Objectives for Child Psychiatry Rotation, PGY-1

Waterloo Regional Site,

MUMC Pediatric Program

INTRODUCTION

A strong foundation in child psychiatry is essential for promoting optimal mental health in children. At the completion of the pediatric residency program, the resident should be able to:

1. Assess and manage common psychiatric problems of childhood and adolescence.
2. Act as a consultant to family physicians and other agencies with regard to these problems.
3. Make appropriate referrals to other sub-specialties, professionals and community agencies.

MEDICAL EXPERT

1. To develop knowledge of the spectra of psychiatric disorders that affect children.
2. To develop appropriate skills in gathering information from history taking, family interview and from other sources (e.g., school personnel) to assess children with psychiatric problems. Clinical assessment to be consistent with principles of family-centred care, with special attention to the family’s priorities.
3. To develop skills for age appropriate mental status examination in children
4. To recognize and develop an approach to the assessment and diagnosis of children with the following disorders:
   - Attention Deficit Hyperactivity disorder
   - anxiety disorders
   - Tic disorders
   - Mood disorders, including depression and suicidal ideation
   - Thought disorders
5. Develop an appropriate knowledge in use of psychopharmacological agents (stimulants, anxiolytics, neuroleptics).
6. Have an understanding of the psychiatric services for children in the community.
7. To understand the types of psychiatric and psychoeducational tools available to assess children with psychiatric disorders (e.g., parent-completed questionnaires for emotional and behavioural symptoms, Canadian Pediatric Society manual of learning and academic skills, measures of language and cognitive development used by speech and language pathologists and psychologists).
8. To understand the indications for specific neuroimaging, genetic and biochemical tests as part of investigation for children with psychiatric disorders.
9. To develop knowledge and skills in the management of the above conditions. This should include the ability to formulate an appropriate management plan, which includes counseling, pharmacotherapy (stimulants, anxiolytics, neuroleptics), behavioural therapy, physiotherapy, occupational therapy, speech and language therapy and educational interventions.

10. To develop skills in assessing children and counseling parents in regard to the management of common psychiatric challenges (e.g., sleep problems, tantrums, aggression, oppositional behaviour and anxiety).

**COMMUNICATOR**

1. To develop the skills required to communicate appropriately with children who have special needs and their families.

2. Develop the skills required to communicate feedback to culturally and socially diverse families.

3. Develop the ability to report concisely and efficiently (verbally and in writing) the assessment of children with psychiatric disorders.

4. Understand and follow a family-centred approach to decision-making.

**COLLABORATOR**

1. To understand the role of community agencies and programs providing psychiatric services.

2. To understand the role and expertise of members of an interdisciplinary team who provide support to children with developmental problems (including physiotherapy, occupational therapy, speech pathology, psychology, audiology, early intervention, behavior therapy, public health nurse, etc.).

3. To develop the skills to effectively communicate with the members of an interdisciplinary team and collaborate in shared decision-making.

**MANAGER**

1. Prioritize and manage multiple simultaneous clinical demands.

2. Delegate and supervise effectively.

3. Show an awareness of cost-benefit considerations in patient care decisions.

**HEALTH ADVOCATE**

1. Recognize the advocacy needs of children with psychiatric disorders and their families.

2. Assist children and their caregivers in navigating healthcare and community systems.

**SCHOLAR**

1. Set learning objectives based on clinical encounters and identified knowledge gaps. Use various resources (including the scientific literature) to increase knowledge base, critical appraisal or reviewed material.

2. Enhance the learning experience of other trainees (medical students, other residents) by sharing
knowledge, providing supervision and constructive feedback.

3. Present in a clear, comprehensive and critical synthesis of a developmental topic to the staff, at some point during the rotation.

**PROFESSIONAL**

1. Prompt and consistent attendance at scheduled clinics, completes reports in a timely fashion, follows up on phone calls and investigations, respects issues of confidentiality, takes initiative in scheduling learning experiences.

2. Develops an understanding of bioethical issues involved in psychiatric care (e.g., implications of genetic testing, the social implication of labeling, controversy regarding alternative therapies).

Modified: Dec 27, 2013
Revised: June 13, 2014

Based on CanMeds objectives for developmental pediatrics, August 2007