



Child and Adolescent Psychiatry Fellowship Training Manual

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Goals and Objectives of the Child and Adolescent Psychiatry Fellowship Training Program

Child and Adolescent Psychiatry (CAP) is a medical specialty focused on the prevention, diagnosis and treatment of disorders of thinking, feeling and behavior affecting children, adolescent and their families. The University of Arizona CAP Fellowship Training Program offers CAP fellows a balanced and comprehensive clinical experience with appropriate and graduated levels of supervision in a variety of clinical settings and a formal didactic curriculum over the course of two years. Upon completing this program, the fellow will have a comprehensive knowledge of typical child and adolescent development and will be able to differentiate normal from abnormal development. The fellow will be able to conduct a comprehensive evaluation of children, adolescents and families with a broad spectrum of psychopathology and varying socio-cultural and ethnic backgrounds. The fellow will achieve competence in the major treatment modalities and will have a strong knowledge base and skill level to practice in various CAP settings and will be able to provide consultation to other medical specialties, and in non-medical settings, such as schools, juvenile court and community mental health facilities. Fellows completing this program will have experience as teachers of professional students, professional colleagues in other disciplines, parents and teachers and members of other systems of care. Fellows will be familiar with research methodology and will be able to critically evaluate CAP research literature. The fellow will additionally develop the knowledge and skill to work as a member of a multidisciplinary team, as well as a leader in various clinical settings.

Following are the professional knowledge, skills and attitudes which fellows will develop throughout their training.

A. Core Knowledge

1. Knowledge of normal and abnormal development at each phase of the developmental life cycle and how to apply such knowledge in clinical settings.
2. Knowledge of the full spectrum of psychopathology in children, adolescents and families, including all DSM V conditions. The fellow will acquire a thorough knowledge of the natural history, phenomenology, etiology and course of psychiatric disorders of children and adolescents.
3. Knowledge to conduct comprehensive psychiatric assessments of children and adolescents, including the use of a range of interview techniques and of ancillary laboratory, medical and psychological tests used in data collection.
4. Thorough knowledge of indications, contraindications and adverse effects of the full spectrum of treatment interventions used for children, adolescents and families. These interventions include both long-term and brief individual and play therapy, pharmacotherapy, family therapy, group therapy, cognitive-behavior therapy, combined treatment, and crisis intervention.
5. Knowledge of the indications for various treatment settings including inpatient, residential, day treatment, outpatient, and school- and home-based treatment.
6. Knowledge of the role of the child psychiatrist within the multidisciplinary team in various settings, both as a team member and clinical-administrative leader.

7. Knowledge of the role and functions of a consultant to pediatrics and other primary care providers, school systems, the court systems, and community system of care.
8. Working knowledge of common pediatric neurological conditions and the interface between neurological and psychiatric symptoms or conditions.
9. Knowledge of cultural difference and medical ethics in care of children, adolescents and families in multiple settings.
10. Knowledge of the systems of health care as it pertains to children, adolescents and families, including the role and functions of various community and state agencies, and principles and practice of managed care.
11. Knowledge of the principles of research to encourage a scientific approach to clinical problems including research methodology and critical reading of the child and adolescent psychiatry and psychology literature.
12. Knowledge of methods of teaching medical students, general psychiatry residents and other professionals who care for children, adolescents and families, and parents and public regarding various mental health issues of youth.

B. Core Skills

1. Fellows will provide patient care that is compassionate, appropriate and effective for the treatment of health problems and the promotion of health.
2. Ability to conduct thorough assessments of children, adolescents and families in various clinical settings.
3. Ability to assess, discuss, document and intervene for concerns regarding a patient's dangerousness to self or to others.
4. Ability to develop a comprehensive and thoughtful differential diagnosis, biopsychosocial formulation and multimodal treatment plan for children, adolescents and families.
5. Capacity to develop and communicate an appropriate treatment plan for a given problem and child, skill in the art of differential therapeutics (e.g., medication, psychotherapy, academic remediation, etc.), and in combining a variety of approaches to meet the needs of a particular child.
6. Comfort and skill in working with children, adolescents and families.
7. Demonstration of basic skills required to conduct a range of therapies including individual brief and long-term individual and play therapy, family therapy, group therapy, cognitive-behavioral therapy, pharmacotherapy, and combined treatment in various clinical settings.
8. Ability to provide consultation effectively to pediatric and other primary care providers, court systems, school systems, and other community systems of care.
9. Ability to conduct an assessment and treatment of children and families with diverse racial, gender, cultural, and socioeconomic background.
10. Ability to work as a member of an interdisciplinary team and provide clinical leadership in various clinical settings.
11. Skills related to the critical reading of research and clinical reports. This would include general knowledge in the areas of research design, psychometric measures, rules of evidence and inference, and commonly employed statistical tests.
12. Skills necessary to teach medical students, residents, other physicians and co-

workers concerning all aspects of the field of Child and Adolescent Psychiatry.

