Stage 1 syllabus

Document version history

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<tr>
<th>Version N°</th>
<th>Revision description/reason</th>
<th>Date</th>
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<tbody>
<tr>
<td>v1.4</td>
<td>Reformatted (content numbered)</td>
<td>28/06/12</td>
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<tr>
<td>v1.3</td>
<td>Updated with content identified during Stage 1 blueprinting</td>
<td>23/04/12</td>
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Preamble

This document has been prepared with the intent of providing a syllabus for learning for Stage 1 of the Competency-Based Fellowship Program (CBFP). The syllabus intends to define, for trainees and educators, the knowledge base that underpins the acquisition of competencies in Stage 1 and that is required for progression to Stage 2. The content outlined below is intended to inform knowledge acquisition across clinical, informal and formal education settings as well as self-directed learning in accordance with the CBFP framework.

The syllabus is not intended to be prescriptive. Accordingly, in order to be consistent with the principles of adult learning and to reflect the richness and diversity of psychiatry, detailed descriptions of content are intentionally excluded. This also allows for advances in psychiatric knowledge and changing paradigms. It is recognised that local training schemes and Formal Education Courses (FECs) will provide greater levels of specification.

The syllabus is indicative of the breadth of knowledge required. All areas in the syllabus are important and need to be covered; however, not all areas could be expected to be learnt to the same level. To help trainees, FEC coordinators, supervisors and other educators, a rating system has been utilised to indicate the depth of knowledge expected.

| Depth of knowledge as appropriate for Stage 1 (not importance of knowledge) |
|-----------------------------|-----------------------------|
| AC  | Awareness of concepts |         |
| WK  | Working knowledge |         |
| IDK | In-depth knowledge |         |

It is expected the rating system also reflects the learning opportunities available to trainees in the first stage of training. The rating currently attributed to each area in the syllabus affects Stage 1 training only and the rating may change as training progresses.
Content

1 Interviewing and assessment
   1.1.1 Basic principles of interviewing
   1.1.2 Mental state examination (MSE)
   1.1.3 Phenomenology
   1.1.4 Appropriate medical assessment and investigations
   1.1.5 Use of collateral sources
   1.1.6 Impact of cultural context
   1.1.7 Risk assessment
   1.1.8 Formulation

2 Assessment and management of psychiatric emergencies

3 Diagnosis and classification
   3.1.1 Systems of classification (ICD, DSM)
   3.1.2 Principles and problems
   3.1.3 History of development of diagnosis and classificatory systems in psychiatry

4 Basic sciences
   4.1.1 Neurosciences (relevant to the clinical syndromes:)
      4.1.1a Neuroanatomy
      4.1.1b Neurophysiology
      4.1.1c Neurochemistry
   4.1.2 Genetics and inheritance

5 Treatments in psychiatry
   5.1 Social psychiatry
      5.1.1 Principles of the recovery philosophy
      5.1.2 Principles of stigma, mental health literacy, the role of public education initiatives
      5.1.3 Role of social support services (housing, accommodation, non-governmental organisation [NGO] sector individual and group supports)
      5.1.4 Role of non-medical individual and group counselling supports, eg. rape crisis services, veterans’ support services
      5.1.5 Role of consumer and advocacy groups
   5.2 Biological
      5.2.1 Principles of psychopharmacology and prescribing
      5.2.2 Antipsychotics
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<td>5.2.6</td>
<td>Electroconvulsive therapy (ECT)</td>
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### 5.3 Psychological

- 5.3.1 Basic principles of psychological interventions (including non-specific factors) | IDK |
- 5.3.2 Understanding the principles and application of:
  - 5.3.3 Supportive psychotherapies | IDK |
  - 5.3.4 Psychodynamics | WK |
  - 5.3.5 Cognitive–behavioural therapy (CBT) | AC |

### 6 Critical appraisal and basic statistics

- 6.1.1 How to evaluate a scientific paper in psychiatry | WK |
- 6.1.2 Fundamentals of statistics relevant to psychiatry | WK |
- 6.1.3 Understanding study designs (quantitative and qualitative) | AC |

### 7 Basic ethics

- 7.1.1 Ethics of involuntary treatment | IDK |
- 7.1.2 Boundary issues | IDK |
- 7.1.3 Issues of the exercise of power in psychiatry | IDK |
- 7.1.4 Privacy and confidentiality | IDK |
- 7.1.5 Distribution of healthcare | AC |
- 7.1.6 Relationship with pharmaceutical companies | AC |

### 8 Professionalism

- 8.1.1 Importance of personal ethics and integrity | IDK |
- 8.1.2 Importance of maintaining professional standards | IDK |
- 8.1.3 Importance of maintaining personal wellbeing | IDK |

