



The Royal
Australian &
New Zealand
College of
Psychiatrists

Certificate of
Postgraduate
Training

in Clinical Psychiatry

RANZCP CERTIFICATE OF POSTGRADUATE TRAINING IN CLINICAL PSYCHIATRY

Handbook

upskilling medical practitioners in mental health

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INTRODUCTION

The Royal Australian and New Zealand College of Psychiatrists (RANZCP) Certificate of Postgraduate Training in Clinical Psychiatry (referred to as the 'Certificate' throughout this handbook) is a qualification for medical practitioners that focusses on the development of practical clinical skills which can be applied to assessing patients who present with new mental health conditions or require assistance and/or support to manage a mental health condition.

The Certificate is designed to:

- upskill medical practitioners in psychiatry principles and techniques to assist patients with mental health conditions, in the context of their everyday practice
- prompt depth of learning in an elective special interest area, applicable to the patients they consult with
- create pathways to access advice from specialist psychiatrists
- develop a community of medical practitioners who value continuing professional development in mental health and ongoing learning together.

We understand there is a plethora of information available to practitioners on mental health. Our goal when developing the Certificate was to prepare an education and training package which combines curated online resources on a range of mental health presentations with the opportunity to apply this learning and receive feedback when conducting psychiatric interviewing, developing mental health care plans with patients, their family and carers and when delivering mental health interventions.

Being awarded the Certificate is just the beginning. Participants will have an opportunity become associated with the RANZCP and encouraged to stay involved in a collaborative network.

We are grateful for the input of the members of the Expert Advisory Group, Curriculum Authorship Steering Group and Teaching and Learning Steering Group to the development of the Certificate program. The RANZCP would like to thank all those involved.

The Certificate Handbook

The Certificate Handbook (also referred to as the 'Handbook') has been prepared to help guide Participants, and those involved in delivering the Certificate, through the program's requirements. Information in this handbook outlines the 'how to' for enrolment and engaging in learning activities and assessment. It links to policy documents and also to the College website for specific details that change more frequently (e.g., submission dates).

Please note, this Handbook will be updated as needed. The College [website](#) hosts the latest version.

The Certificate Handbook should be read in conjunction with:

- [Key Competencies of the Certificate of Postgraduate Training in Clinical Psychiatry](#)
- [Curriculum for the Certificate of Postgraduate Training in Clinical Psychiatry](#)
- [Certificate of Postgraduate Training in Clinical Psychiatry Policy](#)

The online Certificate Portfolio contains forms for all learning and assessment activities described in this handbook. Further information on completing them is available via the 'Help' feature within the Portfolio.

The Certificate of Postgraduate Training in Clinical Psychiatry (CPTCP) team are available to assist should you have any questions, or if you need to discuss particular aspects of a Participants journey through the program.

ABOUT THE COLLEGE

The RANZCP is responsible for training, educating, and representing psychiatrists in Australia and Aotearoa New Zealand.

The College is accredited by the Australian Medical Council (AMC) and the Medical Council of New Zealand (MCNZ) to deliver specialist medical education and training, and professional development programs.

The RANZCP develops and promotes clinical standards in the practice of psychiatry in Australia and Aotearoa New Zealand.

College contacts

The CPTCP team at the RANZCP can be contacted to answer any questions about the Certificate. Details are listed below.

Email: certpsychhelp@ranzcp.org

Call: 1800 337 448

Governance of the Certificate

The Certificate of Postgraduate Training in Clinical Psychiatry Committee (the Committee) reports to RANZCP Education Committee, and its role is to oversee the delivery of the Certificate.

The Committee is responsible for:

- (a) Establishing policies and procedures to allow for the successful implementation of the Certificate.
- (b) Confirming eligibility for entry into the Certificate, including the assessment of recognition of prior learning applications.
- (c) Ratifying and approving elective learning plans.
- (d) Accrediting Certificate Supervisors, Elective Supervisors and Certificate Reviewers.
- (e) Determining criteria and standards of performance to satisfy the rules and processes of the Certificate.
- (f) Reviewing Certificate Participants' Portfolios and awarding qualification for Participants who meet the standards of performance and completion of all requirements.
- (g) Evaluating the graduate outcomes and recommending changes to the curriculum based on findings.
- (h) Recommending any amendments to curriculum (including learning outcomes, learning activities and assessment) or its implementation to the Education Committee.
- (i) Reviewing policy matters in relation to the Certificate for recommendation to the Education Committee.
- (j) Overseeing the training of Certificate Supervisors, Elective Supervisors and Certificate Reviewers, Certificate Peer Group Facilitators and Certificate Assessors and advising them of procedural changes.
- (k) Recommending, establishing, managing, and participating in subcommittees and working groups for specific purposes determined by the Committee and approved by the Education Committee which would benefit the implementation and administration of the Certificate.
- (l) Identifying and managing risks associated with the Committee, in accordance with the RANZCP's Risk Management Policy, and for reporting high level risks to the Education Committee.

The composition of the Committee includes members with experience in regional, rural or remote psychiatry, experience in private practice, a community member with lived experience and a member who identifies as an Aboriginal or Torres Strait Islander.

For more information on the membership of the Committee refer to the Committee [Regulations](#).

Certificate Policy

The Certificate of Postgraduate Training in Clinical Psychiatry Policy (the Certificate policy) outlines the requirements Participants must meet to complete the Certificate.

Participants and those involved with the delivery of the Certificate (Certificate Supervisors, Elective Supervisors, Certificate Reviewers and Peer Group Facilitators) must be familiar with the Certificate policy and apply them when undertaking activities associated with the Certificate.

If there are any inconsistencies between the Certificate policy and the Certificate Handbook, the Certificate policy applies.

APPLICATION AND ENROLMENT IN THE CERTIFICATE

1. APPLICATION FOR ENTRY

Full requirements for eligibility for consideration for entry into the Certificate are set out in the Certificate policy. A prospective applicant must meet all requirements for their application to be considered. This includes having current general or specialist medical registration as a medical practitioner in Australia. Medical registration must remain in place for the duration of the Certificate.

An application form must be fully completed and application fee paid for an application to be considered by the Committee.

Options on how to pay the fees are included in the Application Form.

If the Committee considers an applicant to be suitable to complete the Certificate the proposed applicant will be invited to complete enrolment. This will require a further application form to be completed and payment of associated fees.

If an applicant is deemed to be not suitable written advice will be provided as to why.

2. NOMINATING A CERTIFICATE SUPERVISOR

Applicants can nominate a psychiatrist who works with them, or who they have worked with previously, to become an accredited Certificate Supervisor. Ideally, the Certificate Supervisor works in the same State or Territory as the applicant as they will be familiar with the health-related legislation of that jurisdiction.

If an applicant knows of a psychiatrist who may be willing to become a Certificate Supervisor, please contact the CPTCP team to receive templates, which includes links to information for potential Supervisors in relation to duties, how to apply, and how to become accredited.

Supervisors will be required to complete an online module and be ratified by the Certificate Committee.

Confirmation of appointment will be emailed to the supervisor and the applicant if approved. If a Supervisor does not meet the requirements the CPTCP team will work with the applicant to identify a suitable Supervisor for the Certificate.

3. ENROLMENT IN THE CERTIFICATE

Applicants invited to enrol will be required to complete the required paperwork and associated fees. As with the application form the options on how to pay the fees will be included. There will be an option for applicants to pay the fees in instalments.

Commencement date

Applicants are invited to enrol in the Certificate for a stipulated commencement date. At least one week prior to the commencement date, the applicant must have submitted the signed enrolment form, paid the prescribed fees, and confirmed their Certificate Supervisor.

Applicants who have not completed the enrolment requirements one week prior to the intake commencement date will not be enrolled and will need to reapply to be considered for subsequent intakes.

Commencement dates and Certificate term dates will be available on the College [website](#).

Upon finalising enrolment, a Participant will receive an online Certificate Portfolio profile and directions for accessing the online portal.

Maintaining enrolment

Participants are enrolled in the certificate program for 24 calendar months and can extend their enrolment for another 24 calendar months if they have not completed all the requirements of the program.

Participants will be notified three-months prior to their initial enrolment expiring. Details of how to re-enrol including links to the application form and associated requirements will be provided. Re-enrolment including associated fees must be completed prior to the expiry of the initial enrolment.

If a Participant does not re-enrol before their enrolment expiry date, they will no longer have access to the Certificate Portfolio and they will be unable to continue to complete any learning or assessment activities.

4. FEES

A fee is payable at application, enrolment and at extension of enrolment.

Participants will not be eligible to attempt the Oral Presentation, apply for a Certificate Portfolio Review, or apply for the award of the Certificate if any fees remain unpaid.

If a Participant opts to pay using a payment plan but withdraws from the Certificate any time after four weeks from enrolment or extension of enrolment all fees are required to be paid.

For the current schedule of fees, refer to [Fees](#) on the RANZCP website.

5. SUMMARY OF CERTIFICATE REQUIREMENTS

Participants must complete all the requirements of the Certificate in a minimum of 12 calendar months and a maximum of 48 calendar months

The Certificate program is competency-based and Participants can choose the amount of time they devote to their study to complete requirements within these timeframes.

Core Components of the Certificate

Learning		
ACTIVITY	ACTION	LIAISON WITH
Initial Meeting	Meeting within first 6 weeks	Certificate Supervisor
Online Learning Modules	Foundations of Clinical Psychiatry: Concepts to Set the Scene	Certificate Supervisor to discuss Applied Learning
	Psychiatric Assessment: Exploring Patients' Presenting Concerns	
	Prevalent and Disruptive: Stress, Avoidance and Anxiety	
	Dual Diagnosis: Alcohol and Other Drugs in Psychiatry	
	Highs and Lows: The Spectrum of Mood Disorders	
	Deliberate Self-Harm, Suicide and Risk Mitigation	
	Tell Me I'm Here*: Identifying and Managing Psychosis	
	Forgetfulness, Confusion and Aging: Differentiating the Causes of Cognitive Impairment	
	From Birth to Beyond: Developmental Disorders across the Lifespan	
Ed and Ana: Confronting Disordered Eating		
Patient Consultation Observations	5 observations	N/A
Practice Logbook	40 unique entries	N/A
Reflections	8 reflections	N/A
Peer Group Discussion Meetings	12 hours	Peer Group Facilitator
Structured Feedback Exercises (SFE's)	Comprehensive Patient Assessments (CPA's)	Certificate Reviewers
	Care Plan Reviews (CPR's)	Certificate Reviewers
	Observed Care Plan Discussions (OCPD's)	Certificate Reviewers
	Case-based Discussions (CbD)	Certificate Reviewers

Assessment		
ACTIVITY	ACTION	LIAISON WITH
Online Learning Modules	Activities throughout modules	N/A
	Applied Learning template responses for each module	Certificate Supervisor

Core Clinical Skills Activities (CSA)	Assessing patients presenting with mental health conditions	Certificate Supervisor
	Assessing and managing risk in relation to patients who may harm themselves or others	
	Use of psychosocial interventions to support patients in relation to their mental health	
	Initiating pharmacotherapy for patients with mental health conditions	

Elective Components of the Certificate

Learning		
ACTIVITY	ACTION	LIAISON WITH
Elective Learning Plan	Prepared on template, approved by the Committee	Elective Supervisor
Narrative Review	2000 words	
Structured Feedback Exercises (SFE's)	Comprehensive Patient Assessments (CPA's)	
	Care Plan Reviews (CPR's)	
	Observed Care Plan Discussions (OCPD's)	
	Case-based Discussions (CbD)	

Assessment		
ACTIVITY	ACTION	LIAISON WITH
Elective Clinical Skill Activity (CSA)	As per Elective Learning Plan	Elective Supervisor
Oral Presentation	On special interest area	Certificate Assessors

6. LEARNING ENVIRONMENT

All learning and assessment activities must be completed in Australia. Enrolment of a Participant was accepted due to assurance provided that their usual employment provides an appropriate number of consulting experiences with patients.

