Psychiatry

Contents

General definition of competence 3
Definition of the competence area 3
Competence requirements 3
Requirements for medical competence3
Competence in communication, leadership, medical science and quality enhancement 4
Educational structure6
Medical competence 7
Competence in communication13
Competence in leadership14
Competence in medical science and quality enhancement15

General definition of competence

Definition of the competence area

Psychiatry is a medical specialty comprising analysis, assessment, diagnosis, treatment and follow-up as well as care and rehabilitation in the treatment of adults with mental disorders of such degree of difficulty that they require the collected resources of specialist psychiatry.

In this paper mental disorders also include personality disorders and addictions. They imply a mental dysfunction with suffering and/or disability. Psychiatry has the subspecialty forensic psychiatry.

Competence requirements

Requirements for medical competence

Specialist competence in psychiatry requires the following skills:

- Mastery of treatment of all common mental disorders and the ability to treat less common mental disorders. [kai1]
- Competence to treat acute psychiatric disorders and initiate psychiatric interventions during disasters.
- Knowledge of psychotropic drug therapy and electro-convulsive therapy.
- Knowledge of the underlying causal mechanisms of mental disorders and their treatments.
- Knowledge of differential diagnostics in order to distinguish between respectively internal medical, neurological, and mental disorders.
- Ability to perform initial treatment of matic disorders in patients with mental disorders.
- Competence in treatment of addiction disorders.
- Competence in child, youth, and geriatric psychiatry.
- Knowledge of the theoretical bases for the different psychological therapies.
- Ability to determine suitable psychological methods for the treatment of different mental disorders.
- Ability to treat patients using the appropriate method.
- Ability to apply the laws and ordinances that regulate the exercise of authority within psychiatry and knowledge of other legislation relevant for psychiatry.
- Knowledge of methods for determining a patient's cognitive functions.
- Ability to coordinate and follow up treatment and rehabilitation interventions.

Competence in communication, leadership, medical science and quality enhancement

Competence in communication

The equal and responsible patient

The specialty competent physician shall have the ability to dialogue and have an open contact,marked by empathy and trust, with the patient and his/her family, respecting the patient's right to information, influence over and participation in any decisions concerning him/her. The physician-patient contact shall also be based on cooperation and receptivity to the patient's desires and right to autonomy. The patient's involvement and responsibility for his/her treatment shall be stimulated.

Diversity and gender issues

The communication with the patient and his/her family shall be based on knowledge and respect for transcultural and diversity issues such as language, ethnicity, sexual orientation, religion, and gender.

Interprofessional relations

The specialty competent physician shall be able to communicate, orally and in writing, with other physicians and medical staff as well as representatives of the public and public authorities, respecting their occupational skills and competence.

Pedagocial skills

The specialty competent physician shall have the pedagogical skills to inform and educate, primarily patients and their families, but also other physicians, medical staff and students.

Professional attitude and ethics

The specialty competent physician shall be able to continuously work with his/her professional and medical ethical attitudes, with the goal to be able to independently make medical ethical decisions

Competence development

The specialty competent physician skall be able to continuously assess and identify his/her requirements for further education in order to be able to respond to the demands for the best possible care for the patients.

Leadership competence

The coworker role

The specialty competent physician shall have developed the ability of selfassessment and knowledge about his/her function and organisational role.

The supervisor role

The specialty competent physician shall have the ability to supervise other physicians, medical staff and students.

Leadership

The specialty competent physician shall have leadership skills marked by cooperation, openness and dialogue with coworkers. His/her leadership shall be based on inclusiveness and activity development aiming at improvement. The ability to lead care teams is fundamental.

Systems knowledge

The specialty competent physician shall have knowledge about the organisation of health care, its administration, economy and regulations as well as how to control the organisation for optimal resource allocation.

Competence in medical science and quality enhancement Medical science

The specialty competent physician shall have a medical scientific attitude, take part in research and development, acquire knowledge in research methods, including basics of epidemiology and evidence-based medicine.

Development and quality enhancement

The specialty competent physician shall have knowledge about and competence in evidence-based development and quality enhancement. The goal is to be able to participate in and be responsible for continuous and systematic development emphasising a holistic perspective, patient safety, patient utility, quantifiability and control of learning in order to be able to critically assess and evaluate one's own work.

