

Educational Objectives for the PGY I-IV Years in Psychiatry in a Competency-Based Format

OVERVIEW AND GOALS OF THE PROGRAM

Goals of the Program:

The four year general psychiatric residency program at the Medical College of Georgia is designed to provide qualified applicants with comprehensive skills in the diagnosis and treatment of the full range of psychiatric disorders found in the general population. An emphasis on the biopsychosocial model and the comprehensive, multimodality approach to the treatment of psychiatric disorders is fundamental to the approach of this program. This program will assure the graduating general psychiatry resident the skills needed to function in the major areas of the discipline (academic, community-based, military-government, private practice, and research settings). The general psychiatry resident will be trained to function as a leader of and collaborator with multidisciplinary teams in a variety of settings (inpatient psychiatric, medical settings, forensic and prison settings, community mental health centers, etc.)

Objectives of the Program:

Specific goals in terms of knowledge, skills, and attitudes by PGY year are outlined in subsequent pages. Some general goals would include:

- To train general psychiatric residents in the comprehensive clinical skills of evaluation, treatment, and consultation. Integrating information from multiple sources and systems to make a diagnosis and comprehensive treatment plan that treats the whole patient across all relevant settings.
- To train general psychiatric residents in the DSM-IV diagnostic system, with the ability to develop a diagnostic formulation and communicate such information both orally and in written form.
- To train general psychiatric residents in the assessment of adults, children, and families, using interview skills and assess tools such as the mental status examination, psychological testing, and appropriate medical and neurological testing.
- To offer general psychiatric residents experience with a variety of treatment modalities, including psychopharmacology, individual therapies (supportive, CBT, psychodynamic, brief) as well as couples, family, and group therapy.
- To offer general psychiatric residents the skills and knowledge to function in a variety of practice and professional settings, and to have the abilities to be life-long learners.

Postgraduate Year 1

Goals and Objectives

The training obtained during the first postgraduate year should provide residents with medical skills most relevant to psychiatric practice. These include being able to 1) Perform a complete initial history and physical examination, including appropriate diagnostic studies; 2) diagnose common medical and surgical disorders and formulate appropriate initial treatment plans; 3) provide limited, but appropriate, continuous care of patients with medical illnesses and make appropriate referrals; 4) be especially conversant with medical disorders displaying symptoms likely to be regarded as psychiatric disorders, and psychiatric disorders displaying symptoms likely to be regarded as medical; 5) be especially cognizant of the nature of the interactions between psychiatric treatments and medical and surgical treatments; and 6) relate to patients and their families, as well as other members of the health care team, with compassion, respect and professional integrity.

Core Competencies:

Patient Care

- **Knowledge:** Residents will learn to provide competent care to patients with a range of medical and neurologic disorders that are commonly encountered in psychiatric practice.
- **Skills:** Residents will become adept at performing general physical and neurologic examinations, ordering and interpreting appropriate diagnostic tests, consulting with medical specialists, integrating medical information into a coherent treatment plan, and making appropriate referrals.
- **Attitudes:** Residents will consolidate their identities as physicians and commit themselves to the scientific and ethical values that underlie the doctor-patient relationship.

Medical/Psychiatric knowledge

- Knowledge: Residents will learn to diagnose and treat a wide range of medical and neurologic disorders that are relevant to psychiatric practice.
- Skills: Residents will become more skilled at applying their knowledge of medical and neurologic disease to particular clinical problems.
- Attitudes: Residents will understand the value and role of medical and neurologic approaches in the provision of comprehensive psychiatric care.

Practice-Based Learning and Improvement

- Knowledge: Residents will become familiar with the fundamentals of clinical medicine and neurology so that they can go on to engage effectively in life long learning.
- Skills: Residents will learn how to grapple effectively with complex medical and neuropsychiatric illness through critical reading and expert consultation.
- Attitudes: Residents will develop an appreciation of the value of life-long learning for competent patient care.

