

Prevocational Training Term Description: Psychiatry in Acacia

Date of term description version	January 2024
Date term last accredited	April 2022

Term Details

Facility	North Canberra Hospital (NCH)				
Term name*	Acacia (Mental Health)				
Term specialty*	Psychiatry				
Term location	Acacia Ward Keeney Building				
Classification of clinical experience in term* (Highlight a maximum of 2)	Un-differentiated illness patient care	Chronic illness patient care	Acute critical illness patient care	Peri-operative/procedural patient care	Non-direct clinical experience (PGY2 only)
Is this a service term? Service term is a term with discontinuous learning experiences including limited access to education program or limited access to regular within-unit learning activities or less/discontinuous overarching supervision (e.g., relief term or nights with limited staff). Note: this will be determined by CRMEC based on how whether this is discontinuous supervision and education experience within the term				Yes	No
Term duration (weeks)*	12-14 weeks (depending on term dates)				
Term accredited for	PGY1 and PGY2		PGY2 Only		
Total number of prevocational training places	2	Limitations/conditions In some terms, the CRMEC will make limitations (e.g. skills mix or minimum numbers)	There is no current limitation on this term		

Term Supervision

Term Supervisor (name and position) Term supervisor is responsible for conducting term orientation, discussing the PGY1/2's learning needs with them, and conducting and documenting a midterm and end-of-term assessment. Term supervisors must complete mandatory training and commit to a code of conduct outlining their responsibilities.	Dr Lakhwinder Bhatia (Staff Specialist)
Clinical team supervision Primary/Immediate Clinical Supervisor (name and position) Clinical supervisor is a consultant or senior medical practitioner (PGY3+) with experience in managing patients in the relevant discipline. They are readily	Dr Sumudu Godawita (Staff Specialist)

	accessible for support, provide education, conduct EPAs and contribute to assessment.	
	Additional Clinical Supervisors (positions) Position of others (PGY3+) responsible for day-day clinical supervision, including after-hours supervisors.	Mental Health Registrars (usually 2 registrars rostered during the day, 1 on call during after-hours)
	EPA Assessors Name and position of others (PGY3+) who have completed training to undertake EPA assessments.	Clinical supervisors and registrars must have completed EPA training to be an EPA assessor.
Clinical Team Structure* Highlight the team model, identify and describe the clinical team structure including how PGY1/2s are distributed amongst the team.	Ward Based	Team Based
		Other
	Clinical team will be composed of a JMO, Registrar and Consultant.	

Commencing the Term

Requirements for commencing the term* If there are any specific requirements (e.g., courses, procedural skills or e-learning requirements) provide details of how the prevocational doctor will receive this training/will be assessed.	Basic Clinical Training. Expected to have undergone the mandatory training in BLS and Fire training. The RMO will not require any additional skills or knowledge apart from those that he/she would normally use on any ward overtime shift - basic clinical skills.
Orientation Include detail regarding the arrangements for orientation to the term, including who is responsible for workplace orientation and any additional resource documents such as clinical policies and guidelines required as reference material. The term supervisor is responsible for orienting the JMO to the term requirements and clinical expectations within the first week of starting the term.	Start of term Orientation delivered by Medical Administration. Mandatory ward orientation with CNC of the department. Orientation is organised in the first week for Theatres which includes scrubbing and gloving techniques. The Psychiatry Unit provides a comprehensive orientation program which includes: <ul style="list-style-type: none"> • Tour of the unit • Clinical policies • Weekly schedule with Starting times • Responsibilities • Supervision Duress alarms are to be worn at all times when on the ward. Formal orientation is held on Monday morning of first day, delivered by the term supervisor in Acacia ward.

Overview of the Unit

The role of the unit and range of clinical services provided, including an outline of the patient case mix, turnover and how acutely ill the patients generally are

Acacia Ward is a purpose-built 21 bed inpatient unit. The unit provides assessment and multi-disciplinary therapeutic intervention for individuals aged 18 and over (unless otherwise approved) with medium to high acuity mental health problems. There is no set length of stay for Acacia Ward although it is anticipated that most people accessing Acacia Ward will have a length of stay greater than 48 hours.

