

Library of activities – Learning Disability Psychiatry

This document suggests activities that can be undertaken to develop and evidence key capabilities. It can be used to inform the conversation between trainee and trainer at the start of each placement / training post, in which they should agree activities and evidence as part of setting up a personal development plan.

The below table outlines the High Level Outcomes (HLOs) and Key Capabilities (KCs) to be achieved under 16 key themes.

Specialty HLO statements

HLO1: Demonstrate the professional values and behaviours required of a consultant psychiatrist, with reference to Good Medical Practice, and Core Values for Psychiatrists (CR204) and other relevant faculty guidance.		
High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities
1.1 Professional Relationships	Work collaboratively and effectively with patients with a learning disability, their families, their carers of all ages, and colleagues, while managing complex risk and system dynamics.	<ul style="list-style-type: none"> • Undertake observed face to face clinical interactions and request WBPA on these. • Undertake clinical risk assessments and discuss these in supervision. • Produce appropriately tailored clinical correspondence detailing management plans for different audiences, including patients, their families and carers, and other professionals. • Participate in multi-agency meetings such as MAPPA, Safeguarding, MHA Managers' and Tribunals and reflect on the dynamics between and differing roles of the professionals present. • Obtain multi-source feedback and reflect on this in psychiatric supervision.
	Recognise, validate and actively address systemic and structural inequalities, intersectionality, and their impact on clinical outcomes for patients and their carers of all ages, and on working relationships with colleagues.	<ul style="list-style-type: none"> • Demonstrate consideration of protected characteristics in your clinical assessments and management plans. • Complete the Trust Equality and Diversity training package and reflect on your learning and any impact on your clinical practice in psychiatric supervision.

	<p>Consistently demonstrate, and promote in others, a person-centred holistic approach to patients with a learning disability, their families and their carers of all ages that is empathic, compassionate and respects their dignity, whilst remaining realistically optimistic and honest.</p>	<ul style="list-style-type: none"> • Undertake observed face to face clinical interactions and request WBPA on these. • Produce appropriately tailored clinical correspondence detailing management plans for different audiences, including patients, their families and carers, and other professionals. • Obtain multi-source feedback and reflect on this in psychiatric supervision.
	<p>Demonstrate flexibility, leadership, use of initiative, prioritisation, and adaptability, effectively managing your time and resources and using new technologies as appropriate.</p>	<ul style="list-style-type: none"> • Chair the Multidisciplinary team meeting. • Obtain multi-source feedback and reflect on this in psychiatric supervision. • Supervise the core trainee allocated to the team and obtain feedback on this. • Conduct observed telephone and video appointments with patients and carers and obtain WBPA on these. • Demonstrate timely record keeping and production of correspondence and reports.
	<p>Understand the fundamental role of multidisciplinary team working in learning disability practice and the role of the psychiatrist within this.</p>	<ul style="list-style-type: none"> • Observe your consultant in the MDT meeting and discuss this in psychiatric supervision. • Undertake joint assessments with members of the MDT, formulating an appropriate shared management plan and discuss these in psychiatric supervision. • Provide advice and support to MDT members on the management of your patients, delegating tasks where appropriate. • Draft letters/reports which clearly demonstrate involvement of wider MDT within a patient's care and treatment. • Obtain multi-source feedback and reflect on this in psychiatric supervision.

	Apply an understanding of how culture and community influence patients with learning disability and their families, affecting their interaction with services.	<ul style="list-style-type: none"> • Spend time with the Trust interpreters, observing their role. • Attend the Community Leaders forum in the locality where you are working and reflect on the issues arising. • Carry out observed interactions with patients, families, carers, colleagues, wider Trust roles and stakeholders. • Complete formulations and management plans clearly highlighting cultural and community factors.
	Set and maintain professional boundaries with stakeholders, for example adult services, commissioners, support providers, legal professionals, the police and primary and secondary care.	<ul style="list-style-type: none"> • Participate in service access discussions. • Attend and contribute to admission / discharge scrutiny meetings for your patients, supported by your supervisor. • Complete a mental capacity / capacity assessment report in respect of a patient, to support provision of care, liaising with other professionals as appropriate, e.g. solicitor, social worker.
	Advocate for your patients with learning disability; where necessary do so separately to the needs and wishes of other systems, for example families and carers, primary and secondary care and social care.	<ul style="list-style-type: none"> • Actively seek your patients' views on their care and treatment, raising any concerns they have through the appropriate channels. • Engage with the local advocacy and learning disability charity organisations, signposting/linking in your patients with them as appropriate. • Conduct observed interactions with other colleagues, especially external stakeholders and meetings such as MAPPA, Safeguarding, MHA Managers' and Tribunals.
1.2 Professional Standards	Understand the impact of workload, patient, team and organisational dynamics on your own well-being.	<ul style="list-style-type: none"> • Maintain your own wellbeing, e.g. using leave, leaving at appropriate times at end of working day, raising any issues with your psychiatric supervisor in a timely manner. • Attend and contribute to the local learning disability psychotherapy group. • Obtain multisource feedback and reflect on this in supervision.

	<p>Use supervision and reflection effectively, recognising your skills, limitations and your duty of candour.</p>	<ul style="list-style-type: none"> • Be conscientious in your attendance at psychiatric supervision, ensuring you are well-prepared. • Proactively incorporate reflection in your day-to-day practice and supervision discussions. • Share any concerns arising in clinical practice in a timely manner, seeking advice and support as needed.
	<p>Apply strategies to take care of your wellbeing, seeking timely support and guidance, including acknowledging if you have a protected characteristic which might impact on your training, or if you are having difficulties adapting to working in the UK, and support trainees and other colleagues to do so too.</p>	<ul style="list-style-type: none"> • Maintain your own wellbeing, e.g. using leave, leaving at appropriate times at end of working day, raising any issues with your psychiatric supervisor in a timely manner. • Familiarise yourself with local occupational health and deanery training support services, accessing these if required, in consultation with your supervisor. • Provide peer support to a new trainee psychiatrist.
	<p>Actively use and promote reflective practice in your team to address the emotional impact of work on yourself, the individual and the team.</p>	<ul style="list-style-type: none"> • Attend and contribute to the local learning disability psychotherapy group. • Actively contribute to the case Discussion and reflection section of the multidisciplinary team meeting. • Attend and contribute to the team awayday, reflecting on issues arising in psychiatric supervision.
	<p>Consistently demonstrate a positive and conscientious approach to the completion of your work.</p>	<ul style="list-style-type: none"> • Ensure your record keeping is timely and accurate. • Produce appropriately tailored clinical correspondence for a range of audiences, in a timely manner.
	<p>Make clear, accurate and contemporaneous records.</p>	
	<p>Promote psychiatry of learning disability as a specialty, including acting as an advocate for patients, families and carers.</p>	<ul style="list-style-type: none"> • Participate in medical student teaching. • Attend a co-production workshop.

