

Core Competencies

Clinical Division of Rehabilitation and Social Psychiatry

The Hong Kong College of Psychiatrists

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OBJECTIVE 1 - Medical Knowledge and clinical skills

Knowledge	Skills	Attitudes demonstrated through behaviour
<p>1. Patient assessment</p> <p>The concepts of disability, functioning and quality of life.</p>	<p>To identify patient's strengths, disabilities, risks and vulnerabilities through information collected from the patient, collateral history from relatives and other relevant sources.</p> <p>To assess disability based on the principle of primary and secondary impairment and tertiary handicap.</p> <p>To use structured instrument to assess psychosis, disability, social functioning, quality of life, the progress over time and to predict changes as social circumstances change.</p>	<p>To appreciate a patient as an individual with a personal story and how he/she conceptualize the illness in relation to his/her past experiences.</p> <p>To appreciate how a patient's narrative affects his/her sense of autonomy, self-esteem and motivation.</p>
<p>2. Risk assessment</p> <p>The potential risky behaviours which patients with long-term severe mental disorders may exhibit.</p> <p>The clinical features of long-term severe mental disorders that may increase the likelihood of risky behaviours.</p> <p>The epidemiological factors, lifestyles and environmental circumstances which may increase risk of harm to others in populations with long-term severe mental disorders.</p>	<p>To consider the clinical features of psychosis, associated factors that may predispose to risky behaviour, characteristics of the victim and their relationship with the patient and particular circumstances surrounding a risky incident in the context of previous histories, collated from the widest possible range of sources to develop a formulation.</p> <p>To work collaboratively with the patient to develop a coherent shared formulation of risk and to identify early signs of deterioration in mental state and behaviour plus potential triggers and situational factors which may lead to risk behaviours recurring and to consider those protective factors and strengths that may reduce the likelihood of risky behaviour occurring in the future.</p> <p>To identify clearly the patient's own role and that of carers and other multidisciplinary team members, and to incorporate such information into a comprehensive care plan which is agreed and shared with all involved parties.</p>	<p>To explore issues of concern in a sensitive way that can increase patients' understanding, insight and motivation.</p> <p>To help patients to view self-management of risk as an essential part of the recovery process.</p>

<p>3. Management</p> <p>The psychological effects of chronic illness on interpersonal relationships and intrapersonal structures.</p> <p>The goals of psychiatric rehabilitation, including functional recovery, autonomy, improvement of quality of life and social inclusion.</p> <p>The pharmacological management of psychosis that is resistant to conventional regimens.</p> <p>Evidence based psychological approaches for augmentation or treatment of disorders resistant to pharmacological intervention.</p> <p>The variety of care settings which allow individuals to pick the least dependent and restrictive and the most socially inclusive environment appropriate as close to where they want to live as possible.</p> <p>Contemporary legislations, social welfare, policies and protocols relating to mental health service provision in hospitals, residential work, educational settings and other social settings.</p>	<p>To contribute a psychotherapeutic perspective to the multidisciplinary assessment and management of patients with severe and enduring mental illness.</p> <p>To formulate and implement preventive or intervening measures to minimise the risk identified from risk assessment, including the involuntary treatment legislations and procedures.</p> <p>To incorporate risk management as part of a comprehensive package of recovery-oriented support for people with severe mental illness or complex needs in a wide range of settings from inpatient services to the community.</p> <p>To recognise the dynamics in the individual's environment which may contribute to crisis and address them sensitively in so far as possible to avert the crisis.</p> <p>To identify strengths and tensions in the relationship of patients with their families and carers and address appropriately.</p> <p>To ensure that patients and carers are aware of easy and reliable routes to receive support when there are early signs of deterioration.</p> <p>To attend to the practical needs of the patient, including housing, social welfare, education, work, activities of daily living and leisure.</p>	<p>To foster a realistic treatment goal to patient and carers according to the individual abilities and needs of patients.</p> <p>To ensure that care plans are consistent with the patient's strengths and level of function and that access is not precluded by disability.</p> <p>To demonstrate an empathetic understanding of the need of patients with chronic, disabling and complex mental health problems.</p> <p>To sustain optimism and instil hope for recovery in patients, family members and carers.</p>
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OBJECTIVE 2 – Effective Communication and Collaboration

Knowledge	Skills	Attitudes demonstrated through behaviour
<p>1. Teamwork</p> <p>The roles and responsibilities of different parties and disciplines in a clinical team, including patients, patient organisations, carers, non-government organizations, independent service providers, probation officers and welfare officers in deciding care plans for patients.</p>	<p>To communicate, negotiate and liaise with other stakeholders, including primary care, general adult, forensic and substance abuse services, juridical system, Correctional Services, Probation Services and other independent providers as appropriate to deliver flexible, integrated and comprehensive services.</p>	
<p>2. Leadership</p> <p>The roles and responsibilities, as well as current knowledge of becoming an effective influencer and leader in a multi-disciplinary team</p>	<p>To promote and develop rehabilitation services for patients with severe mental illness.</p>	<p>To help professionals from different backgrounds to understand and use psychotherapeutic concepts.</p> <p>To motivate and support other professional staff to work with carers and patients to sustain a therapeutic relationship.</p> <p>To maintain morale, enthusiasm and satisfaction in patient with long term and enduring conditions and their families in relation to slow progress of complex problems.</p>
<p>3. Education</p> <p>The concept of social stigma its clinical implications.</p> <p>The strategies to enhance patient understanding and self-management.</p>	<p>To inform and educate patients, carers and social partners including non-government organisations and patient organisations.</p>	

OBJECTIVE 3 – Continued professional development

Knowledge	Skills	Attitudes demonstrated through behaviour
<p>1. Appraisal and utilisation of evidences</p> <p>The understanding of research methodologies that identify benefits from services to patients especially those with long term and enduring conditions and those resistant to conventional treatments.</p>	<p>To be able to appraise literature and to apply in clinical practices.</p>	<p>To appreciate the importance of a lifelong pursuit of knowledge and being updated with the latest clinical advances and legislative moves in psychiatric service provision.</p>
<p>2. Audit</p> <p>The principle of clinical audit and its significance in the clinical context.</p>	<p>To be able to apply audit principles in service-wide context, undertake an audit and to implement results in a completed audit cycle.</p>	<p>To appreciate the importance of adopting a quality and safety perspective in improving current service provision.</p>