Acacia provides inpatient care for adolescents and adults suffering from a variety of mental health issues. A majority of these patients suffer from a range of comorbid medical conditions such as Eating Disorders, Chronic pain issues, Neurological issues and complex cardio metabolic conditions which require ongoing and at times acute medical input.

Clinical responsibilities and tasks of the prevocational doctor

Provide an overview of the routine duties and responsibilities

The JMOs will be expected to:

- Take relevant medical and psychiatric histories, examine, and determine a provisional management plan for patients being admitted to the inpatient unit with the assistance of the senior medical staff- i.e. Registrar and /or Consultant.
- Attend to the mental and physical health needs of the patient, update clinical notes and complete all paperwork as required; this includes entries in the digital health record, medication charts, Mental health Tribunal paperwork, risk assessment forms, pathology forms, requests for X-rays, CT scans & MRIs.
- Perform physical examinations within 24 hours of admission to the unit.
- Completed discharge summaries within 48 hrs of discharge.
- Attend the weekly MDTRs when teaching scheduled permits.
- Ensure all paper work, medication charts, discharge summaries and referrals letters etc. are written for their patients.
- Share a small caseload of patients, and will be expected to assist Registrar colleagues and Consultants in the provision of care.
- Keep the medical records up to date.
- Complete assessments of patients who are directly admitted to the ward and complete the admission process when Registrars are not available.

Work Routine

Provide an overview of the work routine

Clinical handover procedure

Provide an overview of the handover procedure and expectations in this training term

Clinical handover occurs every day at 0900 in the Handover meeting room. Attended by nursing staff, allied health and medical officers (JMOs, registrars and consultants). Handover of any outstanding jobs for afterhours should be communicated with the afterhours JMO covering Mental Health (surgical pod). A handover document is to be updated and emailed to Mental Health administration team each Friday, for weekend staff to be aware of patients and treatment plans including frequency of review over the weekend.

Opportunities for Indigenous Health	Aboriginal and Torres Strait islander patients may present within this term and JMOs will be able to engage the support of the Aboriginal Liaison Officer as required for patients and their families and improve their knowledge, and skills around cultural safety.
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Education, Learning and Assessment

<p>Term Learning Objectives List the term-specific learning objectives*</p>	<p>Clinical management learning objectives:</p> <ul style="list-style-type: none"> • To be able to undertake a psychiatric assessment, including the main areas of history taking, mental state examination, cognitive assessment and risk assessment of a patient and summarize the main clinical issues. • To be able to formulate an initial management plan • To have an understanding of the Mental Health Act and the instances it is used. • To have a better understanding of psychotropic medication and its uses and the rationale for use of ECT (ideally to follow a patient through a course of ECT). • To have a better understanding of some basic psychological principles and dynamics which affect patients' presentations and trajectories, and the role of psychotherapy. • To have a better understanding of the roles of the family/ carers, and the socio-cultural factors which affect the presentation and management of mental disorders. <p>Communication learning objectives:</p> <ul style="list-style-type: none"> • To be able to communicate effectively and empathically with patients, their relatives and carers. • To be able to communicate effectively - verbally and in writing, with other members of the mental health team, medical and paramedical personnel especially GPs, and community workers. • To improve skills in preparation of legal documentation such as Mental Health Act paperwork. <p>Professionalism learning objectives:</p> <ul style="list-style-type: none"> • To show increased awareness of stigma in the broader community and subsections thereof, as it relates to psychiatric disorders • To demonstrate a respectful and compassionate attitude towards people • To show enthusiasm and initiative for learning and research. • Demonstrate a desire for self-directed learning • To be willing to teach and assist other staff • To be punctual and reliable and behave in an ethical manner
<p>Detail education and research opportunities and resources <u>specific to this training term</u> that will be available to the JMO during the term.</p>	<p>JMOs are encouraged to attend as many educational events as possible.</p> <p>The following general education is available:</p> <ul style="list-style-type: none"> • Tuesday afternoon teaching. This is protected time.