		<ul style="list-style-type: none"> • Actively seek your patients' views on their care and treatment, raising any concerns they have through the appropriate channels. • Engage with the local advocacy and learning disability charity organisations, signposting/linking in your patients with them as appropriate.
	Maintain appropriate professional standards whilst working clinically, as a leader within a healthcare organisation and with other stakeholders.	<ul style="list-style-type: none"> • Keep up to date with your trust's mandatory training requirements. • Complete the GMC Survey. • Reflect on the GMC Survey findings with the LD Psychiatry Training Committee. • Obtain multisource feedback and reflect on this in psychiatric supervision.
	Maintain appropriate confidentiality in learning disability practice and advise other professionals within and outside the health and social care setting.	<ul style="list-style-type: none"> • Participate in safeguarding meetings and discussions for your patients, sharing information as appropriate. • Complete the trust mandatory information governance training. • Supervise junior colleagues on call, advising them on risk issues and information sharing as appropriate.
	Identify and challenge stigma and discrimination against people with learning disability.	<ul style="list-style-type: none"> • Actively seek your patients' views on their care and treatment, raising any concerns they have through the appropriate channels. • Engage with the local advocacy and learning disability charity organisations, signposting/linking in your patients with them as appropriate. • Attend a co-production workshop.
	Promote the resources available within the specialist team to the wide health and social	<ul style="list-style-type: none"> • Work with learning disability nursing to support your patients in engaging with primary and secondary healthcare services.

	care system, in order to enable optimal physical health of patients.	<ul style="list-style-type: none"> Attend and promote the 'Healthy Me' group run by the LD Service. Liaise with SLT services to develop accessible information for your patients around their health and wellbeing.
	Take responsibility for raising and addressing issues of patient safety and quality of care in a timely manner.	<ul style="list-style-type: none"> Familiarise yourself with the incident reporting system in your trust and complete incident reports for your patients as and when they arise. Raise safeguarding concerns for your patients in a timely manner. Participate in the upcoming Regulator visit.
	Maintain appropriate professional attitudes and behaviour when managing situations of ambiguity and uncertainty	<ul style="list-style-type: none"> Attend and contribute to the local learning disability psychotherapy group. Undertake observed clinical interactions / case-based discussions for challenging clinical situations and reflect on these experiences in psychiatric supervision. Obtain multisource feedback and reflect on this in supervision.
	Demonstrate an understanding of the principles of sustainability and how they underpin sustainable psychiatric practice.	<ul style="list-style-type: none"> Demonstrate agile working in your day-to-day clinical practice. Attend the forthcoming ST training day session with the regional sustainability champion and reflect on how to implement the learning arising.
HLO 2.1: Demonstrate advanced communication and interpersonal skills when engaging with patients, their families, carers of all ages, their wider community, colleagues and other professionals.		
High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities

2.1 Communication	Demonstrate an understanding of your own style of verbal and nonverbal communication and the impact of this on professional relationships.	<ul style="list-style-type: none"> • Complete an eligibility assessment with another professional in the multidisciplinary team and obtain feedback on your style of communication. • Complete a psychiatric assessment with a patient with severe learning disability, with your clinical supervisor present, and obtain feedback on your communication skills. • Assess patients with varying communication abilities under supervision, reflect on your own communication style, and adjust your approach as necessary.
	Consistently communicate effectively with patients across the spectrum of cognitive ability, including those with neurodevelopmental disorders and relevant others, utilising a range of methods and adapting your style of communication to the patient's needs, making reasonable adjustments as appropriate.	<ul style="list-style-type: none"> • Complete psychiatric assessments of new referrals, including patients across the spectrum of cognitive ability and those with neurodevelopmental disorders such as autism. • Undertake observed clinical assessments and reviews with other members of the multidisciplinary team and obtain feedback on your performance. • Attend a Makaton training course. • Learn how to use Talking Mats to facilitate communication in a patient with learning disability and/or autism.
	Demonstrate skills in supporting those for whom English is not their first language, including the use of interpreters, and providing information in other languages.	<ul style="list-style-type: none"> • Work jointly with an interpreter to facilitate a psychiatric assessment in a patient for whom English is not their first language. In clinical supervision, reflect on the pros and cons of working with an interpreter. • Use written information resources in other languages to enhance communication with patients and families for whom English is not their first language.
	Develop and maintain therapeutic relationships with your patients with learning disability, their families and their carers of all ages.	<ul style="list-style-type: none"> • Develop skills in care coordination by taking on care coordinator responsibility for a patient and lead on care planning, risk assessment and multidisciplinary reviews.