Public health and prevention

The speciality competent physician shall have knowledge about social determinants for health, other public health factors and methods for health promotion and disease preventing interventions so that he/she can use this knowledge in the medical scientific work and quality enhancement.

Educational structure

The basis for specialisation practice (residency) is working with adult psychiatry for inpatients and outpatients. Early experience with acute psychiatry and forced care is important. Practice in addiction care and in units with child, youth and geriatric psychiatric patients should be a part of residency. Residencies in forensic psychiatry are recommended. Residencies at units with unsorted patients as well as subspecialised units are recommended.

Of fundamental importance is a course in psychotherapy where the resident is taught different psychiatric therapies. Of particular importance is that the course integrates theory and practical skills under the supervision of supervisor-qualified licenced psychotherapists. The course should beinterleaved with clinical work so that the resident can apply the learned skills in his/her daily work.

Residencies should comprise work in neighbouring specialties; of particular value is work in some neuro specialty—primarily neurology or rehabilitation medicine—and some internal medicine specialty. Residencies in general medicine may partially replace an internal medicine placement. The final placement should be in adult psychiatry to simplify transfer to work as an independent specialist.

The resident should actively participate in regular local seminars. International knowledge exchange is recommended.

Subgoals Medical competence

Subgoal 1	Learning methods	Follow-up
To be able to treat the most common mental disorders with emphasis on endemic disorders.	Supervised clinical residency at units treating these disorders.	Certificate of passed clinical residency and achieved competence signed
	Course	Certificate of passed course signed by the
	Seminar	Certificate of participation.
	Sit-in	Certificate of sit-in.
	Theoretical studies	

Subgoal 2	Learning methods	Follow-up
To be able to treat all other mental disorders.	Supervised clinical residency at units treating these disorders.	Certificate of passed clinical residency and achieved competence signed by the supervisor.
	Course	Certificate of passed course signed by the teacher.
	Seminar	Certificate of participation.
	Sit-in	Certificate of sit-in.
	Theoretical studies	

Subgoal 3	Learning methods	Follow-up
To be able to handle acute psychiatric states and perform initial treatment of disaster psychiatric	Supervised clinical residency at units treating these disorders.	Certificate of passed clinical residency and achieved competence signed by the supervisor.
situations.	Course	Certificate of passed course signed by the teacher.
	Seminar	Certificate of participation.
	Sit-in	Certificate of sit-in.
	Theoretical studies	

Subgoal 4	Learning methods	Follow-up
To be able to perform psychotropic drug therapy and electro-convulsive therapy and know the underlying causal mechanisms	Supervised clinical residency at units treating these disorders. Course	Certificate of passed clinical residency and achieved competence signed by the supervisor. Certificate of passed course signed by the teacher.
of mental disorders and their treatments.	Seminar	Certificate of participation.
	Theoretical studies	

Subgoal 5	Learning methods	Follow-up
To have knowledge of differential diagnostics in order to distinguish between respectively internal medical,	Supervised clinical residency at units treating these disorders.	Certificate of passed clinical residency and achieved competence signed by the supervisor.
neurological and mental disorders. To be able to	Course	Certificate of passed course signed by the teacher.
perform initial treatment of somatic disorders in	Seminar	Certificate of participation.
patients with mental	Sit-in	Certificate of sit-in.
disorders.	Theoretical studies	

Subgoal 6	Learning methods	Follow-up
To be able to treat common substance addictions and have knowledge about their co-morbidity	Supervised clinical residency at units treating these disorders.	Certificate of passed clinical residency and achieved competence signed by the
with internal medical disorders and other mental disorders.	Course	Certificate of passed course signed by the teacher.
	Seminar	Certificate of participation.
	Sit-in	Certificate of sit-in.
	Theoretical studies	

Subgoal 7	Learning methods	Follow-up
To have knowledge about neurodegenerative diseases and be able to treat mental	Supervised clinical residency at units treating these disorders.	Certificate of passed clinical residency and achieved competence signed by the supervisor.
disorders in the elderly.	Course	Certificate of passed course signed by the teacher.
	Seminar	Certificate of participation.
	Sit-in	Certificate of sit-in.
	Theoretical studies	