<p>Formal education opportunities should also be included in the unit timetable</p>	<ul style="list-style-type: none"> • Wednesday lunchtime Grand rounds. <p>The following term-specific education is available:</p> <ul style="list-style-type: none"> • Attendance at Multidisciplinary meetings (every Tuesday or Thursday afternoon) • Attendance at fortnightly ECT meetings and attendance at ECT sessions • Ongoing education is provided during ward rounds in form of teaching by Staff Specialists/Consultants. • Bedside "teaching on the run" is a very important aspect of JMO education and will be based on the people they are treating. • Basic psychiatric assessment and management skills will be taught as part of your term. 			
<p>During this term prevocational doctors should have opportunity to complete the following EPAs* (Highlight all that apply)</p>	<p>EPA 1 Clinical Assessment</p>	<p>EPA 2 Recognition and care of the acutely unwell patient</p>	<p>EPA 3 Prescribing</p>	<p>EPA 4 Team communication – documentation, handover and referrals</p>

Term/Unit Timetable and Indicative Duty Roster*

Include the **start time** and **finish times** of the shifts the prevocational doctor will be rostered to. Show the activities that the prevocational doctor are expected/rostered to attend – these include all **education opportunities** (both training facility-wide and term specific), ward rounds, theatre sessions, inpatient time, outpatient clinics, shift handover, morning handover from hospital night team, afternoon handover to hospital's after hours team. Please include the approximate times of activities wherever possible. If there are extended shifts or evening shifts attach four weeks of rosters for the whole team.

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
0900 - 0930 Handover	0900 - 0930 Handover	0900 - 0930 Handover	0900 – 0930 Handover	0900 - 0930 Handover		
	MDT		MDT	MDT		
Clinical Work	Clinical Work	Clinical Work	Clinical Work	Clinical Work		
ECT meeting fortnightly	1300-1530 Protected Teaching	12.00-1245 Grand Rounds				
Clinical Work	Clinical Work	Clinical Work	Clinical Work	Clinical Work		

Patient Load Average Per Shift	Acacia - 4 - 7 patient – shared load with consultant or registrar	
Overtime	Rostered overtime hours/week	5.1 Hours
	Unrostered overtime hours/week	Average of 4 hours /fortnight which can change due to seasonal changes or activity.
After hours roster Does this term include participation in hospital-wide afterhours roster? If so advise: <ul style="list-style-type: none"> • Frequency of after-hours work, including evenings, nights and weekends (hours/week and weekends/month) • Onsite supervision available after hours If the JMO will be working outside this term on afterhours roster, provide details of the after-hours work and a four-week roster. The designated after-hours supervisor should be listed in the supervisory team.	Rostered hours of work: PGY 1: <ul style="list-style-type: none"> • Day shifts (0830 -1700) • Surgical evening shifts (1300-2130) <u>Minimum</u> of 5 evening shifts per term • Surgical nights (2100-0730) <u>Minimum</u> of 7 night shifts per term • Surgical weekends (0730-2130) <u>Minimum</u> 2 weekend shifts • Surgical Weekends (0730 -2130) <u>Maximum</u> 2 extra shifts (1 Saturday shift and 1 Sunday shift) on sick relief a term. PGY 2: <ul style="list-style-type: none"> • Day Shifts ACACIA (0830-1700) • Surgical evening shifts (1300-2130) <u>Minimum</u> of 5 evening shifts per term • Surgical nights (2100-0730) <u>Minimum</u> of 7 night shifts per term • Surgical weekends (0730-2130) <u>Minimum</u> of 2 shifts per term + 2 sick relief shifts, 1 Saturday shift and 1 Sunday shift a term. Ward cover for Surgical and Mental health wards. Attend to patients and jobs as required (handed over from day teams, if contacted by nursing staff). Can contact Medical ward registrar, Surgical registrar or Psychiatric registrar on call depending on advice required. While participating in afterhours or weekend roster the JMOs will also be caring for the surgical patient in the surgical units. They would help the surgical registrar manage surgical issues and liaise with medical registrar to identify and address medical issues. Please review the surgical term descriptions for more information.	

List Other Relevant Documentation

Intern job description
 RMO job description
 Scope of Practice