Meetings for the purpose of the Certificate program must be conducted in a professional manner and scheduled in an appropriate and private environment.

Participants must ensure that they have the following information and communications technology:

- Functional computer, tablet and/or other device (and back up option), with video and audio enabled
- Hardware is installed in locations where needed to be observed, or can be easily moved as needed (e.g. laptop)
- Mobile desk/trolley/stand available to position computer or device appropriately
- Video conferencing software available on selected devices and tested
- Appropriate software (internet browser) to regularly access and engage with the Certificate Portfolio and complete Online Learning Modules and
- Participant is able to use IT systems, i.e. digital health record, referral system etc.

It is expected that Participants will have their video camera turned on when participating in all learning and assessment activities.

Participants must ensure privacy and a professional attitude for all meetings, which may occur virtually or in-person, these include but are not limited to:

- Direct observation of Participant with patients for SFE's
- CPR's and CbD's with Certificate Reviewers
- Progress Review meetings with Certificate Supervisor
- Peer Group Discussion Meetings
- Other informal meetings.

For direct observations of consultations in person, the consulting room or workspace must be of a suitable size for the Participant, Certificate Reviewer and patient and family/carers.

It is the responsibility of the Participant to ensure their participation in the certificate program and its individual activities and assessments does not contradict their workplace policies.

UNDERTAKING THE CERTIFICATE

1. SUPERVISION AND REVIEW

Participants of the Certificate must be employed as a medical practitioner and consult with patients who require assessment and/or support in relation to their mental health.

Participants do not need to complete any rotations or placements at designated accredited sites, and the RANZCP does not find employment for Participants while they are enrolled in the Certificate program.

Participants undertake the Certificate alongside their usual day to day practice as a medical practitioner and make arrangements to be supervised and complete SFE's at their place of work.

In most circumstances Participants will be observed with patients or have meetings with their Supervisor(s) and Certificate Reviewers by video conference. This allows all medical practitioners to be involved in the Certificate program regardless of where they reside, as long as they have the equipment and an internet connection that supports video conferencing. If there is a psychiatrist(s) available and willing to be a Certificate Supervisor and/or Certificate Reviewer where they work (e.g. in a hospital or at a local mental health service), or nearby, learning and assessment activities and meetings may occur in-person.

Continued employment is the responsibility of the Participant, as is the exposure to the clinical experiences necessary to complete the learning and assessment activities of the Certificate.

Change of employment during the Certificate

All Participants enrolled in the Certificate have an obligation to advise the RANZCP of any changes to their employment, within 2 weeks.

Participants must advise the Committee Chair in writing, by email: certpsychhelp@ranzcp.org

Potential supervision models

The following table provides examples of potential supervision and review arrangements.

Engagement	Observations of psychiatrist consultations (Direct observation of psychiatrists by Participants in person or by video conference).	SFE's (Direct observation of Participants by psychiatrists in person or by video conference).	Progress Review Meetings (Meetings in person or by video conference).
<p>Private Practice <i>Most suited to General Practitioners (GPs) and other medical practitioners working in private practices who have patients presenting with mental health conditions, paired with psychiatry supervisors who also work predominantly in private practice or at a private mental health hospital.</i></p>			
<p>The Certificate Participant pairs with a psychiatry supervisor.</p>	<p>The Certificate Participant organises to go to the psychiatrists practice at scheduled times to observe the psychiatrist with patients and/or observe consultations. These may be patients that the Participant has referred for assessment and/or management.</p>	<p>SFE's may be conducted at the psychiatrist's rooms or Certificate Participants practice.</p>	<p>Meetings are organised at mutually convenient times to discuss specific experiences and progress in the Certificate.</p>
<p>Community Mental Health Services <i>Most suited to medical practitioners who work in settings with limited patients presenting with mental health conditions, do not work at a public hospital and/or are not paired with a psychiatrist supervisor who works in private practice.</i></p>			
<p>The Certificate Participant engages with a community mental health service and a psychiatrist who can provide supervision through the service.</p>	<p>The Certificate Participant organises a series of sessions to observe the psychiatrist with patients at the health service or unit. They may also participate in outreach services.</p>	<p>SFE's are conducted with patients who present to the community clinic.</p>	<p>Meetings are organised to discuss specific experiences and progress in the Certificate when both the Certificate Participant and the supervisor are at the community clinic.</p>
<p>Public Hospitals that have a Psychiatric Service/Unit <i>Most suited to medical practitioners who work in a hospital that has psychiatry services (minimum consultation-liaison psychiatry service).</i></p>			
<p>The Certificate Participant employed at the hospital engages with the head of the psychiatry department or the psychiatrist working with the emergency mental health care team, to identify a psychiatrist who will provide supervision.</p>	<p>The Certificate Participant organises a series of sessions to observe the psychiatrist at outpatient clinics or the emergency mental health care unit/centre.</p>	<p>SFE's may be conducted with patients in the emergency department, outpatient clinics or inpatient services. The Certificate Participant may request that they are observed assessing or providing care in the department in which they work (e.g., the emergency department).</p>	<p>Meetings are organised to discuss specific experiences and progress in the Certificate when both the Certificate Participant and the supervisor are at the hospital.</p>

Public or Private Hospitals			
<i>Most suited to medical practitioners working in a hospital who have patients presenting with mental health conditions, paired with psychiatry supervisors also working predominantly in private practice or hospitals.</i>			
The Certificate Participant pairs with a psychiatry supervisor.	The Certificate Participant organises a series of sessions to observe the psychiatrist at outpatient clinics or their practice.	SFE's may be conducted at the psychiatrist's rooms or Certificate Participants workplace. The Certificate Participant may request that they are observed assessing or providing care at the hospital (e.g., on the ward).	Meetings are organised at mutually convenient times to discuss specific experiences and progress in the Certificate by video conference.

Certificate Supervisors

Participants' learning will be supported by an accredited Certificate Supervisor. Participants can nominate a psychiatrist who works with them, or who they have worked with previously, to become an accredited Certificate Supervisor. Ideally, the Certificate Supervisor works in the same State or Territory as the Participant as they will be familiar with the health-related legislation of that jurisdiction.

If a Participant does not nominate a Certificate Supervisor, one will be allocated.

Certificate Supervisors Accreditation

In order to supervise or review Participants of the Certificate, Fellows must be accredited by the Committee. Those undertaking roles must:

- a) be RANZCP Fellows with current specialist registration as a Psychiatrist
- b) be in good standing with the RANZCP
- c) be familiar with the Certificate Curriculum Learning Outcomes and Policy and Procedures
- d) complete training relevant to their role
- e) fulfil their role in accordance with the role description as detailed in the Certificate Handbook.

Proposed supervisors will be required to undertake an online module. Once completed the Committee will ratify in order to become accredited.

Certificate Supervisors, Elective Supervisors and Certificate Reviewers must maintain their continuing professional development as required by the Medical Board of Australia.

Certificate Supervisors, Elective Supervisors and Certificate Reviewers must re-apply every five years.

Re-accreditation requires completion of refresher training and involves consideration of Participant feedback.

A Certificate Supervisor should supervise no more than two Certificate Participants at any one time. A request for supervising additional Participants must be approved by the Committee.

As part of supervising Participants, a Certificate Supervisor is required to:

- a) Conduct an initial meeting with the Certificate Participant to establish goals for supervision, plan how they will apply the learning outcomes to their area of practice, plan how they will achieve the Certificate requirements, assist the Participant self-identify strengths and areas for

development, consider potential ideas for the elective special interest area and discuss suitable mechanisms and times for additional contact.

- b) Enable the Certificate Participant to observe them conducting diagnostic and therapeutic interviews, with discussion about the interview style and the opportunity to reflect on any clinical and management issues raised.
- c) Facilitate opportunities for the Certificate Participant to observe other psychiatrists conducting diagnostic and therapeutic interviews.
- d) Conduct a Progress Review meeting every three-months to review the Participants progress with completing the Certificate requirements i.e. what has already been achieved, what is yet to be achieved, areas of strength and areas needing further development.
- e) As part of the three-monthly Progress Review, discuss and provide feedback on the Participants portfolio, including:
 - Engagement with Online Learning Modules
 - Practice Logbook
 - Reflections
 - Attendance at Peer Group Discussion Meetings
 - SFE's and how the Participant has changed their practice to incorporate the feedback provided by Certificate Reviewers
 - Progress with demonstrating competence in the CSA's of the Certificate
 - Progress with developing an elective learning plan.
- f) Be available to answer any queries about the Participants clinical work during the progress review and at agreed times.
- g) Provide feedback on the Participants elective learning plan and narrative review and confirm completion.
- h) Confirm the completion of CSA's within the Certificate Portfolio.
- i) Certify that the Core and Elective components of the Certificate have been completed, and that they are ready to have their Portfolio assessed by the Committee.
- j) Provide feedback to the Committee on any suggested improvements in Certificate Policy or Processes.

Certificate Supervisors should allocate approximately 4 hours (in total) every three-month term to review submitted activities of each Certificate Participant, provide guidance to a Participant, and to monitor progress, including meeting with the Certificate Participant to complete the three-monthly Progress Review form.

Elective Supervisors

Each Participant needs to nominate and/or confirm an Elective Supervisor.

As part of the supervision of a Participant, an Elective Supervisor is required to:

- a) Conduct a meeting with the Participant to discuss their elective specialist interest area, its particular focus and possible goals that could be included in the elective learning plan.
- b) Provide feedback to a Participant in relation to their elective learning plan and narrative review and confirm completion of these learning activities.
- c) Confirm completion of the Elective CSA.

For some Participants, their Certificate Supervisor may be an appropriate choice to also take on the role of Elective Supervisor. Alternatively, Participants can nominate an Elective Supervisor or request assistance from the College for one to be allocated.

The Elective Supervisor must be confirmed prior to starting the elective component of the Certificate.

Certificate Reviewers

Certificate Reviewers conduct SFE's with Participants, which includes providing feedback to Participants after directly observing them in consultations with patients, when reviewing mental health care plans and after case-based discussions.

It is preferable to seek feedback from a variety of Certificate Reviewers, to obtain different perspectives on patient care and create a network of psychiatrists to consult with. Multiple Certificate Reviewers are required for the SFE's allocated to a CSA before it can be confirmed.

A Certificate Reviewer must have the necessary skills to provide appropriate feedback, especially for more specific interest areas.

When completing SFE's with the Certificate Participant, the Certificate Reviewer is required to:

- a) Demonstrate an interest in a Certificate Participants patient presentations usually encountered within the context in which they work.
- b) Complete each SFE according to the instructions relevant to the exercise being completed.
- c) Encourage a Participant to self-reflect on their performance and identify aspects that require further development.
- d) Guide a Participant on areas of improvement and suggest strategies they could employ to address any identified areas, aligned to their area of practice and work context.
- e) Ensure feedback conversations directly relate to the observation of the Certificate Participant with a patient, or the discussion of a specific case/s referred to during the exercise, and feedback is documented on the form.
- f) Include any notes that will assist the Certificate Supervisor in determining a Participants progress, and/or demonstrated competence, with CSA's.
- g) Encourage a Certificate Participant to note specific actions they will take in response to their self-reflection and feedback.

Changing Certificate or Elective Supervisors during the Certificate

A Participant may change their Certificate or Elective Supervisor while completing the Certificate. The new Certificate or Elective Supervisor must be confirmed with the RANZCP prior to providing feedback or confirming the Participants completion of any learning or assessment activities.

Nomination of a new Certificate Supervisor or asking for another Supervisor to be allocated (Certificate or Elective) should, in the first instance be requested by emailing certpsychhelp@ranzcp.org

Elective Special Interest Area

Multiple Certificate Reviewers, or at least one other than the Elective Supervisor, are preferred for SFE's toward the Elective CSA.