### 9 Mental health and related legislation

- 9.1.1 Relevant local mental health legislation | IDK |
- 9.1.2 Responsibilities under the Mental Health Act | IDK |
- 9.1.3 Principles underpinning mental health legislation | WK |
- 9.1.4 Other health legislation (common law):
  - 9.1.4a Duty-of-care | WK |
  - 9.1.4b Enduring power of attorney | AC |
  - 9.1.4c Guardianship | AC |
  - 9.1.4d Advance health directives | AC |
### 10 Normal development across the lifespan

| 10.1.1 | Adolescent | WK |
| 10.1.2 | Adult | WK |
| 10.1.3 | Early attachment | AC |
| 10.1.4 | Infant | AC |
| 10.1.5 | Child | AC |
| 10.1.6 | Old age | AC |

### 11 Basic psychology

| 11.1.1 | Responses to trauma (including early-developmental trauma) | WK |
| 11.1.2 | Grief and loss | WK |
| 11.1.3 | Group theory and group dynamics | WK |
| 11.1.4 | Principles of adult learning | AC |
| 11.1.5 | Personal learning style | AC |
| 11.1.6 | Learning and related theories | AC |
| 11.1.7 | Basic principles of cognitive and behaviour therapy | AC |

### 12 Cultural competence

| 12.1.1 | Impact of cultural factors in clinical practice | WK |

### 13 Patients, families and carers

| 13.1.1 | History of patient empowerment and ‘consumer’ and carer movements | AC |
| 13.1.2 | Understanding the principles and importance of working with patients, families and carers | AC |
14 Specific disorders

In Stage 1, trainees are expected to acquire knowledge of the following aspects of the disorders listed below:

Epidemiology, aetiology (biopsychosocial, cultural), symptomatology, course, assessment, management (biopsychosocial, cultural), psychiatric and medical comorbidities, differential diagnoses.

14.1 Organic psychiatry
   14.1.1 Delirium
   14.1.2 Dementia

14.2 Substance dependence
   14.2.1 Acute intoxication
   14.2.2 Withdrawal

14.3 Psychosis
   14.3.1 Schizophrenia spectrum disorders

14.4 Mood disorders
   14.4.1 Bipolar disorder
   14.4.2 Depressive disorders

14.5 Anxiety disorders
   14.5.1 Panic and phobias
   14.5.2 Responses to adversity and trauma (adjustment disorders and post-traumatic syndrome)
   14.5.3 Generalised anxiety disorder (GAD)
   14.5.4 Obsessive–compulsive disorder (OCD) spectrum

14.6 Personality disorders
   14.6.1 Borderline
   14.6.2 Anti-social
   14.6.3 Narcissistic
Appendix

AC – Awareness of concepts

Advance health directives
Basic principles of cognitive and behaviour therapy
Child (normal development)
Cognitive–behavioural therapy (CBT)
Dementia
Distribution of healthcare
Early attachment (normal development)
Enduring power of attorney
Generalised anxiety disorder (GAD)
Genetics and inheritance
Guardianship
History of development of diagnosis and classificatory systems in psychiatry
History of patient empowerment and ‘consumer’ and carer movements
Infant (normal development)
Learning and related theories Obsessive–compulsive disorder (OCD) spectrum
Old age (normal development)
Personal learning style
Principles of adult learning
Principles of stigma, mental health literacy, the role of public education initiatives
Principles of the recovery philosophy
Relationship with pharmaceutical companies
Role of consumer and advocacy groups
Role of non-medical individual and group counselling supports, eg. rape crisis services, veterans’ support services
Role of social support services (housing, accommodation, non-governmental organisation [NGO] sector individual and group supports
Understanding study designs (quantitative and qualitative)
Understanding the principles and importance of working with patients, families and carers
WK – Working knowledge

Acute intoxication
Adolescent (normal development)
Adult (normal development)
Anti-social personality disorder
Anxiolytics
Delirium Duty-of-care
Electroconvulsive therapy (ECT)
Fundamentals of statistics relevant to psychiatry
Grief and loss
Group theory and group dynamics
How to evaluate a scientific paper in psychiatry
Impact of cultural factors in clinical practice
Narcissistic personality disorder
Neuroanatomy
Neurochemistry
Neurophysiology
Neurosciences (relevant to the clinical syndromes...)
Panic and phobias
Principles and problems (of diagnosis and classification)
Principles underpinning mental health legislation
Psychodynamics
Responses to adversity and trauma (adjustment disorders and post-traumatic syndrome)
Responses to trauma (including early-developmental trauma)
Withdrawal

IDK – In-depth knowledge

Antidepressants
Antipsychotics
Appropriate medical assessment and investigations
Assessment and management of psychiatric emergencies
Basic principles of interviewing
Basic principles of psychological interventions (including non-specific factors)
Bipolar disorder
Borderline personality disorder
Boundary issues
Depressive disorders
Ethics of involuntary treatment
Formulation
Impact of cultural context
Importance of maintaining personal wellbeing
Importance of maintaining professional standards
Importance of personal ethics and integrity
Issues of the exercise of power in psychiatry
Mental state examination (MSE)
Mood stabilisers
Phenomenology
Principles of psychopharmacology and prescribing
Privacy and confidentiality
Relevant local mental health legislation
Responsibilities under the Mental Health Act
Risk assessment
Schizophrenia spectrum disorders
Supportive psychotherapies
Systems of classification (ICD, DSM)
Use of collateral sources