Interpersonal and Communication Skills

- Knowledge: Residents will learn clinical techniques to insure respectful and ethical interactions with patients and colleagues.
- Skills: Residents will have the opportunity to develop their interpersonal and communicable skills in didactic seminars and on clinical rotations.
- Attitudes: Residents will develop an appreciation of the value of interpersonal and communication skills for assurance of ethical and effective patient care.

Professionalism

- Knowledge: Residents will study and receive mentorship in professionalism and ethical behavior in medicine.
- Skills: Residents will develop their professional skills by interacting with their colleagues and supervisors, and learn to practice medicine in accordance with professional norms.
- Attitudes: Residents will develop and appreciation of the value of professional and respectful treatment of patients and colleagues in all clinical settings.

Systems-Based Practice

- Knowledge: Residents will learn about the importance of approaching patient care in a systems-oriented way, with particular attention to the challenges of promoting access of patients (regardless of socioeconomic status) to high quality care.
- Skills: Residents will develop their skills at working ethically in various medical contexts by discussing and participating in clinical cases that raise issues related to health-care systems.
- Attitudes: Residents will develop an appreciation of the value of thinking about various systems (such as managed care) insofar as they relate to the provision of ethical patient care.

Post-graduate Year II

Goals and Objectives

The training during the second post graduate year provides residents with experience in a wide diversity of clinical settings to enhance their clinical skills and knowledge base. Experiences include a child psychiatry rotation, an emergency psychiatry rotation, substance abuse, ECT, community mental health, correctional psychiatry, consultation-liaison psychiatry, and geriatric psychiatry. This variety of treatment settings will enhance their abilities to gather and organize data, integrate these data within a comprehensive formulation of the problem to support a well-reasoned differential diagnosis, formulate a treatment plan, and implement treatment and follow-up as indicated. The training provides residents with further opportunities to develop knowledge, clinical skills, sensitivity to cultural diversity and professional principles.

PGY- II residents will rotate in both at the VA and at MCG for these experiences. Educational objectives will include: 1) performing a complete initial psychiatric history and developing a coherent formulation and treatment plan for children and adolescents; 2) function as effective clinicians in a specialized substance abuse treatment setting; 3) provide emergency

psychiatric consultation as part of an organized psychiatric emergency service; 4) perform high quality inpatient to the medical-surgical services of an acute care hospital; 5) perform as an attending on a geriatric psychiatric service with significant medical and psychiatric comorbidity; 6) gain experience working a multidisciplinary community health outreach program and; 7) continue to emphasize the importance of relating to patients and their families, as well as other members of the health care team, with compassion, respect, and professional integrity.

Core Competencies:

Patient Care:

A. Knowledge: Residents will learn to provide competent care to patients with broad range of psychiatric disorders in a variety of treatment settings. Particular emphasis will be on psychiatric disorders of children and adolescents, substance abuse disorders, geriatric psychiatry, C-L psychiatry, Emergency room consultation, patients receiving ECT, and community mental health/correctional psychiatry. Patients of a variety of age groups, ethnicity, and of both sexes will be seen.

B. Skills: Residents will become adept at interviewing, history taking, mental status examination, differential diagnosis, treatment planning, diagnostic testing, and recording of findings in the various patient populations detailed above. They will have experiences with a wide array of psychotherapies and psychopharmacologic interventions with particular emphasis on the tailoring of these approaches for the child and adolescent, emergency, geriatric, medically ill, and substance abusing populations.

C. Attitudes: Residents will further consolidate their identities as psychiatrists and will remain committed to the scientific and ethical values that underlie the doctor-patient relationship.

Medical/Psychiatric Knowledge:

A. Knowledge: Residents will expand their knowledge and learn to diagnose and treat a wide range of psychiatric disorders commonly encountered in the specific patient populations and treatment settings of the PGY-II year. They will expand their knowledge of the etiologies, prevalence, diagnosis, treatment, and prevention of all major psychiatric disorders seen in these settings. They will also continue to enhance their ability to understand research methods and to critically appraise the professional and scientific literature.