Examples of Participants and elective special interest areas:

Julie is a paediatrician. Children are often referred to Julie from general practitioners who suspect that their patient has a neurodevelopmental disorder. Their elective special interest area is the diagnosis of attention deficit hyperactivity disorder (ADHD) and management of symptoms of ADHD in children.

Marli is a rural generalist in private practice and works one day a week at a clinic associated with the local Aboriginal Health Service. Her elective special interest area is assessment and management of major depressive disorder, specifically assisting Aboriginal and Torres Strait Islander patients with mood regulation.

Greg works in the emergency department at a large metropolitan hospital. His elective special interest area is assessment and initial management of deliberate self-harm.

Examples of supervision and review arrangements

Julie is a paediatrician, primarily in private practice and also works at a metropolitan children's hospital every second Friday. Julie has nominated the child and adolescent psychiatrist who works at the children's hospital as their Certificate Supervisor and will try to schedule the majority of the learning and assessment activities to align with their hospital roster. At their private practice they will organise some SFE's with Certificate Reviewers via teleconference, to assist them with the care of their private patients.

Amar is a general practitioner. He refers patients to a local psychiatrist but is increasingly finding there is a substantial waiting period for a first appointment. He hopes to observe some initial and follow up consultations for patients he has referred and Progress Review meetings in-person and request the psychiatrist to directly observe him for learning activities via video conference. In addition to working in his private practice, he provides on-site services to a Residential Aged Care Facility and also has input to their clinical governance. Amar will ask to be allocated an Elective Supervisor who has an interest in old age psychiatry to assist him with his special interest area.

Marli is a rural generalist in private practice in a small rural town. One day a week she works at a clinic associated with the local Aboriginal Health Service Mental Health Service. She sometimes refers patients to a psychiatrist in the closest regional centre, which is Xkm away though often patients prefer not to travel to the city and are reluctant to have consultations via telehealth. The psychiatrist in private practice has agreed to be Marli's Certificate Supervisor and they intend to use video conference for observation of consultations with patients and regular Progress Review meetings.

Greg works in the emergency department at a large regional hospital. He has nominated a psychiatrist working in the hospital to be his Certificate Supervisor. He intends to observe some patient consultations in the outpatient clinic and also complete some learning activities on suitable patients who are booked in to see his Supervisor. One of the consultant psychiatrists who regularly attends the emergency department has agreed to be a Certificate Reviewer and will opportunistically observe Greg during a day shift when a patient requires a mental health assessment. Greg would also like to schedule Case-based Discussions via video conference with another Certificate Reviewer who has an interest in adolescent psychiatry as he is particularly keen to improve his skills to assess adolescents and young adults.

2. CERTIFICATE PORTFOLIO

The Participants profile and all learning and assessment activities are managed online through the Certificate Portfolio (the 'Portfolio').

Upon confirmation of enrolment each Participant will be provided with access to the Portfolio and a unique username with instructions on how to set a password.

The Portfolio home page provides a summary of completed learning and assessment for both Core and Elective components of the Certificate so Participants can keep track of their achievements.

Through the Portfolio the Participant can:

- View their profile, upload a professional image (passport style) and amend contact information.
- Access forms relating to the administration of their program including:
 - Applying for recognition of prior learning

- Confirming an Elective Supervisor
- Requesting a period of interruption
- Requesting an extension of enrolment
- Submit learning activity entries, register for Peer Group Discussion activities, initiate Structured Feedback Activities, and upload their Elective Learning Plan and Narrative Review.
- Review and action feedback from Supervisors and Reviewers.
- Initiate a Progress Review.
- Request review of Clinical Skills Activities.
- Schedule their Oral Presentation.
- Request a Certificate Portfolio Review.

The top right-hand corner of the Portfolio has a Certificate help contact phone number and email address.

Maintaining the Certificate Portfolio

Each Participant is responsible for logging in to their Portfolio regularly and checking alerts. Alerts and notices on the left-hand side of the home screen guide Participants on recent activity, including responses from Supervisors and Certificate Reviewers and actions that the Participant should undertake to progress or finalise the various activities.

Emails will be sent to Participants for activities that are time sensitive (i.e. end of term and submission of Progress Review form).

Correspondence with Supervisors and Certificate Reviewers

The Certificate Portfolio is used for the initiation, submission and review of learning and assessment activities. When a form is submitted to a Supervisor or Certificate Reviewer, they will be alerted via the Dashboard on their Portfolio. Supervisors and Certificate Reviewers are responsible for logging in to the Certificate Portfolio regularly and checking alerts for recent activities undertaken by their Participants.

Organising mutually convenient times with a Certificate Reviewer for a SFE or a Certificate Supervisor for a Progress Review meeting is not facilitated by the Portfolio. Please check with them about their preferred method of contact and make arrangements accordingly.

3. COMPLETION TIME

Minimum time to complete the Certificate

Participants must be engaged in learning within the Certificate for a minimum of 12 calendar months. It is expected that many Participants will complete the Certificate over 24 calendar months or longer, applying their learning progressively as they work.

The amount of time Participants commit to completing the Certificate requirements is based on individual need. Participants engage at their own pace. Some Participants may allocate a few hours a week, others may prefer to spend less time per week and approach their learning in blocks when it is most convenient for them or to align with study leave. The number of hours spent toward learning or assessment activities is not monitored.

To accrue three-months toward the minimum time requirement each Participant must complete at least one SFE during the term and submit a Progress Review form.

If a Participant does not submit Progress Review forms, the Certificate Participant will be contacted by the CPTCP team to confirm intentions of their continued learning and assessment within the Certificate program. More information is available in the Section on [Progress Reviews](#).

Maximum time to complete the Certificate

Participants must complete all core and elective components of the Certificate within 48 calendar months.

A Participant who anticipates that they will not be able to complete requirements in the maximum time allowed, has any concerns about organising the learning and assessment activities or requires additional guidance to successfully complete activities within this time frame are advised to seek support from their Certificate Supervisor or the CPTCP team.

Anticipated Completion Date

Participants must set an anticipated completion date when they commence the Certificate. An anticipated completion date is used as a guide for Participants and their Supervisors on the most suitable timing for completion of the various learning and assessment activities. The anticipated completion date can be amended if needed.

The anticipated completion date will be discussed in the initial supervisor meeting. Participants will be able to select their anticipated completion date in the initial supervisor meeting form. Once confirmed, this will be automatically updated in the Participants profile information on the Participant Dashboard.

The anticipated completion date can be adjusted e.g. in the event a Participant undertakes a period of interruption.

Recommended Completion Time for Requirements

Participants are advised to refer to the *Recommended Completion Time for Requirements* below for guidance on suggested timelines for completion of learning and assessment activities over 12 months.

Requirements	Recommended Timing of Completion over 12 months											
	Term 1	Term 2	Term 3	Term 4								
Initial Meeting												
Observations												
Online Modules												
Reflections												
Peer Groups												
Elective Learning Plan												
Core CSA 1												
Core CSA 2												
Core CSA 3												

Core CSA 4													
Narrative Review													
Elective CSA													
Oral Presentation													

It has been estimated that a Participant could complete the Certificate if allocating approximately 3-4 hours per week across the year (allowing for a break from learning in order to take annual and sick leave).

Period of interruption

If a Participant will be on leave for three months or more, they must submit a notice of a period of interruption, so the Participants Certificate Supervisor is aware that there will be a pause to the completion of learning and assessment.

During a period of interruption, a Participant will be able to view their Portfolio and access administrative forms but unable to create any new learning or assessment activities or submit any components of the Certificate for review by their Certificate or Elective Supervisor. A Participant can complete the content (and inherent assessment) of Online Learning Modules. For more information refer to the section on [Online Learning Modules](#).

Submitting a notice of a period of interruption or changing the interruption timeframe

Participants will be required to complete the Request for Period of Interruption form located in the Admin Forms tab on the Participants Dashboard.

Notice should be submitted one month prior to the start date of the period of interruption so that Certificate and Elective Supervisors and Certificate Reviewers can be made aware of the intended period of interruption of a Participant.

If the period of interruption has to be extended, a Participant must amend their notice via their Certificate Portfolio one month prior to the end of their current period of interruption.

A Participants enrolment continues during a period of interruption, though a period of interruption does not count toward a Participants minimum time in the Certificate.

4. CORE LEARNING ACTIVITIES

The combination of learning activities within the Certificate is designed to assist Participants to acquire and apply the knowledge as defined by the Curriculum Learning Outcomes, prepare for summative assessments and progress toward the required competence standard of the Certificate.

Regular engagement in learning activities is recommended during the Certificate so that any concerns about a Participants ability to achieve the competence required, can be discussed in the three-monthly Progress Review meetings with their Certificate Supervisor.

Initial Meeting

Participants must organise an initial meeting with their Certificate Supervisor, ideally within four to six weeks of their commencement date. Prior to the meeting, Participants will complete the Initial Meeting form and submit it to their Supervisor, via the Portfolio.

The form requests Participants to share:

- why they enrolled in the Certificate
- a summary of their experience assisting patients with their mental health
- areas of psychiatry they have explored through other learning
- clinical skills they would like to develop during the Certificate
- curriculum areas of interest
- how they intend to engage in learning activities during the Certificate and any foreseeable challenges
- anticipated completion date
- potential ideas for the elective special interest area.

The initial meeting can be scheduled by clicking the 'Learning Activities' tab on the Participants homepage, then clicking the 'Initial Supervisor Meeting' tab.

Participants must select the 'Initiate Supervisor Meeting' and complete the associated form and submit.

The Participants Supervisor will be notified of the submission of the form and will review the Participants responses. The Participant is responsible for making contact with the Supervisor to arrange the initial meeting.

Online Learning Modules

Online Learning Modules are a learning resource and Participants are expected to apply knowledge derived from this resource when writing reflections, participating in Peer Group Discussion Meetings and when completing SFE's.

There are ten Online Learning Modules for Participants to complete via the Certificate Portfolio:

1. Foundations of Clinical Psychiatry: Concepts to Set the Scene
2. Psychiatric Assessment: Exploring Patients' Presenting Concerns

Patient Presentations:

3. Stress, Avoidance and Anxiety: High Prevalence Conditions
4. Addiction: Alcohol and Other Substance Use Disorders
5. Highs and Lows: The Spectrum of Mood Disorders
6. Deliberate Self-Harm, Suicide and Risk Mitigation
7. Disordered Thought and Perception: Identifying and Managing Psychosis
8. Forgetfulness, Confusion and Aging: Differentiating the Causes of Cognitive Impairment
9. Neurodevelopmental Concerns of Children and Adults
10. Confronting Disordered Eating

Participants should prioritise the completion of the first two online modules on Foundation Knowledge and then Assessment. It is then recommended that Participants complete the modules in the order as they appear in the menu (and as above) to optimise learning (the formative assessment activities within each module build from one module to the next). Whilst recommended for Participants to complete the modules in the order above, Participants may complete the patient presentation modules in any order.

Module content

Participants read on-screen content and downloadable articles, explore links to external websites and progress through by completing online formative assessment activities.

The formative assessment activities throughout the modules are designed to reinforce key messages and facilitate deep learning by prompting Participants to apply knowledge learned.

A final screen will indicate the end of the module has been reached. Subsequently, the Participants Portfolio will be automatically updated to track Participants progress throughout the modules. This will be reflected on the home screen of the Participants Dashboard and in more detail on the Online Module page, located under the Learning Activities tab.

Applied Learning

Throughout the module, icons indicate when the Participant must respond using the *Applied Learning* template within the Portfolio.

After reviewing a Participants responses on the *Applied Learning* template and any supporting documents, the Supervisor will provide feedback and/or confirm active engagement by the Participant. This may occur at any time, including at the time of a Progress Review.

Patient Consultation Observations

During the Certificate, Participants are encouraged to observe different psychiatrists conducting patient consultations, including a range of patient presentations and a mix of initial assessments and follow up appointments, relevant to their area of practice.