	<ul style="list-style-type: none"> • During supervision reflect on what reasonable adjustments may be needed to facilitate good therapeutic relationships with your patients. Implement these reasonable adjustments in clinical practice.
Communicate effectively with colleagues in the multidisciplinary team and promote interagency working through effective liaison with external organisations.	<ul style="list-style-type: none"> • Attend a care and treatment review (CTR) and provide a psychiatric opinion for the panel clearly communicating diagnosis, treatment, risk, and prognosis. • Chair the weekly multidisciplinary referrals meeting and demonstrate effective leadership skills by ensuring referrals are responded to efficiently. • Provide timely support and specialist advice to the mainstream psychiatric ward when a patient with learning disability is admitted.
Analyse complex information and express your professional opinion coherently through both written and verbal communication.	<ul style="list-style-type: none"> • Complete a psychiatric report for a Mental Health Review Tribunal and provide oral evidence at a tribunal with support from your clinical supervisor. • Complete a mental capacity assessment for a patient whose care amounts to a deprivation of liberty and communicate your opinion clearly using appropriate documentation.
Produce written reports within the limits of your expertise, which are coherent, comprehensive, timely, accurate, relevant, and as appropriate taking into account legal principles and requirements.	<ul style="list-style-type: none"> • Write a court report for a patient with learning disability who has been charged with an offence and provide a professional opinion on fitness to plead. • Learn how to complete psychiatric reports to the Ministry of Justice for patients who are subject to a Restriction Order. • Develop proficiency in the preparation of specialist forensic reports including those required by the courts, the Ministry of Justice and for the purpose of Mental Health Review Tribunals.

	Effectively explain to patients with learning disability, their families and their carers of all ages, the outcome of the assessment and the recommended care plan, considering their ideas, concerns and expectations.	<ul style="list-style-type: none"> • Communicate effectively with patients, families and carers regarding the purpose and outcome of any psychiatric assessment and recommendations. • Produce appropriately tailored written care plans for patients, families and carers.
HLO 2.2: Demonstrate advanced skills in the psychiatric assessment, formulation, diagnosis and person-centred holistic management of an appropriate range of presentations in a variety of clinical and non-clinical settings within Learning (Intellectual) disability psychiatry.		
High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities
2.2 Clinical Skills	Demonstrate a person-centred holistic approach to the assessment and treatment of mental disorders in patients with learning disability considering relevant social, cultural, spiritual and religious factors.	<ul style="list-style-type: none"> • Work jointly with the multidisciplinary team to provide holistic, person-centred clinical assessments. • Develop an understanding of how cultural and religious factors can influence how mental illness and behaviours are understood and responded to in different communities.
	Demonstrate a working knowledge of the genetic causes of learning disability and the associated behavioural phenotypes.	<ul style="list-style-type: none"> • Attend the clinical genetics service as a protected development session. • Complete a quality improvement project to increase access to genetic testing for patients referred to our service. • Assess a patient with Prader Willi Syndrome and learn about the associated behavioural phenotype. • Develop and deliver a teaching module on behavioural phenotypes and present this at the local academic meeting. • Develop a patient information leaflet explaining what genetic testing involves and how to obtain a genetic test.

<p>Understand the principles of life span issues that affect people with learning disability and their families, and how these influence the management of transitions.</p>	<ul style="list-style-type: none"> • Attend the bimonthly transition meeting with CAMHS and consider how best to facilitate a safe and effective transition from child to adult LD services. • Assess new referrals of young patients moving to adult services and work jointly with colleagues in education and social care to develop holistic, person-centred care plans. • Develop an understanding of the impact of life events and change on young adults with learning disability. • Liaise effectively with children's services to ensure young patients with learning disability are followed up in a safe and timely manner. • Develop clinical skills in the assessment of cognitive and adaptive decline in older patients with learning disability. • Reflect on the impact of loss and bereavement on the mental health and well-being of patients with learning disability. • Complete a protected development session/placement with the CAMHS – LD community team.
<p>Demonstrate an appropriate understanding of learning and behavioural stages of human development through the lifespan including awareness of normative as well as variations in presentations, for example with neurodevelopmental conditions and across cultures.</p>	<ul style="list-style-type: none"> • Assess patients with autism and learning disability. Learn about how mental illness can present differently in this group of patients because of social and communication differences. • When assessing patients with learning disability, use a developmental approach to assessment and diagnosis. Discuss this in clinical supervision when presenting cases. • Visit a CAMHS - LD inpatient unit and shadow the consultant . Learn about the clinical presentations of children admitted to the unit and approaches to management. • Attend the local developmental paediatrics clinic as a protected development session.

<p>Demonstrate proficiency in the assessment of capacity to consent to care and treatment in patients with learning disability.</p>	<ul style="list-style-type: none"> • Complete relevant mandatory training on mental capacity legislation. • Complete a capacity/ incapacity assessment in relation to consent to care and treatment in patients with learning disability. • Complete a 'best interests' assessment in the case of a person lacking capacity to consent to a particular decision. • Ensure all decisions about prescribing are within the framework of relevant mental capacity / adults with incapacity legislation. • Learn about the concept of deprivation of liberty and which legal framework is applicable in this context. • Deliver a teaching session to medical students on psychiatric placement on the relevant Capacity / Incapacity legislation in your locality.
<p>Demonstrate an understanding of the social determinants of health, including economic deprivation, inadequate nutrition, educational and environmental factors and the impact of these on the aetiology and presentation of mental disorders in patients with learning disability.</p>	<ul style="list-style-type: none"> • Always include an assessment of physical health when completing a psychiatric history and examination. • Understand the health inequalities faced by people with learning disability and the factors that underpin these. • Learn about annual health checks in primary care and arrange to observe one of these assessments during the placement. • Complete a range of community visits to people's homes, commissioned placements, education, and day services and reflect on how these social environments might impact on a person's health. • Complete a smoking cessation training course and use this learning in clinical practice with a patient with learning disability.
<p>Apply advanced knowledge of the pharmacodynamics, pharmacokinetics, efficacy, tolerability, interactions and adverse</p>	<ul style="list-style-type: none"> • Develop skills in adapting your prescribing practice to the needs of people with learning disability, keeping in mind issues