B. Skills: Resident will become more skilled at applying their knowledge of psychiatric illness to particular clinical populations and settings, both as direct providers of care and as consultants. They will learn the skills to function effectively as a consultant to the medical-surgical floors and the physicians and patients seen there. They will develop excellent working knowledge of numerous psychotherapies and of somatic treatments utilized in the children, geriatrics, substance abuse, C-L, emergency, and community settings.

C. Attitudes: Residents will understand and appreciate the value and role of a strong knowledge base in the provision of comprehensive psychiatric care and consultation.

Practice-Based Learning and Improvement:

A. Knowledge: Residents will become increasingly familiar with the fundamentals of general psychiatry so that they can engage effectively in life-long learning.

B. Skills: Residents will practice their skills at dealing effectively with complex psychiatric illness through clinical reading and expert consultation.

C. Attitudes: Residents will continue in their development an appreciation of the value of life-long learning for competent patient care.

Interpersonal and Communication Skills:

A. Knowledge: Residents will learn clinical techniques to insure respectful and ethical interactions between patients and colleagues, especially in the emergency room and C-L settings.

B. Skills: Residents will have the opportunity to develop their interpersonal and communication skills in didactic seminars, in supervision, and in the clinical setting.

C. Attitudes: Residents will further develop an appreciation of the value of interpersonal and communication skills for assurance of ethical and effective patient care.

Professionalism:

A. Knowledge: Residents will study and receive mentorship in professionalism and ethical behavior in psychiatric practice as they apply to each of the specialized clinical settings they will encounter.

B. Skills: Psychiatric residents will develop their professional skills by interacting with their colleagues and supervisors, and to learn to practice psychiatry in accordance with professional norms.

C. Attitudes: Residents will develop a further appreciation of the value of professional and respectful treatment of patients and colleagues in all clinical settings.

Systems- Based Practice:

A. Knowledge: Residents will learn about the importance of approaching patient care in a systems-oriented way, with particular attention to the challenges of promoting access of patients (regardless of socioeconomic status) to high-quality mental health services in both the public and private sectors.

B. Skills: Residents will develop their skills at working ethically in various psychiatric contexts and clinical settings by discussing and participating in clinical cases that raise issues related to health-care systems.

C. Attitudes: Residents will develop an increased appreciation of the value of thinking about various systems (such as managed care) insofar as they relate to the provision of ethical patient care in psychiatry.

Post-graduate Year III

Goals and Objectives:

The training obtained during the third postgraduate year should provide residents with the clinical skills and knowledge relevant to the treatment of a wide variety of psychiatric disorders in the outpatient setting. Residents will enhance their skills at conceptualizing illnesses in terms of biological, psychological, and sociocultural factors that determine normal and abnormal behavior. They are taught to gather and organize data, integrate these data within a comprehensive formulation of the problem to support a well-reasoned differential diagnosis, formulate a treatment plan, and implement treatment and follow-up as indicated. The training provides residents with the opportunity to develop knowledge, clinical skills, sensitivity to cultural diversity and professional principles.

PGY- III residents will work in both the VA and MCG psychiatric outpatient setting, with a variety of mental health professionals in a multidisciplinary setting. Educational objectives will include 1) performing a complete initial psychiatric history and developing a coherent formulation and treatment plan for outpatient psychiatric practice, 2) function as effective clinicians in outpatient psychotherapy and psychopharmacologic management, 3) provide continuous care of patients with a wide variety of mental illnesses in the outpatient setting, 4) make appropriate referrals to other clinicians and consultants when necessary, 5) perform high quality outpatient consultations to other health care professionals, mental health providers, and community agencies, and 6) relate to patients and their families, as well as other members of the health care team, with compassion, respect, and professional integrity.

Core Competencies:

Patient Care

A. Knowledge: Residents will learn to provide competent outpatient care to patients with a broad range of psychiatric disorders that are commonly encountered in clinical practice. Their patients will include at least 90% adults, at least 20% of whom will be followed for the full year. Their patients will include patients of both sexes and from various ethnic/minority groups.