During the three-monthly Progress Review meeting, the Certificate Supervisor may discuss the Participants experience of observations within the previous term and may suggest additional observations relevant to a Participants learning needs.

Practice Logbook

Participants are encouraged to enter their experiences consulting with patients who present for assessment or support and care in relation to their mental health. A minimum of 40 unique entries must be logged during the Certificate program.

Each entry includes the following fields:

- Patient profile
- Nature of presentation
- Differential diagnoses (Refer to Appendix One, [Curriculum Learning Outcomes](#))
- Summary of care provided
- Key learning points

The summary table in the portfolio allows Participants to easily identify which entries have been discussed at a Peer Group Discussion meeting or have a more detailed reflection component.

During the three-monthly Progress Review meeting, the Certificate Supervisor may discuss entries in the Practice Logbook from the previous term with a Participant.

Reflections

Participants should select a variety of patient presentations, relevant to their area of practice in which to reflect upon, to maximise their learning. Reflections are an extension of selected entries in the Participants Practice Logbook. A minimum of eight reflections must be submitted for review by the Certificate Supervisor, though Participants are encouraged to complete more to create a resource to refer back to.

Reflections include (approx. 500-800 words):

- Synopsis of salient history, including presenting complaint, family, background and past history
- Concise formulation
- Discussion of differential diagnoses
- Initial mental health care plan
- Reference to any engagement with family and/or social network
- Details of collaboration and communication with other health professionals or support services
- Notes on clinical progress of the patient
- Reflections/learnings from the experience.

The Certificate Supervisor will review each reflection, provide feedback and/or confirm completion. This may occur at any time, including during the three-monthly Progress Review meeting.

Peer Group Discussion Meetings

Peer Group Discussion Meetings provide an opportunity for Participants to share their experiences, obtain input from the psychiatrist facilitator and their peers and learn from the discussion of how their peers have approached the assessment or support of patients living with mental health conditions. Participants must participate in a minimum of 12 hours of Peer Group Discussion.

The Peer Group Discussions can be accessed via the Learning Activities tab on the Participants Dashboard:

- The facilitator posts a timeslot and Participants can register to join the session
- The comments field may provide more details about the group or area of discussion
- The Participant will be able to view confirmed Peer Group Discussion meetings by selecting 'view my meetings' on the page

Peer Group Discussion Meetings generally run for 60-90 minutes:

- 5 minutes to get started, determine order etc
- Four Certificate Participants present a case, max 5-10 mins, then 10-15 minutes for discussion (20 minutes each in total)
- 5 minutes to wrap up.

While it is intended that all Peer Group Discussion Meetings will run as scheduled, sometimes Participants may need to cancel their involvement. Meetings can only go ahead if there are a minimum of two Participants and the Facilitator. If session times need to change or are cancelled, please indicate your availability for another meeting.

5. ELECTIVE LEARNING ACTIVITIES

Participants should turn their focus to elective learning activities after they have commenced with the Core component of the Certificate and feel confident with the assessing patients with mental health conditions and developing formulations.

The first step in getting started with the elective component of the Certificate is the selection of an elective topic and identification of an Elective Supervisor.

Elective Learning Plan

Once the elective topic has been determined, the next step is the development of an Elective Learning Plan.

Firstly, the elective topic needs to be narrowed to a defined competency that can be achieved within the Certificate program. The following are examples:

Julie's plan will focus on diagnosing attention deficit hyperactivity disorder in children, pharmacotherapy and assisting patients and their families to manage behavioural symptoms.

Marli will be improving her skills in assessing Aboriginal and Torres Strait Islander patients presenting with symptoms of major depressive disorder and assisting them with mood regulation.

Greg's elective will be assessing, and initially managing, deliberate self-harm in the emergency department with a focus on improving his department's approach to Comprehensive Patient Assessment (CPA's).

Participants download the Elective Learning Plan template and articulate their special interest area competency together with more specific goals, learning activities and resources that will help them, and the SFE's that will demonstrate their goals have been attained. Generally, one of each SFE tool should be included, however there is some flexibility. If an alternate approach is required to demonstrate the articulated competency, then a rationale should also be provided.

After preparing an Elective Learning Plan, it must be uploaded to the Participants Portfolio and submitted to the Elective Supervisor for them to provide feedback and/or confirmation.

If the Elective Supervisor determines that the Elective Learning Plan requires further work, the Participant will receive a notification via the Dashboard that the Elective Learning Plan has been returned. This will appear with a 'returned' status. The Participant must amend and re-submit for approval by the Elective Supervisor.

Once the Elective Learning Plan has been reviewed and confirmed by the relevant Supervisor in the Certificate Portfolio, the CPTCP team will notify the Committee that the plan is ready for review.

The Committee, or delegated representative(s), will review the Participants' Elective Learning Plans at regular intervals, generally soon after scheduled progress review meetings. Participants are advised to check submission due dates for Committee approval on the College [website](#).

Participants should be mindful of these dates so that they can request Supervisor feedback prior and confirmation, to reduce the possibility of a delay in approval.

Participants will be advised that their plan has been approved by the Committee, or receive feedback on any amendments required, via the Certificate Portfolio.

Narrative Review

The narrative review is an evidence-based summary of the special interest area, which aligns to the Participants approved Elective Learning Plan.

Writing a narrative review on the Participants special interest area provides an opportunity for Participants to:

- Research the literature on an area that will be most relevant to their everyday practice
- Consider aspects of their special interest that they may need more help in understanding, and to prompt the Participant to consider points to discuss with their Elective Supervisor
- Develop a good knowledge base on assessment and interventions prior to engaging in SFE's for their Elective CSA
- Assist in preparing for the Oral Presentation.

The review should include an introduction, which defines the scope and purpose of the review, and a description of sources of information used and how they were integrated, analysed and

synthesised. The review should be organised in logical sections with relevant subheadings with clear recommendations and references to support key statements. If no suggestion or recommendation can be made on a particular subject due to lack of evidence, that should be clearly stated. Limitations on the evidence included in the review may be added. A conclusion of a few sentences should summarise findings.

The review should be no more than 2000 words, excluding references.

After preparing the narrative review, it must be uploaded to the Participants Portfolio and submitted to the Elective Supervisor for feedback and/or confirmation.

6. STRUCTURED FEEDBACK EXERCISES (SFEs)

SFEs are learning activities that guide Participants' clinical skills development through the provision of timely, constructive and specific feedback. As such, there is no pass or fail for individual exercises.

The purpose is to promote learning for Participants within an authentic workplace context. The feedback provided through each SFE indicates how a Participant is progressing and helps to plan future learning, therefore SFEs are most effective when they are undertaken to identify gaps in learning and skills.

SFEs completed early in the Certificate or when applying new skills may differ from those completed later, demonstrating a Participants progress over time.

SFEs should be completed regularly and feedback from the previous exercises applied to subsequent experiences. A minimum of one SFE is required to submit a Progress Review form (and accrue three-months to a Participants Certificate Record).

Getting started

SFE's can be initiated through the Learning Activities tab on the Participants Dashboard.

Participants initiate an SFE via the button on the right-hand side of the screen. Participants must then select the type of SFE (i.e., CPA's, CPR, OCPD, CbD). Each SFE can contribute to only one Core or Elective CSA and must be allocated or 'tagged' to that CSA to be considered as evidence toward demonstrating competence.

Once selected, Participants are required to complete the form. Once submitted, the Participants SFE is automatically sent to the Certificate Reviewer.

The Certificate Reviewer will return any feedback via the Portfolio. Participants will receive a notification via their homepage of the outcome of their SFE review. The status of all SFE's logged can be seen in the SFE page.

Once a Participants has submitted the adequate number of SFEs the Progress Review form can be initiated.

Selecting Certificate Reviewers

Participants can nominate a psychiatrist who works with them, or who they have worked with previously, to become a Certificate Reviewer. Ideally, the Certificate Reviewer works in the same State or Territory as the applicant as they will be familiar with the health-related legislation of that jurisdiction.

If a Participant knows of a psychiatrist who may be willing to become a Certificate Reviewer, please contact the CPTCP team to receive further information.

If a Participant is unable to obtain Certificate Reviewers, the CPTCP Team will be able to provide details of psychiatrists willing to assist from within their State or Territory.

Certificate Reviewers for the Elective Special Interest Area

The process for Participants to approach a Certificate Reviewer for the Elective Special Interest areas mirrors that for a Certificate reviewer.

Patient involvement

Ideally, patients selected for exercises should contribute new learning. The Participants Portfolio should demonstrate experience with patients who present with different mental health conditions and allow the Participant to apply their developing skills to a broad range of patients they would usually see in their practice.

For SFEs that require direct observation of a patient consultation, the patient may be selected by the Participant or, in health services within which both the Participant and a Certificate Supervisor or Certificate Reviewer work, a patient could be suggested by the Certificate Supervisor or Certificate Reviewer.

Conduct of SFEs

SFEs can be conducted by the Certificate Reviewer observing consultations with patients in-person or via video conference. Where possible, they should be conducted in an appropriate office or space that lends itself to privacy.

The RANZCP does not provide a video conference facility for the conducting of SFEs. Preferably, arrangements are made by the Participant, and they must ensure that the Certificate Reviewer has the relevant computer equipment and software in advance. Ideally, audio and video are checked prior to observing a patient consultation for the first time.

SFEs are formatively assessed on a 3-level spectrum of performance. The Certificate Reviewer indicates the descriptor that best describes the Participants abilities and should make their judgements only on those competencies and behaviours observed during the SFE. The Certificate Reviewer may add comments after each item to clarify if the Participant has demonstrated skills across two different levels.

Please note: not all assessment criteria on the form are required to be rated during each SFE. Not applicable criteria are rated with the 'N/A' option.

Certificate Reviewers use the overall rating scale toward the end of the form to indicate the Participants performance and the likely input that the Participant needed to provide quality mental health care. The standards against which performance is measured are expected to be met on the completion of the Certificate, therefore, SFEs undertaken by Participants near the beginning and/or middle of the Certificate may include ratings that indicate a Participant requires prompting or feedback to competently undertake the clinical activity.

The feedback session occurs immediately after the discussion, for approximately 10-15 minutes. The Certificate Reviewer may refer to specific items on the form and highlight behaviours that the Participant could focus on to progress to the next level.

General feedback is then included, this should be constructive and address:

- aspects that were done well
- suggestions for improvement
- agreed actions and goals.

Narrative comments, which narrow the focus on what the Participant should do to address identified gaps in observed skills, are most important.

The Certificate Reviewer will provide any necessary feedback to the Participant via the form. The Certificate Reviewer will submit the feedback, which the Participant will be notified of via an alert on the Dashboard.

The Participant must acknowledge the feedback from the Certificate Reviewer on their form. Once acknowledged by the Participant the SFE will be marked as complete.

SFEs as part of the Participants Portfolio

SFEs are contained within the Participants Portfolio. Completion informs a Certificate Supervisor's judgement as to whether a Participant is progressing with and/or has achieved competence in relation to the four Core CSA's, or Elective CSA.

A minimum number of completed SFEs, as outlined within [section 12](#), are necessary to contribute to the evidence base for each Core and Elective CSA, though additional SFEs may be beneficial to Participants who may need or would like further feedback.

Comprehensive Patient Assessment (CPA) SFE

A CPA consists of a Certificate Reviewer observing a Participant during an initial consultation with a patient.

The patient, who has agreed to participate, must be a patient presenting with a new mental health condition(s).

The aim of the CPA is to enable Certificate Reviewers to provide structured feedback on the following:

- Rapport and communication skills
- History of the presenting problem
- Background psychiatric history
- Risk and functional assessment
- Mental state examination
- Formulation.

How to undertake a CPA

The Participant is responsible for planning when a CPA will occur in consultation with the selected Certificate Reviewer.