<p>effects of psychotropic medication in patients with learning disability as appropriate when initiating, reviewing, changing or discontinuing regimes.</p>	<p>such as decision-making capacity, drug interactions, physical health, and adverse effects.</p> <ul style="list-style-type: none"> • Understand the history of overprescribing psychiatric medication to manage behaviour and learn about national policy to stop this. (Stopping the over medication of people with a learning disability, autism or both (STOMP)) • Work with the multidisciplinary team to prevent the inappropriate use of psychotropic medication in the management of challenging behaviour. • Develop specialist expertise in the use of psychotropic medication as part of the treatment of mental illness in people with learning disability.
<p>Demonstrate proficiency in obtaining a detailed psychiatric history and performing a mental state examination in patients with learning disability in both routine and urgent settings.</p>	<ul style="list-style-type: none"> • Undertake comprehensive psychiatric assessments including history, mental state examination, investigations, and formulation in patients with learning disability. • Carry out urgent psychiatric assessments in the community when patients with learning disability present in crisis. • Present a complex case presentation including history, mental state examination, investigations, and management at the local academic programme. • Attend the accident and emergency department to conduct a joint assessment of a patient with learning disability with the psychiatric liaison team. • Jointly assess a patient with learning disability and challenging behaviour with the clinical psychologist with a view to developing a positive behaviour support plan.
<p>Assess patients from a range of different cultural, spiritual, and religious backgrounds, including asylum seekers and refugees, and demonstrate an understanding of how</p>	<ul style="list-style-type: none"> • Develop skills in the assessment of mental disorders in patients from diverse cultural backgrounds. • Discuss in clinical supervision how religious and cultural beliefs might impact on the clinical presentation of mental illness.

protected characteristics may impact on clinical presentation.	
Conduct a thorough physical examination, request relevant investigations and make referrals to other specialists where appropriate.	<ul style="list-style-type: none"> • Complete basic physical investigations including weight, height, body mass index and vital signs as part of the routine psychiatric assessment. • Liaise with primary care to ensure all patients with learning disability have an annual health check. • Be aware of the increased risk of premature mortality associated with severe mental illness and learning disability. Ensure appropriate investigations are carried out to mitigate cardiovascular risk factors. • Ensure patients on antipsychotic medication are supported to access the necessary physical investigations such as blood tests and ECG. • Work with the multidisciplinary team to ensure pathways are in place to facilitate physical investigations for patients with learning disability who may find it difficult to cooperate with tests.
Assess the general health of your patients, taking into account the impact of their physical health on their mental health needs and vice versa. This assessment should include consideration of nutritional, metabolic, endocrine and reproductive factors and disorders, and the physical and mental impact of substance use and addiction on clinical presentation.	<ul style="list-style-type: none"> • When conducting a psychiatric assessment, include a comprehensive history of physical health problems, medication and alcohol and substance misuse disorders. • Complete a psychiatric assessment of a patient with learning disability who is using alcohol in a way that is harmful.
Demonstrate proficiency in the assessment and diagnosis of mental and neurodevelopmental disorders in patients with learning disability across the spectrum of	<ul style="list-style-type: none"> • Undertake comprehensive psychiatric assessments including history, mental state examination, investigations, and formulation in patients with learning disability across the spectrum of cognitive ability.

<p>cognitive ability using classification systems as appropriate.</p>	<ul style="list-style-type: none"> • Develop clinical skills in the assessment and diagnosis of autism spectrum disorders. • Complete training in the use of specialist diagnostic instruments such as the ADI – R and ADOS and practice using these skills in clinical practice. • Attend the ADHD specialist clinic as part of your protected development time. • Using the DIVA - ID assess ADHD in a patient with learning disability.
<p>Demonstrate proficiency in the assessment of risk in people with learning disability leading to a formulation and risk management plan.</p>	<ul style="list-style-type: none"> • Complete a detailed risk assessment and management plan for each new referral to the team allocated to your caseload. • Attend training in the HCR 20 risk assessment and complete at least two HCR 20 assessments with the MDT during your placement.
<p>Demonstrate proficiency in the construction of a comprehensive clinical formulation relevant to patients with learning disability and use this to devise a safe, effective and evidence-based management plan.</p>	<ul style="list-style-type: none"> • Following each psychiatric assessment, provide a summary of the key findings leading to a diagnostic formulation and management plan. • In clinical supervision, present new assessments in a structured format leading to a diagnostic formulation and management plan. • When making a diagnosis, provide clear evidence of the rationale underpinning that diagnosis. • Ensure care plans are clear, understandable, evidence based and achievable. Discuss care plans at clinical supervision. Read the evidence-based guidelines for the management of mental illness in people with learning disability.
<p>Demonstrate proficiency in use of formulation to support the understanding of challenging behaviour in patients with learning disability,</p>	<ul style="list-style-type: none"> • Attend the multidisciplinary challenging behaviour care pathway meetings every month.

<p>including the link between communication and behaviour.</p>	<ul style="list-style-type: none"> • Conduct a joint assessment of challenging behaviour with the clinical psychologist. • During your placement, conduct one assessment of challenging behaviour using an established tool (e.g. BBAT) leading to the development of a Positive Behaviour Support Plan. Do this with supervision from the clinical psychologist. • Shadow the speech and language therapist during an assessment of communication as part of a challenging behaviour assessment. • Observe the occupational therapist conducting a sensory assessment and consider how sensory sensitivities may contribute to challenging behaviour.
<p>Demonstrate an understanding of the utility and limitations of clinical rating scales and psychometric testing for people with learning disability.</p>	<ul style="list-style-type: none"> • Observe a cognitive assessment such as the WAIS. Discuss the potential uses and misuses of formal assessments of learning functioning in clinical practice. • In clinical supervision, discuss the use of clinical rating scales in the assessment of dementia in people with learning disability. • Assess dementia in a patient with learning disability and use an appropriate rating scale to supplement your assessment. • Complete an eligibility assessment with another professional and learn how to decide whether a patient meets the eligibility criteria for the service.
<p>Demonstrate skills in the assessment and management of acute mental health crises in patients with learning disability.</p>	<ul style="list-style-type: none"> • Conduct an emergency psychiatric assessment in a patient with learning disability experiencing an acute mental health crisis presenting to hospital. • Provide psychiatric evidence at a community Care and Treatment Review with a view to preventing an inappropriate hospital admission. • Carry out urgent psychiatric assessments in the community when patients with learning disability present in crisis.

