations through an enhancement of self-assessment. Psychotherapy training enhances effective, appropriate, and timely consultation with other mental health professionals.

Communicator

<u>Definition:</u> As Communicators, physicians effectively facilitate the doctor-patient relationship and the dynamic exchanges that occur before, during and after the medical encounter.

Key Competencies: Physicians are able to . . .

- 1. Develop rapport, trust, and ethical relationships with patients and families.
- 2. Accurately elicit and synthesize relevant information and perspectives of patients and families, colleagues, and other professionals.
- 3. Accurately convey relevant information and explanations to patients, families, colleagues and other professionals.
- 4. Develop a common understanding on issues, problems and plans with patients and families, colleagues and other professionals to develop a shared plan of care.
- 5. Convey effective oral and written information about a medical encounter.

The PGY2 seminar "Introduction to the Psychotherapies" directly addresses the importance of establishing a strong therapeutic alliance with the patient. The PGY3 seminar on Long-term Psychotherapy, the PGY4 seminars on Cognitive Behavioral Therapy and Interpersonal Therapy, and the rotations through inpatient and outpatient services all involve communication with a variety of people to carry out the assessment, selection, preparation, and treatment of patients. The resident learns to elicit and synthesize relevant information about the patient from many different sources. In the reverse direction, the resident learns to convey his or her understanding about the diagnosis, prognosis, and treatment plan to the relevant parties. The resident learns to use appropriate language (lay or technical) depending on the target of the communication. The resident also learns how to keep accurate, but succinct notes regarding encounters with the patient and discussions with other associated persons. Opportunities to observe staff engage in these types of effective communications are available in the PGY3 seminars on Short-term Individual Therapy and Group Therapy.

Collaborator

<u>Definition</u>: as *Collaborators*, physicians effectively work with a healthcare team to achieve optimal patient here.

<u>Key Competencies</u>: Physicians are able to . . .

- 1. Participate effectively and appropriately in inter-professional healthcare team.
- 2. Effectively work with other health professionals to prevent, negotiate, and resolve interprofessional conflict.

Residents will learn the unique aspects of psychotherapy and the role it plays with other health professionals. Psychotherapy training will enhance the resident's interdisciplinary team activities. Psychotherapy training and clinical work will enhance the understanding of team dynamics and its application to interpersonal healthcare teams. Psychotherapy training will promote an understanding of interpersonal dynamics to further respect colleagues and prevent and negotiate conflicts.

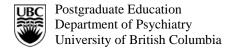
Manager

<u>Definition</u>: As *Managers*, physicians are integral participants in healthcare organizations, organizing sustainable practices, making decisions about allocating resources, and contributing to the effectiveness of the healthcare system.

<u>Key Competencies:</u> Physicians are able to . . .

- 1. Participate in activities that contribute to the effectiveness of their healthcare organizations and systems.
- 2. Manage their practice and career effectively.
- 3. Allocate finite healthcare resources appropriately.
- 4. Serve in administration and leadership roles, as appropriate.

These appear to be objectives for which residents tend to receive relatively less direct training. The PGY2 Introduction to the Psychotherapies touches on some of these topics. On their clinical rotations, residents acquire a varied perspective on the resources that are lacking and the resources that are required to provide effective and efficient medical care. There are opportunities to sit on resident committees and executive meetings as members. These meetings frequently deal with resource allocation issues. Again, residents can benefit through observing their teachers model appropriate resource allocation.



Health Advocate

<u>Definition</u>: As *Health Advocates*, physicians responsibly use their expertise and influence to advance the health and well-being of individual patients, communities, and populations.

<u>Key Competencies</u>: Physicians are able to . . .

- 1. Respond to individual patient health needs and issues as part of patient care.
- 2. Respond to the health needs of the communities that they serve.
- 3. Identify the determinants of health of the populations that they serve.
- 4. Promote the health of individual patients, communities, and populations.