The Participant makes arrangements with a Certificate Reviewer to carry out a CPA with an appropriate patient and organises all administration required (i.e. explanation to the patient about the exercise, patient consent for the Certificate Reviewer to be in the consultation, ensuring the Certificate Reviewer has access to the relevant CPA form).

The Certificate Reviewer observes the Participant during a consultation with a patient.

The Certificate Reviewer should not participate in the consultation unless intervention is required for the patient's safety.

This consultation should typically take 15–30 minutes. The total time required for the CPA and feedback session will usually be approximately 45 minutes.

Care Plan Review (CPR) SFE

A CPR consists of the Participants presentation of the diagnostic assessment (including the formulation) and their corresponding care plan to the Certificate Reviewer.

The CPR will include clarification questions from the Certificate Reviewer to refine the Participants clinical reasoning abilities.

The patient, for whom the formulation and draft mental health care plan has been prepared for, should be a patient who presented with a new mental health condition(s).

The aim of the CPR is to enable Certificate Reviewers to provide structured feedback on the following:

- Formulation
- Diagnosis
- Pharmacological intervention, if appropriate
- Psychological care plan
- Social interventions and support services
- Collaboration with colleagues.

The use of the CPR facilitates the formative assessment of the Participants ability to synthesise information (in the form of a diagnostic statement, formulation, and predicted prognosis) and formulate a mental health plan based on the obtained information, prior to discussing the plan with patients, family and/or carers and implementing the plan.

How to undertake a CPR

The Certificate Participant is responsible for planning when a CPR will occur in consultation with the selected Certificate Reviewer.

At least one CPR must be on the same patient with whom a CPA was conducted.

The Participant selects a patient that they have assessed and provides the prepared formulation and draft mental health care plan to the Certificate Reviewer for discussion. If the Certificate Reviewer does not work for the same health service, only de-identified files associated with the patient(s) must be provided and consent for sharing their de-identified information for education purposes must be obtained from the patient. The documents should be provided to the Certificate Reviewer approximately a week prior to the scheduled CPR meeting.

The Participant discusses the patient's assessment, the formulation and the proposed mental health care plan with the Certificate Reviewer.

The Certificate Reviewer helps to identify any gaps and the Participant modifies their plan, with the Certificate Reviewer, if required.

This discussion should typically take 30 minutes. The total time required for the CPR and feedback session will usually be approximately 40-45 minutes.

Observed Care Plan Discussion (OCPD) SFE

The OCPD consists of a Certificate Reviewer observing a Participant during a consultation with a real patient in which a proposed mental health care plan is discussed and providing feedback to the Participant about their performance.

The aim of the OCPD is to enable Certificate Reviewers to provide structured feedback on the following:

- Discussion of mental health problems with the patient
- Therapeutic alliance developed
- Pharmacotherapy
- Psychotherapy
- Consultation close and follow up.

How to undertake an OCPD

The Participant is responsible for planning when an OCPD will occur in consultation with the selected Certificate Reviewer.

The Participant makes arrangements with a Certificate Reviewer to carry out a OCPD with an appropriate patient and organises all administration required (i.e. explanation to the patient about the exercise, patient consent for the Certificate Reviewer to be in the consultation, briefing the Certificate Reviewer or providing them with the formulation and proposed mental health care plan in advance of the consultation, ensuring the Certificate Reviewer has access to the form).

The Certificate Reviewer observes the Participant during a consultation with a patient.

The Certificate Reviewer should not participate in the consultation unless intervention is required for the patient's safety.

This consultation should typically take 30-45 minutes. The total time required for the OCPD and feedback session will usually be approximately 45 minutes – 1 hour (the latter if a brief psychotherapy intervention is included in the consult).

Case based Discussion (CbD) SFE

A CbD is a discussion on case notes and other relevant written correspondence (e.g. referral letters) for a retrospective case in the workplace. It assesses a Participants clinical reasoning and decision making and their ability to document the integration of medical knowledge.

The aim of the CbD is to enable supervisors to provide structured feedback across the following:

- Presentation of case formulation and diagnosis
- Biopsychosocial care plan
- Patient advocacy and collaboration
- Reflective practice
- Written communication.

The Participant should select at least two cases for possible discussion in the CbD, of which the supervisor will select one case to discuss. The cases should be those a Participant has managed largely independently, for which some of the outcomes are known.

The Participant should have had the opportunity to manage a number of patients prior to arranging a CbD. It is suggested that the Participant complete other SFEs prior to completing a CbD as other SFE tools focus separately on some of the skills incorporated in the CbD.

How to undertake a CbD

The Certificate Participant is responsible for planning a meeting for a CbD to occur in consultation with the selected Certificate Reviewer.

The Participant selects two patients in which they have had direct clinical responsibility for their care and provides the medical record/notes for the two patients for possible discussion to the Certificate Reviewer. If the Certificate Reviewer does not work for the same health service, only de-identified files associated with the patients must be provided and consent for sharing the information must be obtained from the patients. The files should be provided to the Certificate Reviewer approximately a week prior to the scheduled CbD meeting to allow time for them to read.

To optimise the value of the CbD, the two cases should incorporate most of the items on the form.

The Certificate Reviewer will choose one of the cases for the Participant to discuss in detail.

The Participant discusses the selected case with the Certificate Reviewer.

When required the Certificate Reviewer prompts the Participant on further discussion points (see guidance for discussion below).

This discussion should typically take 30-35 minutes. The total time required for the CbD and feedback session will usually be approximately 45 minutes.

Guidance for discussion

This guide is intended to provide direction for the Certificate Reviewer in eliciting further information from a Participant to support the CbD. It may also guide the Participant to understand important focal points for the discussion regarding their case.

The exercise should commence from the Participants entry in the case notes. There is no other set structure for the discussion, but the following prompts may be used as a guide. Discussion is not limited to these questions and others may be used to prompt a focused discussion about the case at the supervisor's discretion.

General

'Please tell me about your experience with this patient.'

'Please tell me about your approach to the patient's presenting problem.'

'What were the key points about this patient?'

Assessment/diagnosis

'Tell me about your formulation for this patient and your understanding of their problem'

'Did you diagnose the patient with a mental health condition?'

'What specific features led you to this conclusion?'

'What other conditions have you considered/ruled out?'

Investigation/referrals

'What specifically led you to choose these investigations?'

'Were there any other investigations or referrals that you considered?'

'I see that you have written down a number of different investigations – how did you think the results would help you work out what was going on and what you needed to do?'

Patient advocacy and collaboration

'Tell me about how you engaged the patient's family and/or carers when developing the care plan'

'Are there any other health professionals you considered liaising with?'

'What alternate options or strategies would you have considered if patient engagement was lacking?'

Management

'What specific features led you to the management/therapy that you suggested for the patient?'

'Have you discussed any lifestyle interventions, e.g. alcohol use, diet, exercise, sleep etc.?''

'Were there any other treatments that you thought about or ruled out?'

'I see that you have decided to treat the patient with ... – talk me through how you decided to prescribe that regimen and what alternatives you considered?'

'What was going through your mind when you prepared that care plan? Just talk me through your thought process.'

'You have referred to treatment guidelines to help with ... – tell me a bit about how you used the treatment guidelines to help plan management and whether there were any aspects that didn't fit in this case?'

Follow-up/care plan

'What decisions were made about follow-up (this entry)?'

'What were the factors that influenced this decision?'

'You have written down that you were going to ask Dr ... for their advice – what specifically did you want to discuss with them, why was it important in this case, how did their advice help and what did you learn from it?'

Monitoring chronic illness

'In your care of X, have you discussed the monitoring of their progress?'

'Do you think that there are some monitoring strategies that would be appropriate?'

Individual patient factors concerning context of care

'Was there anything particular/special about this patient that influenced your management decisions?' (e.g., demography, psychosocial issues, past history, current medications and treatment?)

'On reflection, is there anything about this patient that you wish you knew more about?'

Care setting

'Is there anything about the setting in which you saw the patient (e.g. home, ward, emergency department) that influenced your management?'

'In considering this case, what changes would improve your ability to deliver care to this patient?'

What if scenarios

'How might you change your approach to the assessment or care plan for this patient if they <insert>'

'What additional aspects would you have considered if the patient <insert>'

'How would you have managed the situation if the patient <insert alternate factor that may have increased the risk that they would harm themselves or another person>?'

'Talk me through how you balanced the autonomy of the patient and safety.'

Consider variables such as if the patient:

- was older/younger
- identified as an Aboriginal and/or Torres Strait Islander
- was from a different cultural background
- had a specific medical comorbidity and/or is taking a specific medication for this condition
- also presented with <insert another mental health symptom or condition>
- had already been prescribed <insert drug> (polypharmacy)
- did not respond to <insert treatment>'

7. CORE CLINICAL SKILLS ACTIVITIES (CSA)

Each Core CSA prescribed for the Certificate is:

- a general transferable skill and/or technique which may be applied to mental health presentations that each medical practitioner encounters in their area of practice.
- mapped to Certificate Key Competencies and is assessed at this standard.

Core CSA's formalise the process by which Certificate Reviewers capture and record their judgements and feedback about a Participants performance and competence throughout the program and are a substantial part of a Participants Portfolio.

Participants must complete four Core CSA's, including:

1. Assessing patients presenting with new mental health conditions
2. Assessing and managing risk in relation to patients who may harm themselves or others
3. Use of psychosocial interventions to support patients in relation to their mental health
4. Initiating pharmacotherapy for patients diagnosed with mental health conditions.

Completion of each Core CSA will be confirmed by the Certificate Supervisor when:

- the Participant can perform the activity described at the required standard
- the Supervisor is confident that the Participant knows when to seek assistance or will refer the patient to a colleague and do so in a timely manner.

Progress with CSA's should be discussed with the Certificate Supervisor at each 3-month Progress Review meeting.

Expectations for each Core CSA

CSA 1	<i>Assessing patients presenting with new mental health conditions</i>
Description	The Certificate Participant can establish rapport with patients and conduct a comprehensive, organised psychiatric assessment of patients in order to develop a formulation and differential diagnosis, reflecting an understanding of common mental health conditions and comorbidities.
Key features	This activity focuses on establishing a therapeutic relationship and conducting a clinical assessment interview, implementing the principles of a recovery-oriented approach and trauma-informed mental health care. SFE's involving patients who are experiencing a new episode of an illness, a new presenting complaint or a relapse of a condition which was in remission may be included as evidence.
Key Competencies	The Certificate Participant can: <ul style="list-style-type: none"> • Apply knowledge of biological, psychological and social sciences and principles of psychiatry assessment techniques to patient care • Conduct a comprehensive psychiatric interview • Perform and report a comprehensive mental state examination • Integrate available information about a patient and their context to develop a formulation • Recognise the interplay between the patient's physical health needs with their mental health needs • Recognise and incorporate the needs of culturally and linguistically diverse populations, including the use of interpreters and cultural liaison officers

	<ul style="list-style-type: none"> • Use interpersonal skills to develop therapeutic relationships and to provide care
SFE's	<p>Minimum evidence:</p> <ul style="list-style-type: none"> • 3 x CPA's completed with patients presenting with different mental health symptoms/clinical scenarios. <p><i>SFE's must be completed by a minimum of two different Certificate Reviewers.</i></p>