	<ul style="list-style-type: none"> • Conduct a psychiatric assessment at the Place of Safety under Section 136 of the Mental Health Act. • Provide expert advice to staff at the accident and emergency department when a patient with learning disability presents in crisis. • Work jointly with the mainstream home treatment team to develop a safe and effective crisis management plan for a patient with learning disability.
Demonstrate specialist skills in the assessment and management of cognitive impairment in older patients with learning disability.	<ul style="list-style-type: none"> • Complete a specialist assessment of dementia in a patient with learning disability. • Develop competence in the use of specialist assessment tools used in the diagnosis of dementia in people with learning disability. • Provide clear information to the patient and their carers about the diagnosis of dementia including management and prognosis. • Develop competence in the use of medication to treat dementia in patients with learning disability. • Attend the dementia care pathway meetings held within the team. • Learn about the roles of the other health and social care professionals in the assessment and management of cognitive impairment in older patients with learning disability.
Demonstrate an understanding of the assessment and treatment of epilepsy in patients with learning disability.	<ul style="list-style-type: none"> • Attend the local neurology outpatient clinic as a protected development session for one year. • Consider epilepsy as a possible differential diagnosis during an assessment of any new change in behaviour. • Learn about potential drug interactions when prescribing psychiatric medication for patients who also have epilepsy.

	<ul style="list-style-type: none"> • Attend the epilepsy refresher course at the local acute hospital. • Liaise effectively with colleagues in neurology services when conducting psychiatric assessments in patients with learning disability and epilepsy. • Conduct a psychiatric assessment in a patient with learning disability presenting with non-epileptic seizures.
Demonstrate advanced knowledge of psychological and psychotherapeutic treatments in the management of mental and behaviour disorders in adults with learning disability.	<ul style="list-style-type: none"> • Learn how psychological interventions can be adapted to meet the needs of people with learning disability. • Deliver an appropriate psychological intervention for a patient with learning disability and anxiety or depression under supervision from the lead psychologist. • Co – facilitate a group for patients with learning disability focused on improving self-confidence. • Develop advanced knowledge of the evidence base for psychological interventions for challenging behaviour.
Understand the range of community and inpatient treatment options for mental and behaviour disorders in patients with learning disability.	<ul style="list-style-type: none"> • Learn about the history of service development for people with learning disability and present this information as a teaching session to medical students. • Develop an understanding of the role of mainstream and specialist inpatient beds for people with learning disability. Discuss this topic at clinical supervision. • Work jointly with mainstream community mental health services to prevent inappropriate admissions to hospital. • Visit local respite services and learn about how to access these services in an emergency. • Develop skills in providing expert advice and support to mainstream services when patients with learning disability are admitted or present in crisis.

	<ul style="list-style-type: none"> • Attend an inpatient Care and Treatment review (CTR) and discuss the options to facilitate discharge from hospital to the community. • Assess an inpatient with learning disability in forensic services and learn about the potential options to step down from secure services.
Work effectively across professional interfaces by collaborating and liaising with other medical and psychiatric specialities to support provision of holistic care and treatment for your patients with learning disability.	<ul style="list-style-type: none"> • Complete joint assessments with other health and social care professionals during your placement. • Support and advise mainstream crisis and inpatient services when a patient with learning disability needs to use these services. • Liaise effectively with colleagues in primary and secondary care to ensure physical health needs are met. • Deliver a teaching session to GPs focused on the presentation and management of mental illness in people with learning disability. • Work jointly with the community forensic service to support patients with learning disability who are at risk of offending.
Demonstrate proficiency in prescribing safely and effectively for patients with learning disability in routine and urgent settings, considering the research evidence base, prescribing guidelines, individual patient factors and the views of patients and their support networks.	<ul style="list-style-type: none"> • Complete a quality improvement project focused on reducing inappropriate use of anti-psychotic medication for challenging behaviour. • Read and discuss in clinical supervision the evidence-based guidelines for prescribing psychiatric medication for patients with learning disability. • Demonstrate safe and effective prescribing practice in your clinical work. • Use accessible information resources to support your prescribing practice.

<p>Demonstrate an understanding of how physical treatments can be used for the treatment of mental disorders and apply this under supervision.</p>	<ul style="list-style-type: none"> • Visit the ECT suite and consider how this treatment option might be offered to patients with learning disability. • Support a patient with learning disability and a severe depressive episode to have ECT.
<p>Work with others using a person-centred holistic approach to safely manage behavioural challenges and to support behavioural and environmental change.</p>	<ul style="list-style-type: none"> • Attend the challenging behaviour care pathway meetings and take part in joint assessments of patients with challenging behaviour as part of this work. • Jointly complete an assessment of challenging behaviour with the occupational therapist, focusing on the impact of environmental factors. • Under supervision of the lead psychologist, complete a positive behaviour support plan for a patient with learning disability who presents with challenging behaviour.
<p>Evaluate the outcome of interventions and treatments in patients with learning disability.</p>	<ul style="list-style-type: none"> • Use the HONOS – LD as a tool to evaluate the outcome of clinical interventions. • When prescribing a new treatment, consider how you will evaluate its effectiveness in clinical practice.
<p>Work across a variety of service settings including care homes, supported living placements, day services, educational facilities and hospitals.</p>	<ul style="list-style-type: none"> • During your placement, visit a wide range of community placements and facilities. Reflect on how these services meet the needs of your patients with learning disability. • Conduct psychiatric assessments in the patient's home environment. Consider how factors such as staffing levels, the physical environment and opportunities for meaningful activities can impact on a person's mental well-being. • Visit the local day centre for people with learning disability and consider the pros and cons of this service in clinical supervision. • When your patient is admitted to hospital, arrange to visit them in hospital and provide support and advice to staff on what reasonable adjustments may be needed.