C. Core Attitudes

1. Respect for children, adolescents and families of all ethnic and cultural backgrounds, and an appreciation of their strengths as well as their weaknesses.
2. Hold excellence in patient care as the highest standard.
3. Patience and perseverance in the conduct of clinical work, a spirit of dedication to one's patients and their caretakers.
4. An abiding sense of scientific curiosity and wonder about one's work.
5. A commitment to a lifetime of scholarly activity: i.e., one always remains a "student" in the sense that theories, data and techniques must be constantly reassessed and renewed.
6. A commitment to practice within the ethical standards of our profession.
7. Willingness to advocate for all children in general, and each child in particular, and for the systems of care that serve them.
8. Respect for one's colleagues in psychiatry and the other helping professions; an appreciation of the importance of interdisciplinary work.
9. Adherence to the biopsychosocial model as the best current approach to understanding the child and his/her family in both depth and breadth.
10. An appreciation of the transactional nature of all human development in which the forces of nature and nurture, maturation and experience have pivotal roles to play. Understanding the transactional perspective is central to understanding all lines of development whether it be behavioral, cognitive, psychosocial, attachment, etc.

General Goals and Objectives

For First Year Fellows

By the end of the first year of training, fellows must demonstrate the following overall objectives in knowledge, skills and attitude, in addition to the six core competencies outlined in the following section.

Knowledge

In the first year, the fellow must demonstrate increasing knowledge in the following areas:

1. Normal and abnormal development in infancy through adulthood.
2. Methods of performing a complete psychiatric assessment of children, adolescents and families.
3. The indications, contraindications and possible adverse effects of various treatment modalities used in the treatment of children and adolescents.
4. The role and functions of a consultant to pediatrics and other professionals.
5. Cultural and ethical issues relevant to the treatment of children, adolescents and families.
6. The role of a child psychiatrist within multidisciplinary teams in inpatient and outpatient treatment settings.

Skills

In the first year, the fellow must demonstrate increasing skills in each of the following areas:

1. Psychiatric assessment of children, adolescents and families in inpatient, emergency room and outpatient clinic settings.
2. Ability to conduct assessments and treatments of children, adolescents and families with diverse populations, and with attention to differences in age, sex, gender identity, race, culture, and socioeconomic status.
3. Ability to obtain comprehensive histories including the present illness; past medical and psychiatric histories; family history; legal, substance use, trauma/abuse, educational and social histories; and developmental history; and be able to develop a case formulation, differential diagnosis and treatment plan.
4. Ability to assess, discuss, document and intervene regarding a child or adolescent's potential for harm to self or others in an emergency room and other settings
5. Ability to provide the full spectrum of treatment interventions including psychopharmacology and various psychotherapies and psycho-social interventions.
6. Ability to work effectively as a member of an interdisciplinary team.

Attitudes

In the first year, the fellow must demonstrate the attitudes required of a child psychiatrist including:

1. Compassion, integrity and respect for others.
2. Responsiveness for patient privacy and autonomy
3. Personal accountability to patients, society and the profession
4. Sensitivity and responsiveness to a diverse patient population including but not limited to diversity in gender, age, culture, race, religion, disabilities and sexual orientation.
5. Ability to maintain appropriate professional boundaries.
6. An awareness of, and commitment to, the ethical standards developed by our specialty.

General Goals and Objectives

For Second Year Fellows

By the end of the second year of training, fellows must demonstrate the following knowledge, skills and attitude, in addition to six core competencies outlined in the next section.

Knowledge

In the second year, the fellow must build on the knowledge base developed in year one, and must demonstrate increasing knowledge in the following areas:

1. The full spectrum of psychopathology in children, adolescents and families including all DSM V conditions.
2. The aspects of medical and psychiatric administration in various settings.
3. The quantitative methods and range of research methodology.
4. The basic tenets of teaching for medical students, psychiatric residents, and other professionals.

5. How to advocate for child mental health issues, and how to educate parents and the public regarding mental health issues in youth.
6. The federal and state laws regarding the education and treatment of minors with psychiatric illness.
7. The principles of consultation to pediatrics, school, courts and community system of care.
8. The systems of health care including the role of community and state agencies.

Skills

In the second year, the fellow must build upon the skills developed in the first and must demonstrate increasing knowledge in the following areas:

1. Ability to develop comprehensive assessment and case formulations across all age groups and with varying diagnoses.
2. Ability to develop comprehensive case formulation of both uncomplicated and complicated presentations, and implement comprehensive bio-psycho-social treatment plans in various settings.
3. Ability to provide various treatment modalities effectively to treat children, adolescents and families of varying ages and diagnoses.
4. Ability to consult effectively to pediatricians, schools, the courts and community systems of care.
5. Ability to provide consultation to pediatricians, schools, or other mental health professionals.
6. Ability to teach medical students, residents, allied professionals and lay individuals regarding mental health issues in youth.
7. Ability to provide clinically sound, culturally sensitive and ethically-based psychiatric care to youth

Attitudes

In the second year, the fellow must build upon the attitudes developed in the first year, and as specified in the six core competencies.

1. Compassion, integrity and respect for others.
2. Responsiveness for patient privacy and autonomy
3. Personal accountability to patients, society and the profession
4. Sensitivity and responsiveness to a diverse patient population including but not limited to diversity in gender, age, culture, race, religion, disabilities and sexual orientation.
5. Ability to maintain appropriate professional boundaries.
6. An awareness of, and commitment to, the ethical standards developed by our specialty.