Subgoal 8	Learning methods	Follow-up
To have knowledge about development- related mental disorders, child psychiatric working methods, normal vs aberrant psychological and neurological development	Supervised clinical residency at units treating these disorders. Course	Certificate of passed clinical residency and achieved competence signed but the supervisor Certificate of passed course signed by the teacher.
through childhood and adolescence.	Seminar	Certificate of participation.
	Theoretical studies	

Subgoal 9	Learning methods	Follow-up
To have knowledge about the theoretical bases for different psychological therapies. To be able to	Supervised clinical residency at units treating these disorders.	Certificate of passed clinical residency and achieved competence signed by the supervisor.
determine suitable methods for the treatment of different mental disorders.	Course	Certificate of passed course signed by the teacher.
To be able to treat	Theoretical studies	

Subgoal 10	Learning methods	Follow-up
To know the application of the laws and ordinances that regulate the exercise of authority within the subject matter, have	Supervised clinical residency at units treating these disorders.	Certificate of passed clinical residency and achieved competence signed by the supervisor.
knowledge of other legislation relevant for psychiatry.	Course	Certificate of passed course signed by the teacher.
To be aware of the organisation and tasks of forensic psychiatry.	Seminar	Certificate of participation.
	Theoretical studies	

Subgoal 11	Learning methods	Follow-up
To have knowledge of cognitive disabilities, their importance for the care of the patient and treatment and test methods for cognitive disabilities.	Supervised clinical residency at units treating these disorders. Course	Certificate of passed clinical residency and achieved competence signed by the supervisor Certificate of passed course signed by the teacher.
	Seminar	Certificate of participation.
	Theoretical studies	

Subgoal 12	Learning methods	Follow-up
To have knowledge about the coordination and follow-up of patients over long time.	Supervised clinical residency at units treating these disorders.	Certificate of passed clinical residency and achieved competence signed
	Seminar	Certificate of participation.
	Theoretical studies	

Competence in communication

Subgoal 1	Learning methods	Follow-up
To be able to dialogue and have an open contact with the patient and his/her family. To be able to communicate, orally and in writing, with other physicians	Supervised clinical residency at units treating these disorders. Care team work	Certificate of passed clinical residency and achieved competence signed by the currenticor Certificate of participation in care team work.
and medical staff.	Course	Certificate of passed course signed by the teacher.

Subgoal 2	Learning methods	Follow-up
To be able to inform and educate patients, their families, other	Supervised teaching	Certificate of teaching signed by the supervisor.
physicians, medical staff and students.	Supervised supervision	Certificate of supervision signed by the supervisor.

Subgoal 3	Learning methods	Follow-up
To be able to continuously work on one's professional and medical ethical attitude.	Supervised clinical residency at units working with these issues.	Certificate of passed clinical residency and achieved competence signed
	Seminar	Certificate of participation.
	Course	Certificate of passed course signed by the teacher.

Competence in leadership

Subgoal 1	Learning methods	Follow-up
To have knowledge of the organisation, control and regulation of healthcare.	Course	Certificate of passed course signed by the teacher.
	Theoretical studies	

Subgoal 2	Learning methods	Follow-up
To be able to supervise other physicians, medical staff and students.	Supervised supervision	Certificate of supervision signed by the supervisor.
	Course	Certificate of passed course signed by the teacher.
	Theoretical studies	

Subgoal 3	Learning methods	Follow-up
To be able to lead in cooperation and dialogue with coworkers.	Care team work	Certificate of participation in care team work.
To be able to lead care teams. To have knowledge about one's own	Course	Certificate of passed course signed by the teacher.

Competence in medical science and quality enhancement

Subgoal 1	Learning methods	Follow-up
To have a medical scientific attitude.	Course	Certificate of passed course signed by the
	Participation in larger professional meeting	Certificate of participation in larger professional meeting.
	Seminar	Certificate of participation.
	Theoretical studies	

Subgoal 2	Learning methods	Follow-up
To have knowledge about and skills in evidence-based quality enhancement work.	Supervised written individual task according to scientific principles.	Certificate of passed written individual task signed by the supervisor.
	Supervised quality enhancement work.	Certificate of participation in quality enhancement work signed by the supervisor.

Subgoal 3	Learning methods	Follow-up
To have knowledge about social determinants for health, other public health factors and methods for health promotion and disease preventing interventions.	Course Seminar	Certificate of passed course signed by the teacher Certificate of participation.
	Theoretical studies	