HLO 2.3: Apply advanced management skills within Learning (Intellectual) disability psychiatry in situations of uncertainty, conflict and complexity across a wide range of clinical and non-clinical contexts.

High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities
2.3 Complexity & Uncertainty	Demonstrate an understanding of unconscious processes including transference, countertransference, projection and the experience of splitting, and the impact of these on professional relationships.	<ul style="list-style-type: none"> • Chair the integrated referrals meeting and provide clinical leadership ensuring patients receive the intervention which is most appropriate to their needs. • Provide psychiatric expertise to the At Risk of Admission weekly forum with commissioners. • Participate in the multidisciplinary assessment and formulation of challenging behaviour. Listen respectfully to the different perspectives of other professionals, families, and service users. • Attend an inpatient Care and Treatment Review and contribute to creative solutions focused on safe discharge from hospital. • Attend a Care Programme Approach meeting at the medium secure inpatient unit for a patient with learning disability from your catchment area.
	Demonstrate proficiency in recognising and managing clinical uncertainty, ambiguity, divergent views and complex co-morbidities and associated risks relating to those with learning disability.	<ul style="list-style-type: none"> • Chair the integrated referrals meeting and provide clinical leadership ensuring patients receive the intervention which is most appropriate to their needs. • Provide psychiatric expertise to the At Risk of Admission weekly forum with commissioners. • Participate in the multidisciplinary assessment and formulation of challenging behaviour. • Listen respectfully to the different perspectives of other professionals, families, and service users.

	<ul style="list-style-type: none"> • Attend an inpatient Care and Treatment Review and contribute to creative solutions focused on safe discharge from hospital. • Attend a Care Programme Approach meeting at the medium secure inpatient unit for a patient with learning disability from your catchment area.
Consciously vary from established care pathways where clinically indicated and justify these decisions as needed.	<ul style="list-style-type: none"> • Develop an understanding of the importance and limitations of evidence-based guidelines. Read the NICE guidelines (NG54) - Mental health problems in people with learning disabilities. • There are times when a patient's individual needs do not neatly fit in established care pathways. Develop skills in adapting interventions to the needs of patients and advocating for alternative approaches when required. • When prescribing medication, carefully document the treatment rationale including what symptoms/signs are being observed and expected to improve with treatment.
Understand and work within the limits of your clinical capabilities, seeking timely support and consultation when needed.	<ul style="list-style-type: none"> • Attend weekly clinical supervision and always seek advice when needed. • Liaise effectively with the multidisciplinary team and be proactive about asking for help when needed. • Discuss complex cases in clinical supervision and reach an agreement on how to manage difficult problems. • At the academic programme, present a complex case to senior colleagues and seek advice on areas of concern. • Present a clinical case at the unmanaged risk forum.
Demonstrate an understanding of individual variation and the impact of social, cultural, spiritual and religious factors, including effects of deprivation, discrimination and racism.	<ul style="list-style-type: none"> • When taking a psychiatric history, enquire about the person's cultural and religious background and include a detailed social history. Consider how these factors impact on the presentation and understanding of mental illness.

	<ul style="list-style-type: none"> • Jointly facilitate the Health and Wellbeing group for service users, with Community Learning Disability Nursing. • Complete a survey of the ethnicity of new referrals to the learning disability service and compare the findings to local population data.
Work with others to promote therapeutic optimism and hope in the management and care of patients with learning disability.	<ul style="list-style-type: none"> • Demonstrate a positive attitude at work and provide clinical leadership in complex cases where the team may feel stuck or pessimistic about the possibility of change. • Read about Carol Dweck's research into the 'growth mindset' and consider how this might be relevant to your attitude at work and your ability to effect change.
Manage divergent views about patient care leading to appropriate clinical interventions.	<ul style="list-style-type: none"> • Listen to and respect the differing views and perspectives of service users, carers, and other professionals. • Encourage a collaborative approach to reach a consensus which best meets the individual needs of the patient. • Learn how to disagree respectfully when there are divergent views. Understand that there may be a range of valid opinions. • Seek advice and supervision when you are concerned that the wrong decision is being made. • Present a complex clinical case at the monthly academic programme and facilitate an interactive discussion on diagnosis and management.

HLO 3.1: Apply advanced knowledge of relevant legislative frameworks across the UK to safeguard patients and safely manage risk within Learning (Intellectual) disability psychiatry.

High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities
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3.1 Knowledge of legal and organisational frameworks in your UK jurisdiction	Apply the current legislation governing the care and treatment of people with learning disability and mental disorders in a variety of settings, including the use of emergency powers and compulsory treatment.	<ul style="list-style-type: none"> • Complete the Trust training on the relevant Mental Health and Mental Capacity /Adults with Incapacity legislation in your locality. • Take opportunities to do Mental Health Act / Order assessments; complete case-based discussions on these, including with Approved Mental Health Professionals (AMHPs.). • Conduct a mental capacity / incapacity assessment for your patient and discuss this in supervision. • Discuss report writing with your clinical /psychiatric supervisor. • Read relevant texts such as Keith Rix's book 'Expert psychiatric evidence'. • Prepare relevant mental health / mental capacity/incapacity reports, under supervision.
	Apply the principles of least restrictive practice and human rights, when considering the application of legal powers across different settings.	<ul style="list-style-type: none"> • Discuss the experience of your patients residing in different settings with your psychiatric supervisor and conduct reflections. • If you work in England or Wales, read: Working with the Mental Health Act and Working with the Mental Capacity Act (Aasya Mughal) • Keep up to date with case law and discuss your learning in supervision.
	Demonstrate an understanding of complex ethical issues relevant to the care of people with learning disability.	<ul style="list-style-type: none"> • Reflect and discuss ethical issues in LD in psychiatric supervision. • Present a case involving an ethical dilemma to the LD academic meeting.
	Give testimony at appropriately convened settings to review the legal status of a patient.	<ul style="list-style-type: none"> • Read guidance on mental health review tribunals (MHRTs) from RCPsych • Undertake expert witness training