B. Skills: Residents will become adept at interviewing, history taking, mental status examination, differential diagnosis, treatment planning, diagnostic testing, and recording of findings. They will have experiences with a wide array of psychotherapies and psychopharmacologic interventions. They will have roles both as direct providers of care and as consultants to other healthcare providers and mental health professionals.

C. Attitudes: Residents will consolidate their identities as psychiatrists and will remain committed to the scientific and ethical values that underlie the doctor-patient relationship.

Medical/Psychiatric Knowledge:

A. Knowledge: Residents will expand their knowledge about the major theories and viewpoints in psychiatry, together with a thorough grounding in the generally accepted clinical facts. They will learn to diagnose and treat a wide range of psychiatric disorders commonly encountered in adults. They will expand their knowledge of the etiologies, prevalence, diagnosis, treatment, and prevention of all major psychiatric disorders in the DSM, including the biological, psychological, and sociocultural, and iatrogenic factors that affect long-term course and treatment of psychiatric illness. They will also enhance their ability to understand research methods and to critically appraise the professional and scientific literature.

B. Skills: Resident will become more skilled at applying their knowledge of psychiatric illness to particular clinical problems, both as direct providers of care and as consultants. They will develop excellent working knowledge of numerous psychotherapies and of somatic treatments utilized in the outpatient setting.

C. Attitudes: Residents will understand and appreciate the value and role of a strong knowledge base in the provision of comprehensive psychiatric care and consultation.

Practice- Based Learning and Improvement:

A. Knowledge: Residents will become familiar with the fundamentals of general psychiatry so that they can engage effectively in life-long learning.

B. Skills: Residents will practice their skills at dealing effectively with complex psychiatric illness through clinical reading and expert consultation.

C. Attitudes: Residents will develop an appreciation of the value of life-long learning for competent patient care.

Interpersonal and Communication Skills:

A. Knowledge: Residents will learn clinical techniques to insure respectful and ethical interactions between patients and colleagues.

B. Skills: Residents will have the opportunity to develop their interpersonal and communication skills in didactic seminars, in supervision, and in the clinical setting.

C. Attitudes: Residents will develop an appreciation of the value of interpersonal and communication skills for assurance of ethical and effective patient care.

Professionalism:

A. Knowledge: Residents will study and receive mentorship in professionalism and ethical behavior in psychiatric practice.

B. Skills: Psychiatric residents will develop their professional skills by interacting with their colleagues and supervisors, and to learn to practice psychiatry in accordance with professional norms.

C. Attitudes: Residents will develop an appreciation of the value of professional and respectful treatment of patients and colleagues in all clinical settings.

Systems-Based Practice:

A. Knowledge: Residents will learn about the importance of approaching patient care in a systems-oriented way, with particular attention to the challenges of promoting access of patients (regardless of socioeconomic status) to high-quality mental health services in both the public and private sectors.

B. Skills: Residents will develop their skills at working ethically in various psychiatric contexts by discussing and participating in clinical cases that raise issues related to health-care systems.

C. Attitudes: Residents will develop an appreciation of the value of thinking about various systems (such as managed care) insofar as they relate to the provision of ethical patient care in psychiatry.

Post – Graduate Year IV

Goals and Objectives:

The training during the fourth post graduate year further expands the knowledge base of the general psychiatric resident and provides further opportunities for development of their clinical skills. By the time the fourth year of training is reached, the basic fundamentals for the general psychiatrist have been taught and incorporated. Some trainees choose to transition to child psychiatry training at this point. For the others who remain in their fourth year, opportunities are there to function as assistant medical director on the acute care inpatient unit at MCG. Completion of ECT training is emphasized if this has not already been accomplished. Multiple elective opportunities at MCG, the VA, and other psychiatric facilities are available depending upon the interests of the trainee.