CSA 2	<i>Assessing and managing risk in relation to patients who may harm themselves or others</i>
Description	The Certificate Participant can undertake a systematic assessment of the risk of harm to self and others posed by a patient. They can develop a risk formulation for suicidal and aggressive patients and formulate and communicate an appropriate safety plan to address such risks.
Key features	<p>This CSA focuses on undertaking a thorough risk assessment and the development of a crisis and safety management plan in collaboration with the multidisciplinary team, patients and their families, and supporting the implementation of strategies to manage patient risk to self and others.</p> <p>This CSA includes knowledge of the principles of risk assessment and management, the various strategies that may be implemented to manage patient risk to self and others, and the practical application of mental health legislation.</p> <p>Participants should also be able to articulate how they would intervene to minimise risk and optimise safety in a range of posed scenarios.</p>
Key Competencies	<p>The Certificate Participant can:</p> <ul style="list-style-type: none"> • Integrate available information about a patient and their context to develop a formulation and differential diagnosis according to ICD or DSM <ul style="list-style-type: none"> ○ Generate a risk formulation for a suicidal patient or an aggressive patient • Assess and manage psychiatric emergencies, with due regard for safety and risk <ul style="list-style-type: none"> ○ Intervene to minimise risk and optimise safety, which may include: <ul style="list-style-type: none"> ▪ crisis intervention ▪ de-escalation techniques ▪ adherence to principles of least restrictive care, using appropriate restrictive practices only as a last resort, and according to local guidelines • Develop and implement an evidence based biopsychosocial and culturally informed mental health care plan in collaboration with patients <ul style="list-style-type: none"> ○ Develop a crisis and safety plan in collaboration with the interdisciplinary team, patients, their families and carers for a suicidal patient and an aggressive patient

	<ul style="list-style-type: none"> ○ Communicate the risk and safety plan with the patient, family and carers and other services, as appropriate. ● Apply mental health and related legislation in patient care ● Work collaboratively with general practitioners, psychiatrists and community and tertiary health services in team care arrangements to improve patient outcomes <ul style="list-style-type: none"> ○ Be aware of personal capacity to manage uncertainty and take clinically informed risks when this is in the interest of the patients' overall wellbeing, balancing autonomy and safety ● Acknowledge personal limitations and recognise when to engage the help of a team, or refer
SFE's	<p>Minimum evidence:</p> <ul style="list-style-type: none"> ● 1 x CPR ● 1 x OCPD ● 1 x CbD <p><i>Completed SFEs should include patients who have:</i></p> <ul style="list-style-type: none"> ● <i>a history of non-suicidal self-harm, suicidal ideation and/or have engaged in recent suicidal behaviour</i> ● <i>a history of violent behaviour and/or current risk of aggression</i> <p><i>SFE's must be completed by a minimum of two different Certificate Reviewers.</i></p>

CSA 3	<i>Use of psychosocial interventions to support patients in relation to their mental health</i>
Prerequisite CSA	CSA 1 must be confirmed prior to requesting review of completion of this activity.
Description	The Certificate Participant can establish goals of care with patients, families and carers and develop evidence-based biopsychosocial mental health care plans in collaboration with them. They can select appropriate psychosocial interventions for patients at different life stages.
Key features	<p>This CSA focuses on integrating information obtained from a psychiatric interview and collateral sources to develop formulations and associated evidence-based care plans, which include psychosocial interventions.</p> <p>This CSA includes:</p> <ul style="list-style-type: none"> ● knowledge of common conditions and comorbidities ● variables that impact on mental health ● the principles, indications and use of evidence-based psychological interventions ● the range of mental health support services available to patients. <p>Certificate Participants should also be able to reflect on the outcomes for patients in response to the intervention(s) and consider the other therapeutic options that may have been beneficial.</p>
Key Competencies	The Certificate Participant can:

	<ul style="list-style-type: none"> • Develop and implement an evidence based biopsychosocial and culturally informed mental health care plan in collaboration with patients • Incorporate the principles of trauma informed care, recovery and self determination to facilitate person centred care and supported decision making • Demonstrate skills in psychological and sociocultural interventions to assist patients with their recovery • Use effective communication and counselling skills with patients, their families and carers • Work effectively with a multidisciplinary mental health team, including those with lived experience and peer workers, demonstrating the awareness of roles and contribution of various members • Promote ways for patients' families to support family members toward recovery and independence • Recognise and address the impact stigma of mental illness has upon patients, families and carers • Appreciate the role of cultural beliefs in recovery and incorporate this into care for patients, families and carers • Facilitate access to available mental health support services that would be most beneficial to individual patients, their families and carers • Incorporate evidence into decision making • Identify standards within the RANZCP Code of Ethics that are unique to psychiatry and apply them to practice • Demonstrate reflective practice and the ability to use feedback constructively when learning
SFE	<p>Minimum evidence:</p> <ul style="list-style-type: none"> • 1 x CPR • 1 x OCPD • 1 x CbD <p><i>Completed SFE's should include patients who have different mental health symptoms/conditions/clinical scenarios. SFE'S must be completed by a minimum of two different Certificate Reviewers.</i></p>

CSA 4	<i>Initiating pharmacotherapy for patients diagnosed with mental health conditions</i>
Prerequisite CSA	CSA 1 must be confirmed prior to requesting review of completion of this activity.
Description	The Certificate Participant can identify patients who may benefit from pharmacotherapy. They can safely prescribe pharmacological treatment, taking a patient's age, physical health, medical comorbidity and concurrent medications into account.
Key features	This CSA focuses on prescribing evidence-based pharmacological treatment to patients for whom pharmacotherapy is indicated, providing education to patients, families and carers about the psychiatric medication prescribed, and monitoring and evaluating the effect and impact on physical and mental health.

	<p>This CSA includes knowledge of common conditions and comorbidities, the principles and use of medication prescribed to treat mental health disorders, strategies to improve its effectiveness and how to manage more complex pharmacotherapeutic scenarios.</p> <p>Certificate Participants should also be able to reflect on the risks and benefits of pharmacotherapy for individual patients and recognise the value of incorporating psychosocial and lifestyle interventions to support patients living with a mental health condition.</p>
<p>Key Competencies</p>	<p>The Certificate Participant can:</p> <ul style="list-style-type: none"> • Apply knowledge of biological, psychological and social sciences and principles of psychiatry assessment techniques and interventions to patient care, including: <ul style="list-style-type: none"> ○ Principles, use, evidence-based indications, contraindications, side effects, toxicity and precautions of commonly used psychiatric medications ○ Management of complex pharmacotherapeutic scenarios including: <ul style="list-style-type: none"> ▪ polypharmacy ▪ treatment resistance ▪ psychiatric comorbidities ▪ physical health comorbidities ▪ side effect sensitivity ▪ prescribing for specific populations, e.g. children, pregnant and breastfeeding women, older people. • Integrate available information about a patient and their context to develop a formulation and differential diagnosis according to ICD or DSM • Demonstrate skills in pharmacological interventions to assist patients with their recovery: <ul style="list-style-type: none"> ○ Safely prescribe pharmacological treatment ○ Provide education to patients, families, and their carers about psychiatric medication and the broader therapeutic context in which they are prescribed • Recognise the interplay between the patient's physical health needs with their mental health needs • Incorporate evidence into decision making • Work collaboratively with general practitioners, psychiatrists and community and tertiary health services in team care arrangements to improve patient outcomes • Acknowledge personal limitations in relation to psychiatric care of patients and recognise when to engage the help of a team, or refer
<p>SFE</p>	<p>Minimum evidence:</p> <ul style="list-style-type: none"> • 1 x CPR • 1 x OCPD • 1 x CbD <p><i>Completed SFEs should include patients who have different mental health symptoms/conditions/scenarios.</i></p>

	<i>SFE's must be completed by a minimum of two different Certificate Reviewers.</i>
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Number of SFEs required for each Core CSA

As referred to in the expectations outlined above, the following table summarises the minimum number of SFE's for each Core CSA. Participants are encouraged to complete more activities than the minimum outlined, to obtain feedback on their skills.

Core CSA's	Minimum no. SFEs
CSA 1 - Assessing patients presenting with new mental health conditions	CPA x 3
CSA 2 - Assessing and managing risk in relation to patients who may harm themselves or others	CPR x 1 OCPD x 1 CbD x 1
CSA 3 - Use of psychosocial interventions to support patients in relation to their mental health	CPR x 1 OCPD x 1 CbD x 1
CSA 4 - Initiating pharmacotherapy for patients diagnosed with mental health conditions	CPR x 1 OCPD x 1 CbD x 1

Some Participants may require more SFE's to demonstrate competence. The Certificate Supervisor needs to be assured that competencies for that CSA have been met and may suggest that a Participant requires additional SFE's as evidence.

Requesting review of a Core CSA

Participants can only request a review of a Core CSA if:

- the three stipulated SFEs have been allocated to a Core CSA
- multiple Certificate Reviewers have been involved in the stipulated SFEs and
- SFEs indicate that the Participant requires minimal to no supervision or could supervise others in the task.

Further, confirmation of CSA 1 by the Certificate Supervisor is a prerequisite for requesting review of CSA 3 and CSA 4.

The Participant clicks submit of the Core CSA which initiates a review request to the Supervisor. Once the Participant submits the Core CSA, the Supervisor will be alerted to the review requested by the Participant via the Supervisor Dashboard.

8. ELECTIVE CLINICAL SKILL ACTIVITY (CSA)

The Elective CSA is similar to the Core CSA, in that the Participant must complete a variety of SFE's, which together demonstrate the Participants competence. The difference is that the approved Elective Learning Plan dictates the competence that must be achieved and the SFE's that must be allocated.

Number of SFEs required for the Elective CSA

Generally, it is expected that one of each SFE tool is included. Participants must allocate a minimum of 4 SFEs that indicate that the Participant requires minimal to no supervision or could supervise others in the task. The SFEs must suitably demonstrate the achievement of the competency articulated and the specific goals of the plan.

There is flexibility in the number and type of SFEs, though this should have been considered when developing the Elective Learning Plan.

Example:

Greg's elective special interest area is assessing patients who present to the emergency department after deliberate self-harm and providing initial care. His approved Elective Learning Plan includes predominantly CPAs, CPR's and CbD's. He may deliver a brief intervention, however, due to the difficulties in direct observation of him with patients at opportune times, this will be assessed by CbD rather than OCPD tools.

Requesting review of the Elective CSA

Participants can only request a review of their Elective CSA if:

- all Core CSA's have been confirmed by the Certificate Supervisor
- a minimum of four SFEs have been allocated to the Elective CSA
- the SFEs indicate that the Participant requires minimal to no supervision or could supervise others in the task.

The Participant submits the Elective CSA which initiates a review request to the Supervisor. Once the Participant submits the Elective CSA, the Supervisor will be alerted to the review requested by the Participant via their Supervisor Dashboard.

9. PROGRESS REVIEWS

Toward the end of each three-month term, Participants are encouraged to engage with their Certificate Supervisor for a Progress Review.

Refer to the RANZCP website for term dates. A Progress Review can be initiated by the Participant in the Certificate Portfolio no more than 2 weeks prior, or 4 weeks after, the end of each 3-month term. Participants must have completed at least one SFE to initiate a Progress Review.

An email reminder will be sent to the Participant 2 weeks prior to the end of the term, and again 2 weeks after the term end date.

The Participant can access the Progress Review via the Progress Review tab in the Participant Dashboard. The first Progress Review can only be initiated after the initial meeting form has been submitted and confirmed.

Once the Participant submits the Progress Review, the Supervisor will be notified via an alert on the Dashboard.

After initiating the Progress Review, Participants should contact their Certificate Supervisor to determine a suitable time for a meeting (allow approximately 45 minutes).

Progress Review form and meeting

The Progress Review form includes the Participants start date, anticipated completion date and the most recent Progress Review submission. The form then includes a summary of all the activities the Participant has completed since the previous Progress Review form submission.

All the Core Learning Activities, Elective Learning Activities, SFE's (within CSA's) are listed. If no activities have been completed for a particular component (e.g. no Reflections) that component will remain collapsed.

Details of all the Learning Activities are provided to the Supervisor for their review. The Supervisor will review each Learning Activity and will provide feedback on the Progress Review form..

The following table provides suggestions of aspects to be considered and discussed during a Progress Review meeting.