		<ul style="list-style-type: none"> • Provide reports and give evidence under supervision at MHRTs and conduct reflections on these.
	Meet the requirements to apply for relevant statutory approval where appropriate.	<ul style="list-style-type: none"> • Attend a Responsible Clinician / Approved Clinician (RC/AC) course.
HLO 3.2: Work effectively within the structure and organisation of the NHS, and the wider health and social care landscape.		
High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities
3.2 Working within NHS and organisational structures	Demonstrate understanding of the national health priorities for people with learning disability in your UK jurisdiction, including the rationale behind annual health checks and associated health plans.	<ul style="list-style-type: none"> • Agree a reading list of relevant reports including 'Death by indifference', and 'Healthcare for all', provided by your psychiatric supervisor and discuss these in supervision. • Research your Trust's organisational structure through its website and discuss your learning with the clinical director. • Shadow clinical managers and attend governance meetings. • Engage with primary healthcare liaison nurses and acute liaison nurses to understand their role in the wider system and conduct reflection on the challenges of this.
HLO 4: Demonstrate leadership and advocacy in mental and physical health promotion and illness prevention for patients within Learning (Intellectual) disability psychiatry and the wider community.		
High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities
4.1 Health promotion and	Apply an understanding of the range of health inequalities faced by people with learning	<ul style="list-style-type: none"> • Read and present an update of the national mortality review report for the jurisdiction and request a WPBA to support this

illness prevention in community settings	disability and the multiple factors that contribute to premature mortality.	<ul style="list-style-type: none"> • Participate in the mortality review process with a local investigator • Understand mortality in the area in which you train, demonstrating an understanding of the outcomes in your area compared with national data by writing a reflective piece • Complete a Sudden Unexpected Death in Epilepsy (SUDEP) checklist on a patient with epilepsy and identify the risks and how these may be mitigated
	Demonstrate an understanding of public health as it applies to people with learning disability, including mortality and morbidity data and how this relates to health disparity.	<ul style="list-style-type: none"> • Read through the Joint Strategic Needs Assessment for people with LD done by the Public Health team in your area – write a reflective piece • Complete an audit on a health pathway in your area – for example, Down Syndrome and dementia, understand the age at which local patients are seen and diagnosed with dementia • Review the literature on Annual Health Checks and understand how these may influence mortality and morbidity – write a reflective piece/present at academic meeting • Review the annual health check data with local commissioners to understand the uptake of these in the area • Understand the local data for age at death of people with ID compared to the general population locally – present this to the local academic meeting
	Work with primary care, secondary care and statutory services as required to support your patients with learning disability in having their health needs met.	<ul style="list-style-type: none"> • Complete an Annual Health Check with colleagues in primary care – follow a patient in your care through this process • Check whether the local hospital has LD liaison nurses, if so, shadow them for a day, if not, ask why not? • Follow a patient through an admission to general hospital, check whether they have a hospital passport, whether reasonable adjustments have been made and whether there is

		<p>anything that may have improved their stay or their health outcome – write a reflective piece</p> <ul style="list-style-type: none"> • Attend the International League Against Epilepsy (ILAE) teaching weekend for trainees.
	Promote a healthy lifestyle in patients with learning disability and an understanding of the interrelationship between the body and the mind including the management of sleep, mental and physical disorders.	<ul style="list-style-type: none"> • Ask about lifestyle choices, including alcohol, cigarettes, weight, sleep and exercise and document these in notes and letters • Offer advice on alcohol, cigarettes, weight, sleep and exercise to patients seen in outpatients – audit this or complete a WPBA/receive feedback on this in clinic • Audit the weight and exercise routines of people attending an outpatient clinic • Demonstrate a knowledge of the inter-relationship of physical and mental health by ensuring that the advice offered to patients is appropriate to them and their carers – audit the use of easy read documents shared with patients
	Develop an understanding of the local data and how this compares with regional/national data.	<ul style="list-style-type: none"> • Read the annual mortality review reports for the area in which you work, compare these with national data presented in the annual reviews – present at academic meeting/write a reflective piece
	Demonstrate knowledge of the screening required in your patients with a genetic cause of their learning disability with appropriate onward referral/advice.	<ul style="list-style-type: none"> • Demonstrate knowledge of the genetic causes of LD and how these may present in clinical situations – present to MDT colleagues/academic programme • Ensure that you are aware of how to request genetic testing in the area and, if appropriate, make a referral to the local geneticist • Consider an audit of the letters written to primary care colleagues and check whether the degree of LD and the cause of LD are communicated appropriately

	Demonstrate an understanding of the physical health conditions associated with the most significant causes of morbidity and mortality in people with learning disability and engage with the local mortality review process for people with learning disability.	<ul style="list-style-type: none"> • Complete the training associated with Mortality Reviews and complete a review • If possible, attend a multi-agency review of a patient death • Participate in a structured judgement review of a patient death • Complete an audit of the causes of death in people with LD in the local area over a defined period and compare this with published data on cause of death for the general population
	Demonstrate advanced understanding of the concept of diagnostic overshadowing and how this affects people with learning disability and the care they receive, including challenging when this occurs in both primary and secondary care.	<ul style="list-style-type: none"> • Demonstrate an understanding of this by completing an assessment of a patient with feedback or presenting a case at the local academic programme • Unpick a clinical situation where overshadowing has occurred and write to the appropriate clinicians stating your concerns – complete a case-based discussion
	Demonstrate advocacy for your patients and support other health professionals to make reasonable adjustments.	<ul style="list-style-type: none"> • Demonstrate an understanding of reasonable adjustments by offering advice to other clinicians about how this may be achieved through teaching, letter-writing or reflective practice • Flag where reasonable adjustments may help – for example, complete a hospital passport with a patient
HLO 5: Demonstrate effective teamworking and leadership skills to work constructively and collaboratively within the complex health and social care systems that support people with mental disorder.		
High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities
5.1 Teamworking	Recognise the strengths and weaknesses within a team and demonstrate how to work with these, using emotional intelligence and maintaining an awareness of one's own cognitive biases.	<ul style="list-style-type: none"> • Discuss your observations on interactions within the team in psychiatric supervision and write a reflection on these. • Read about and reflect on how emotional states may contribute to decision-making, particularly in patients with