Although residents do not receive direct instruction about health advocacy in their psychotherapy training curriculum, there are aspects of the training program that address advocacy issues. Specifically, during the residents' clinical rotations, they will become familiar with all aspects of the healthcare system. Such knowledge will help residents identify ways to assist patients to navigate the complexities of this system and access appropriate health services in a timely manner. Furthermore, residents will have opportunities to participate in committees at the local (e.g., hospital, community), provincial, and national levels, which will provide them with the appropriate venues to address patient, community, and population health needs and influence how these needs are met.

Scholar

<u>Definition</u>: As *Scholars*, physicians demonstrate a lifelong commitment to reflective learning, as well as the creation, dissemination, application, and translation of medical knowledge.

<u>Key Competencies</u>: Physicians are able to . . .

- 1. Maintain and enhance professional activities through ongoing learning.
- 2. Critically evaluate information and its sources, and apply this appropriately to practice decisions.
- 3. Facilitate the learning of patients, families, students, residents, other health professionals, the public, and others, as appropriate.
- 4. Contribute to the creation, dissemination, application, and translation of new medical knowledge and practices.

Through the didactic psychotherapy seminar series (PGY2 – PGY5) and various rotations, residents are taught the principles and strategies for competent psychotherapeutic practice. They are encouraged to be self-reflective in order to recognize and address learning issues in their own practice. Regular case presentations and trainee-supervisor meetings help achieve these goals. Our program teaches strategies for identifying and critically evaluating relevant information and for integrating new information into their psychotherapeutic practice. Residents are encouraged to respect the perspective of others and to not impose their expectations on others. Effective communication and collaboration with others is always emphasized. They are made aware of learning material that would be appropriate for different audiences, e.g., patients and their families, undergraduate students, other residents, faculty, and other health care professionals. Exposure to a variety of teaching techniques helps residents develop effective teaching strategies of their own in order to facilitate the learning of others. Our curriculum emphasizes that research and critical thought are absolutely necessary for the creation of new knowledge. We stress that learning does not end with the completion of a course or residency training, but is a life-long endeavour. Thus, we encourage our residents to contribute to the process of scholarly inquiry in any way they can during their residency and beyond.

Professional

<u>Definition:</u> As *Professionals*, physicians are committed to the health and well-being of individuals and society through ethical practice, profession-led regulation, and high personal standards of behaviour.

<u>Key Competencies:</u> Physicians are able to . . .

- 1. Demonstrate a commitment to their patients, profession, and society through ethical practice.
- 2. Demonstrate a commitment to their patients, profession, and society through participation in profession-led regulation.
- 3. Demonstrate a commitment to physician health and sustainable practice.

The PGY2 seminar "Introduction to the Psychotherapies" directly addresses ethical practice through attention to boundaries, boundary crossings, and boundary violations. In psychotherapy seminars in the PGY2, 3 and 4 years, and in rotations through inpatient and outpatient services, ethical practice is taught and implemented. The foundation for ethically sound careers is established when residents learn about empathy, the therapeutic alliance, treatment agreement, therapeutic consistency, clear goals of psychotherapy, realistic outcomes and limits of psychotherapy, limits on self-disclosure, effects of psychopathology on communication, and uses and misuses of transference and counter-transference reactions. When appropriate limits on the scope of the appetic ambitions are learned, this learning dovetails readily with an understanding of the need for the physician to attend to personal health and sustainable practice. If it is understood both intellectually and emotionally that physicians cannot save the world, it is also understood that they can make real contributions to their patients, profession, and society as long as they are in good health and practicing in a sustainable way. Training in psychotherapy does not, in itself, lead to participation in profession-led regulation, but it contributes extensively to a full appreciation of professional norms, and to sophistication about the uses and implementation of regulation. Accordingly, training in psychotherapy equips the physician to show a commitment to profession-led regulation, while avoiding pitfalls such as idealization or devaluation of the profession, rigid expectations of conformity to unduly narrow views of professional norms, or conflict-avoiding indulgence of unprofessional behaviour.