<i>Core Learning Activities</i>	
<i>Online Learning Modules</i>	<p>How is the Participant progressing with the Online Learning Modules?</p> <p>Completion of the Foundations of Clinical Psychiatry and Psychiatric Assessment modules should be the priority.</p> <p>Talk through responses and any concerns in relation to the Psychiatric Assessment module as this knowledge will need to be applied in the SFE's and especially to demonstrate competence in the first Core CSA.</p> <p>Are there any questions on the content of modules that have been completed? Is there anything in particular the Participant needs help with?</p> <p>Is there any Applied Learning awaiting review. Note any aspects that require discussion.</p> <p>Completing specific modules aligned to a Participants interests may help them to determine an elective special interest area.</p>
<i>Observations</i>	<p>If the Participant has completed some observations, discuss.</p> <p>Have there been any concerns in relation to scheduling observations with psychiatrists? If so, refer to the CPTCP team.</p>
<i>Practice Logbook</i>	<p>Briefly discuss any entries from the previous term.</p> <p>Have the Participants experiences with patients raised any queries.</p>
<i>Reflections</i>	<p>Briefly discuss any entries from the previous term.</p> <p>Discuss the detail provided and further explore learning points, if relevant.</p>
<i>Peer Group Discussion Meetings</i>	<p>This is a prompt for the Participant to register for meetings, if required.</p> <p>Discuss learning value of those attended. If there are any issues with availability of meetings or relevance of case discussion, refer to the CPTCP team.</p>

SFE's	<p>How is the Participant progressing with SFE's? If none have been completed, discuss when the Participant could make a start. Discuss suitable patients. If it has been difficult to schedule direct observations of a patient consultation, consider organising a CPR.</p> <p>If some SFEs have been completed:</p> <ul style="list-style-type: none"> • Consider different types of SFEs completed (have all four tools been completed)? • Any difficulty with particular skills (assessment, developing care plans etc)? • Is the Participant applying their skills to a range of different patients and presentations? • Is the Participant actioning feedback from Certificate Reviewers in subsequent exercises? • Completion of consultation observations may be helpful if further learning is required • If there are any issues with scheduling SFEs with Certificate Reviewers, refer to the CPTCP team
Elective Learning Activities	
Elective Learning Plan	<p>If not completed, this is a prompt about finding a suitable topic for their elective and/or help narrow their focus to a specific interest area and competency.</p> <p>Refer to the Elective Learning Plan template and the example as a prompt on specific goals and suggest learning activities and resources.</p> <p>Remember review and confirmation of the plan by the Supervisor is required prior to approval from the Committee. Discuss any timeframes that need to be worked within.</p> <p>If the plan has been submitted, discuss feedback at the Progress Review meeting.</p>
Narrative Review and Preparation for Oral Presentation <i>(only appears if Elective learning Plan has been approved)</i>	<p>Engage with their Elective Supervisor about helpful resources or ask any questions about literature they intend to include. The task is designed to provide the Participant with knowledge to apply when completing SFE's relevant to the special interest area.</p> <p>The Participant should consider the literature included in their narrative review and how that relates to their experiences when completing any SFE's for their Elective CSA. This is the basis of their Oral Presentation and learning will be optimised if the Participant progresses with preparing their presentation as they progress with the Elective component of the Certificate.</p>
Assessments	
Core Clinical Skills Activities	<p>How is the Participant progressing with SFE's? If none have been completed, discuss when the Participant could make a start.</p>

	<p>Discuss suitable patients. If it has been difficult to schedule direct observations of a patient consultation, consider organising a CPR.</p> <p>If the Participant has completed some SFE's and allocated them to Core CSA's:</p> <ul style="list-style-type: none"> • Consider different types of SFE's completed (have all four tools been completed)? • Any difficulty with particular skills (assessment, developing care plans etc)? • Are skills being applied to a range of different patients and presentations? • Is feedback from Certificate Reviewers being actioned for subsequent exercises? • Completion of consultation observations may be helpful if further learning is required <p>If there are any issues with scheduling SFE's ideally, Participants should work towards completion of CSA 1 first (after completion of the Psychiatric Assessment Online Learning Module). Consider:</p> <ul style="list-style-type: none"> • Have the appropriate SFE's been allocated to the Clinical Skills Activities? • Of the SFE's allocated, has more than one Certificate Reviewer been engaged? • Is the Participant on track with the volume of SFE's and their level of competence to complete the Core CSA's before the anticipated completion date?
<p><i>Elective CSA</i></p>	<p>Participants are unable to request review until Core CSA's have been confirmed. Consider:</p> <ul style="list-style-type: none"> • Do the allocated appropriate SFEs match those documented in the approved Elective Learning Plan? • Of the SFEs allocated, has more than one Certificate Reviewer been engaged? If not, how could this be facilitated? • Any issues with the competence demonstrated and the rating on the SFEs for the elective? <p>Encourage Participants to consider the learning from these activities that they will share with peers during the Oral Presentation.</p>

Progress Review form submission

After indicating progress and providing comments on the various activities, the Certificate Supervisor provides an overall assessment of the Participants progress with the Certificate.

The Participant then completes the Progress Review form submission process by acknowledging feedback and discussion with the Certificate Supervisor.

When submitted by the Participant, three-months accrued training time is updated within the Participants Certificate Record.

Participants are encouraged to complete Progress Reviews with their Certificate Supervisor and submit the Progress Review forms regularly, beyond the requirement to accrue minimum time. A Participant will be sent correspondence noting any late Progress Review forms and reminding the Participant that continued non-submission by 30 business days from the date on which the correspondence is sent (generally 6 weeks after the end of a term) will result in non-submission of a Progress Review form on the Participants Certificate Record.

If a Participant does not submit Progress Review forms for two consecutive terms, or three non-consecutive terms, the Certificate Participant will be contacted by the CPTCP team to confirm intentions of their continued learning and assessment within the Certificate program. Refer to the [Certificate Policy](#) for more information.

Participants are able to provide confidential feedback on their experience within the Progress Review Form. Please see [Section 18](#).

Final Progress Review

When a Participant has completed all learning and assessment activities, and initiates a Progress Review, the Portfolio will indicate that this will be the Final Progress Review.

For the Final Progress Review, the Certificate Supervisor reviews all aspects of the Participants portfolio and upon submission declares that:

- a) the Participant has completed all the Core and Elective components of the Certificate to the expected standard
- b) the Participant has completed SFE's toward each of the four Core CSA's. Further, they have reviewed the SFE's completed and together they demonstrate that the Participant has achieved the relevant competencies
- c) the Participant has completed SFE's toward the Elective CSA's in accordance with the Participants approved elective learning plan and they have, or the Elective Supervisor has, reviewed the SFE's completed and together they demonstrate that the trainee has achieved the goals of their approved Elective Learning Plan
- d) the Participants Certificate Portfolio includes all the necessary evidence for review by the Committee.

10. ORAL PRESENTATION

The Oral Presentation consists of a 30-minute presentation to peers and two Certificate Assessors on the Participants elective special interest area. The structured presentation must be of 20 minutes duration, followed by 10 minutes of answering questions and engagement in discussion with peers and Assessors. Each Participant must be actively engaged in asking questions or contributing to the discussion relevant to the presentations of their peers within their session.

The Oral Presentation is a standardised summative assessment and as such, Participants must demonstrate the expected standard to successfully complete this activity. In addition, each Oral Presentation session is a learning opportunity for Participants involved.

Scheduling the Oral Presentation

Participants must have their Narrative Review and Elective CSA confirmed in their Portfolio to schedule their presentation.

The RANZCP website contains details of when Oral Presentations have been scheduled. Participants must advise of their availability for potential timeslots 6 weeks prior. If a Participant cancels the Oral Presentation after it has been scheduled and within 3 weeks of the presentation date, it will be recorded as an unsuccessful attempt.

Each presentation session will generally be of 2-hours duration and Participants must attend the entire session, not only the 30 minutes they are presenting. Participants will be advised of the order of presentations by the Lead Assessor at the start of their Oral Presentation session.

Staff will confirm the time slots with the Participants.

Preparing for the Oral Presentation

The presentation must align with the Participants approved Elective Learning Plan and include the following:

- A summary of the literature and/or clinical guidelines around the selected population and/or mental health condition. It is expected that Participants will draw on the research they completed for their Narrative Review for this component
- Participants experience(s) of working with patients from the identified population and/or patients presenting with a specific mental health condition(s) in the form of a brief report on one particular patient, or illustrative examples throughout the presentation. It is recommended that Participants should include patients that were the subject of their SFE's for this component, as they have discussed these experiences with their Elective Supervisor and received feedback on their competence
- Participants reflections on their learning during the Certificate and the sharing of key learning points which their peers would find valuable

Participants must upload their presentation via their Certificate Portfolio one week prior to their scheduled presentation. If a Participants presentation is not uploaded at least one week prior, the presentation may be cancelled and this will be considered to be an unsuccessful attempt.

Presentation day

It is the Participants responsibility to ensure they have a stable connection and audio connected. Participants are strongly advised to login 15 minutes prior to the start of the Oral Presentation to allow time for issues to be resolved.

If a Participant is late to the presentation session or does not attend at all, the presentation will be recorded as an unsuccessful attempt.

Expected standard, results and feedback

The Certificate Assessors will both use an Oral Presentation Feedback and Scoring Form to independently assess each Participant. In the instance that the Certificate Assessors disagree on the outcome, a third Assessor will be engaged to review the video recorded presentation and session and their assessment will determine whether or not the expected standard has been met.

Participants will be provided with the outcome of the Oral Presentation once all assessments have been completed.

Within the Participants Portfolio the Oral Presentation will be marked as Successful/Unsuccessful. Comments will be provided to assist the Participant in the event of an unsuccessful outcome.

11. CERTIFICATE PORTFOLIO REVIEW

Participants' Certificate Portfolios are reviewed by the Committee.

Requests for a Certificate Portfolio Review must be received no later than one month prior to a Committee meeting, or by the end of term.

Requesting a Certificate Portfolio Review

A Portfolio Review can be requested through the Portfolio using the Assessment tab, Portfolio Reviews can only be requested following the completion of the Final Progress Review and Certificate Supervisor approval.

Certificate Portfolio Review process

The Committee will review all requirements of the Core and Elective components and ensure they have been completed to the expected standard, and the Key Competencies achieved.

Expected standard, outcome and feedback

Participants will be advised in writing, of the outcome of the review.

If the Committee do not feel all requirements have been met additional learning and/or assessment activities may be required prior to re-submission.

12. RECOGNITION OF PRIOR LEARNING (RPL)

RPL will be considered for Participants who:

- 1) enrol in the Certificate for the first time, with previous study and experience
- 2) who re-enrol in the Certificate after a period of absence and decide to re-commence their learning

For Participants who enrol for the first time, RPL applications should be submitted up until 3 months after the Participant commenced the Certificate.

If a Participant wishes to apply for RPL they must have retained medical registration whilst completing the activity they have identified as being suitable for consideration.

For Participants re-entering the Certificate after a period of absence, only Certificate learning or assessment activities that have been submitted and confirmed in the Certificate Portfolio while enrolled in the Certificate will be considered for RPL.

Participants of the RANZCP Certificate

Participants may apply for RPL and credit for the Online Learning Modules and the narrative review. All other components must be completed during the Certificate.

ACRRM and RACGP Trainees and Fellows

The following table provides guidance on potential credits from recognition of prior learning for Australian College of Rural and Remote Medicine (ACRRM) Trainees or Fellows who have completed Advanced Specialised Training (AST) in Mental Health and Royal Australian College of General Practitioners (RACGP) Trainees or Fellows who have completed Additional Rural Skills Training (ARST) in Mental Health.