Emphasis is also placed on the role of the senior psychiatric resident as educator. They are increasingly involved in medical student teaching and lecturing, supervision, and mentoring. The completion of research interests and the completion of a senior project are emphasized as well. This also provides an opportunity to further hone psychotherapy skills and to increase comfort with their utilization.

Core competencies continue to be monitored and evaluated, with specific objectives being tailored to the individual and the composition of their year.

Core Competencies:

Patient Care:

A. Knowledge: Residents will continue to broaden their capacities to provide competent care and consultation to patients with a broad range of psychiatric disorders that are commonly encountered in clinical practice. Their patients will include people in all age groups and of both sexes. Some of their patients will be from various ethnic minority groups.

B. Skills: Residents will become more highly skilled at interviewing, history taking, mental status examination, differential diagnosis, treatment planning, diagnostic testing, and recording of findings. They may choose to have more in-depth clinical experience in psychotherapy and/or somatic treatments (such as ECT) provided in inpatient and outpatient settings. They may have roles as direct providers of care, as consultants, and as teachers of junior residents and medical students.

C. Attitudes: Residents will consolidate their identities as psychiatrists and will remain committed to the scientific and ethical values that underlie the doctor-patient relationship.

Medical/Psychiatric Knowledge:

A. Knowledge: Residents will learn about the major theories and viewpoints in psychiatry, together with a thorough grounding in the generally accepted clinical facts. They will learn to diagnose and treat a wide range of psychiatric disorders. They will learn the etiologies, prevalence, diagnosis, treatment, and prevention of all major psychiatric disorders in the current standard diagnostic statistical manual, including the biological, psychological, sociocultural, and iatrogenic factors that affect long-term course and treatment of psychiatric illness. They may elect to learn more about research methods in psychiatry and to teach and function as leaders in the role of chief resident.

B. Skills: Residents will become more skilled at applying their knowledge of psychiatric illness to particular clinical problems, both as direct providers of care, as consultants, and as teachers. They will develop excellent working knowledge of numerous psychotherapies, and of somatic treatments (including psychopharmacologic interventions and ECT) that are provided in inpatient, acute care, and outpatient settings.

C. Attitudes: Residents will understand and appreciate the value and role of a strong knowledge base in the provision of comprehensive psychiatric care, consultation, and teaching.

Practice-Based Learning and Improvement:

A. Knowledge: Residents will become familiar with the fundamentals of clinical and academic psychiatry so that they can go on to engage effectively in life-long learning.

B. Skills: Residents will learn how to deal effectively with complex psychiatric illness through critical reading and expert consultation

C. Attitudes: Residents will develop an appreciation of the value of life-long learning for competent patient care.

Interpersonal and Communication Skills:

A. Knowledge: Residents will learn clinical techniques to insure respectful and ethical interactions with patient and colleagues.

B. Skills: Residents will have the opportunity to develop their interpersonal and communication skills in didactic seminars, in supervision, and in their roles as teachers and administrative leaders within the residency program.

C. Attitudes: Residents will develop an appreciation of the value of interpersonal and communication skills for assurance of ethical and effective patient care.

Professionalism:

A. Knowledge: Residents will study and receive mentorship in professionalism and ethical behavior in psychiatric practice.

B. Skills: Residents will develop their professional skills by interacting with the colleagues and supervisors, and learn to practice psychiatry in accordance with professional norms.

C. Attitudes: Residents will develop an appreciation of the value of professional and respectful treatment of patients and colleagues in all clinical settings.

Systems-Based Practice:

A. Knowledge: Residents will learn about the importance of approaching patient care in a systems-oriented way, with particular attention to the challenges of promoting access of patients (regardless of socioeconomic status) to high-quality mental health care in both the public and private sectors.

B. Skills: Residents will develop their skills at working ethically in various psychiatric contexts by discussing and participating in clinical cases that raise issues related to health-care systems.

C. Attitudes: As they approach the transition to post-residency practice, residents will develop an appreciation of the value of thinking about various systems (such as private practice, managed care, and public-sector care) insofar as they relate to the provision of ethical patient care in psychiatry.