Core Learning Activities	
Online Learning Modules	Participants can apply for a credit for individual Online Learning Modules if they have completed equivalent formal education.
Observations	Participants can apply for a credit for observations but would be encouraged to complete them during the Certificate.
Practice Logbook	Participants can apply for credit for the Practice Logbook.
Reflections	Participants can apply for a credit for reflections but would be encouraged to complete.
Peer Group Discussion Meetings	Participants can apply for a credit with evidence of completed Case-based Discussions with their Supervisor.
SFE's	Participants must complete SFE's toward CSA's.
Elective Learning Activities	
Elective Learning Plan	Participants must complete an Elective Learning Plan.
Narrative Review	Participants can apply for a credit for the Narrative Review if they have completed a publication or research qualification with a thesis relevant to special interest area selected.
Assessments	
Core Clinical Skills Activities	Participants must complete Core CSA's.
Elective CSA	Participants must complete an Elective CSA.
Oral Presentation	Participants must complete an Oral Presentation.

The minimum time of completion for the Certificate may also be reduced from 12 months to 6 months.

Former trainees of the RANZCP Fellowship Program

Trainees who exit the RANZCP Fellowship Program prior to completing Stage 2 can apply for RPL to obtain credit for learning and/or assessment components of the Certificate including:

- the Practice Logbook, Reflections and Peer Group Discussion Meetings if the trainee has completed 12 months Full Time Equivalent (FTE) in the training program and two In-Training Assessments
- Core Clinical Skills Activities equivalent to Entrustable Professional Activities (EPA) completed
- the Elective CSA, if the trainee has completed an area of practice EPA in Stage 2

Only workplace-based assessments or EPAs that have been submitted and signed off while registered in the training program are suitable for RPL.

Core Learning Activities	
Online Learning Modules	Participants can apply for a credit for individual Online Learning Modules if they have participated in subjects within a College accredited Formal Education Course.

Observations	Participants would receive credit for observations if they have completed 12 months FTE.
Practice Logbook	Participants would receive credit for the Practice Logbook if they have completed 12 months FTE.
Reflections	Participants would receive credit for reflections if they have completed 12 months FTE.
Peer Group Discussion Meetings	Participants would receive credit for Peer Group Discussion meetings if they have completed 12 months FTE.
SFE's	Participants must complete SFE's toward Clinical Skills Activities.
Elective Learning Activities	
Elective Learning Plan	Participants must complete an Elective Learning Plan if credit is not approved for the Elective CSA.
Narrative Review	Participants can apply for a credit for the Narrative Review if they have completed the literature review component of the scholarly project.
Assessments	
Core Clinical Skills Activities	<p>Participants can apply for credit for individual Core CSA's. To receive credit for Core CSA's in their entirety, Participants must have completed Stage 1 EPAs:</p> <ul style="list-style-type: none"> • Use of antipsychotic medication • Providing psychoeducation <p>And the following Stage 2 EPAs:</p> <ul style="list-style-type: none"> • ST2-EXP-EPA3, Assessment and management of risk of harm to self and others • ST2-PSY-EPA3, Supportive psychotherapy or ST2-PSY-EPA4, Cognitive Behaviour Therapy (CBT) for management of anxiety <p>Only workplace-based assessments or EPAs that have been submitted and signed off while registered in the training program are suitable for RPL.</p>
Elective CSA	<p>Participants can apply for credit for the Elective CSA if they have completed any two area of practice EPAs, such as:</p> <ul style="list-style-type: none"> • Consultation-Liaison psychiatry • Delirium • Psychological distress • Old age psychiatry • Dementia • Medication in patients over 75 <p>Only workplace-based assessments or EPAs that have been submitted and signed off while registered in the training program are suitable for RPL.</p>

Oral Presentation	Participants can apply for credit for the Oral Presentation if they have completed two professional presentations, with evidence of workplace-based assessment.
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The minimum time of completion for the Certificate may be reduced, dependent on the time the trainee completed in the RANZCP Fellowship program.

Application process

Enrolled Participants will be required to complete the RPL form located in the Admin Forms tab on the Participants Dashboard. Documentation will be required to support the application as well as payment of the associated fee.

Applications will be assessed by the Committee to determine if approval for RPL may be granted.

Possible outcomes

The possible outcomes of an application for recognition of prior learning include:

1. Application approved
2. Recognition of prior learning and therefore credit approved for specific learning and assessment activities, but not all the activities applied for
3. Application not approved due to one or more of the following:
 - The application was incomplete
 - The application was not made within three months of commencing the Certificate program
 - The education undertaken prior to enrolling in the certificate was completed more than 5 years prior, not deemed equivalent or supporting documentation submitted was not suitable as evidence

Written advice of the outcome for RPL will be provided to the Participant.

13. WITHDRAWAL, EXCLUSION AND RE-ENTRY

Withdrawal

Participants can withdraw from the Certificate program at any time. There will be no refund of the Certificate fee if a Participant withdraws more than 4 weeks after the commencement date.

Participants who are considering withdrawal from the Certificate should first discuss their plans with a member of the CPTCP team and their Certificate Supervisor.

Participants are also advised to take into account the Certificate Policy in relation to recognition of prior learning and re-entry prior to withdrawing.

Exclusion

Participants may be excluded from the Certificate program subject to ratification by the RANZCP board.

An exclusion may be warranted due to:

- The Participants removal from the medical register
- Changes to the Participants medical registration e.g. due to misconduct
- The Participants conduct is unethical or unprofessional including plagiarism
- Three unsuccessful attempts at any one summative assessment and no satisfactory submission as to why they should be able to continue

The above are examples and not exhaustive.

If a Participant is to be excluded from the Certificate Program, advice will be provided in writing. The outcome will also be communicated to the relevant Certificate and Elective Supervisors and other relevant parties in accordance with the RANZCP Privacy Policy.

If a Participant is excluded from the Certificate Program they are ineligible to re-enter.

Re-entry

Participants may apply to re-enter the Certificate Program subject to adequate time remaining. The Certificate must be completed within a total of 4 years from the Participants start date therefore sufficient time to complete outstanding requirements must be available to the Participant.

Credit may be awarded subject to the activities recorded within the Certificate Portfolio.

If a former Participant would like to re-enter the program, they should provide:

- a. The reason for withdrawal and why this no longer applies to the applicant, if relevant
- b. Any mitigating or exceptional circumstances
- c. Other documentation as requested by the RANZCP

14. AWARDING OF THE CERTIFICATE

Participants who have successfully completed the Certificate Program, i.e., they have been notified by the Committee that they have successfully completed the Certificate Program requirements, are eligible to apply for the award of the Certificate of Postgraduate Training in Clinical Psychiatry.

RANZCP Former Trainees and Specialist International Medical Graduates (SIMGs)

Trainees who have completed Stage 2 of the RANZCP Fellowship Program are eligible for the award of the Certificate.

Partially comparable Specialist International Medical Graduates (SIMGs) who have completed 12 months of training in the RANZCP Fellowship Program and substantially comparable who completed 6 months on the specialist pathway are also eligible for the award of the Certificate.

Former trainees and SIMGs will have 12 months from the date of exit from the training program or specialist pathway. As Certificate graduates, they would then be expected to complete continuing professional development to maintain the qualification.

Former trainees and SIMGs will not be eligible for the award of the Certificate if they were excluded from the training program or specialist pathway due to ethical issues.

15. PRIVACY, CONSENT AND DEIDENTIFYING PATIENT INFORMATION

Participants must be familiar with privacy legislation and the privacy policy or statement of the organisation in which they are employed, which outlines how patient information is collected, stored, used, and disclosed.

Consent must be obtained from patients to disclose their personal health information to others not involved in their care, i.e. for education purposes associated with the Certificate.

All patient information that is entered into the Participants Portfolio must be de-identified. This includes, but is not limited to:

- Log Book entries and reflections
- responses to online module activities on Applied learning templates and any associated formulations uploaded
- references to patient names on SFE's
- comply with the practice, hospital or health service privacy policy

16. SPECIAL CONSIDERATION

Oral Presentation

Special consideration can be applied for if circumstances may adversely affect a Participants ability to complete the Oral Presentation.

Requests are considered on a case by case basis by the Committee and may not be granted. When considering requests the Committee will not grant adjusted marks. If a Participant believes illness or other personal circumstances could affect their performance it may be advisable to withdraw the attempt.

Requests for special consideration related to medical conditions, compassionate grounds or significant changes in personal circumstances that occur within three weeks of the scheduled Oral Presentation must be submitted as soon as possible after they arise.

Additional Time

If due to exceptional circumstances additional time is required to complete the Certificate, the Participants Certificate Supervisor may recommend, in writing to the Committee for consideration to be awarded. The Committee will determine if additional time can be awarded on a case by case basis.

The Committee at its discretion, may vary the nature of completion of other Certificate requirements for a specific Participant due to a request for special consideration.

17. COMPLAINTS AND APPEALS

If a Participant is dissatisfied with any aspect of the Certificate program the matter should, in the first instance be raised with their Certificate Supervisor where appropriate. If the matter remains unresolved Participants are welcome to contact the Committee.

The RANZCP Appeals and Complaints webpage provides guidance for Participants not satisfied with the outcome of a decision relating to training or assessment, in accordance with the [RANZCP Review, Reconsideration and Appeal Policy and Procedure](#).

18. PARTICIPANT FEEDBACK

Progress Review form

On every Progress Review form, Participants are asked for feedback on their experience of the Certificate Program in the previous term, including any difficulties they may have had in completing learning experiences or SFE's.

This feedback will only be read by the CPTCP team and not shared with the Certificate Supervisors or Certificate Reviewers involved. The Participant may be contacted should feedback need to be escalated to action resulting change.

Raising concerns

Participants are encouraged to raise any concerns about the administration or delivery of the Certificate Program.

This could be with a supervisor or the CPTCP team. The Committee may also be approached if the Participant feels more comfortable. Opportunities will also be available within the final evaluation completed by the Participant.

Discrimination, bullying and harassment

The RANZCP has a Zero tolerance policy towards discrimination, bullying and harassment. For support and guidance on how the RANZCP can support Participants of the Certificate, information is available in the RANZCP [Discrimination, Bullying and Harassment Policy](#).

ACRONYMS

ACRRM	Australian College of Rural and Remote Medicine
ADHD	Attention Deficit Hyperactivity Disorder
AMC	Australian Medical Council
ARST	Additional Rural Skills Training
AST	Advanced Specialised Training
CbD	Case-based discussion
CBT	Cognitive Behaviour Therapy
CPA	Comprehensive Patient Assessment
CPR	Care Plan Review
CPTCP	Certificate of Postgraduate Training in Clinical Psychiatry
CSA	Clinical Skills Activities
DSM	Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition
EPA	Entrustable Professional Activities
FTE	Full Time Equivalent
Handbook	The Certificate Handbook
ICD	International Classification of Diseases
MCNZ	Medical Council of New Zealand
OCPD	Observed Care Plan Discussion
Portfolio	Certificate Portfolio
RACGP	Royal Australian College of General Practitioners
RANZCP	Royal Australian and New Zealand College of Psychiatrists
RPL	Recognition of Prior Learning
SFE	Structured Feedback Exercise
SIMG	Specialist International Medical Graduate
SIMG	Specialist International Medical Graduates
the Committee	Certificate of Postgraduate Training in Clinical Psychiatry Committee
the Policy	Certificate of Postgraduate Training in Clinical Psychiatry Policy

DEFINITIONS

Certificate of Postgraduate Training in Clinical Psychiatry Committee	RANZCP Committee with oversight of the Certificate
Certificate of Postgraduate Training in Clinical Psychiatry Team	RANZCP staff employed to administer the Certificate
Certificate of Postgraduate Training in Clinical Psychiatry Policy	The overarching document which governs the Certificate of Postgraduate Training in Clinical Psychiatry
Certificate of Postgraduate Training in Clinical Psychiatry	Education and training package to upskill medical practitioners in psychiatry principles and techniques to assist patients with mental health conditions
Certificate Portfolio	Online training management system
Commencement date	The date the Certificate Portfolio opens and the course can be started.
Mental health condition	Refers to a diagnosable mental disorder as well as symptoms of disorders while not meeting criteria for a diagnosis of a disorder.