		<p>significant historical forensic risks which arouse a strong moral response in us (e.g. sexual offending history)</p> <ul style="list-style-type: none"> • Participate in discussions within the team to understand/map how decisions are taken in risky situations.
	<p>Work in collaboration with patients with learning disability, their families and carers of all ages, and the multi-disciplinary team.</p>	<ul style="list-style-type: none"> • Complete observed face to face clinical interactions with patients, their families and carers of all ages and request WBPA on these. • Complete assessments/reviews with another professional in the multidisciplinary team or social care and obtain feedback • Jointly assess a patient with learning disability and challenging behaviour with the clinical psychologist with a view to developing a positive behaviour support plan. • Jointly complete an assessment of challenging behaviour with the occupational therapist, focusing on the impact of environmental factors. • Co – facilitate a group for patients with learning disability with another member of the MDT • Obtain multi-source feedback from a range of team members. • Carry out co-production and mapping of needs, using service user’s perspectives.
	<p>Appraise, question and challenge the performance of other team members when standards appear to be compromised, and escalate concerns appropriately.</p>	<ul style="list-style-type: none"> • Reflect on the internal conflict of interests in teams, such as the role of community intensive support teams and inpatient admission avoidance in risky situations. Discuss this in supervision. • Negotiate with social care to provide comprehensive care for your patients - evidenced by attendance / participation in CTR, MAPPA interagency meetings • Participate in interagency meetings

		<ul style="list-style-type: none"> • Reflect on how preconceived ideas of ideas of 'disability' in learning disability overrides impairment-centric approaches.
5.2 Leadership	Understand the importance of leadership and the role of a consultant psychiatrist in learning disability, in the context of team and multiagency working.	<ul style="list-style-type: none"> • Complete consultant-led tasks under supervision of the consultant such as chairing meetings, contributing to an 'At Risk of Admission' forum with commissioners and reflect on your experience of these • Shadow consultants at management meetings and discuss your observations with them. • Attend multi-agency meetings. • Take situational leadership opportunities, e.g.- step in if the consultant psychiatrist is absent and demonstrate a solution-centric approach.
	Develop and apply your own advanced leadership skills in a variety of clinical and non-clinical settings.	<ul style="list-style-type: none"> • Obtain multi-source feedback • Undertake observed interactions, e.g. with patients, carers, colleagues, wider Trust roles and stakeholders and request WBPA on these. • Undertake a leadership development programme. • Take on a leadership role – e.g. trainee rep at Trust Medical Committee.
	Demonstrate inclusive leadership style and awareness of the impact of hierarchy and power within relationships with patients and colleagues.	
	Demonstrate an understanding of how your own advanced leadership skills and behaviours impact on others and adapt your approach where appropriate to meet the needs of the team.	<ul style="list-style-type: none"> • Undertake a leadership development programme. • Lead the team referrals meeting, obtain a WBPA on your chairing and reflect on this in supervision. • Discuss and reflect on challenging encounters with colleagues in supervision.
	Lead, support and supervise others in both clinical and non-clinical settings.	<ul style="list-style-type: none"> • Provide clinical supervision for a CT colleague in the department and when on call.

		<ul style="list-style-type: none"> • Plan and provide supervision for a group of CTs on LD related calls or attendances they have had whilst on call. • Complete WPBAs for more junior trainees after they have delivered some teaching / presentation. • Attend and participate in postgraduate education / academic meetings. • Attend training or a workshop on providing effective supervision.
	Understand the principles of mentoring and its role in career development and apply this knowledge in your practice.	<ul style="list-style-type: none"> • Attend a course in Coaching Conversations and apply this to other psychiatric trainees. • Provide mentorship and guidance to core trainees. • Provide guidance to medical students by involvement in medical student teaching on ethical dilemmas. • Understand the role of pastoral care and wellbeing conversations in developing a well-rounded medical career and support other junior colleagues. • Gain feedback in the form of multi-source feedback and from mentees
	Demonstrate an understanding of the principles underpinning the management and delivery of services for people with learning disability.	<ul style="list-style-type: none"> • Read and discuss the evidence-based guidelines for prescribing psychiatric medication for patients with learning disability in clinical supervision. • Understand the organisational structure through website. Discuss with supervisors and clinical directors. • Demonstrate knowledge of relevant organisational policies concerning restrictive interventions e.g. seclusion policy by referring to these in the context of providing care to your patients. • Undertake / facilitate social prescribing for your patients.

		<ul style="list-style-type: none"> • Through advocacy for your patients, support factors enhancing resilience and promoting the sense of identity, including the assertion of human rights, in people living with learning disability
	Manage and lead on improving and adapting the service in which you work, including managing referrals and delegating work appropriately.	<ul style="list-style-type: none"> • Chair clinical governance/MDT meetings with supervision appropriate to your stage of training and request WPBA for your chairing • Attend the LD Service patient and carer feedback forum and share a summary of your findings with colleagues in the department. Develop and support implementation of an action plan from these meetings. • Engage in deanery/GMC/regulator visits • Submit appropriate risk reports for your Trust and encourage and support colleagues to do the same • Participate in the dementia care pathway review stream as medical representative.
HLO 6: Identify, promote and lead activity to improve the safety and quality of patient care and clinical outcomes of a person with mental disorder.		
High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities
6.1 Patient safety	Understand and apply the principles of clinical governance, taking into account the impact of human factors and team dynamics, to assure patient safety and quality of clinical care.	<ul style="list-style-type: none"> • Attend clinical governance meetings including adverse event reviews and reflect in supervision on your experiences at these • Chair clinical governance/MDT meetings with supervision appropriate to your stage of training • Participate in Balint, peer-group psychotherapy or reflective practice groups to explore human factors and team dynamics

		<ul style="list-style-type: none"> • Reflect on delivering high standards of care, transparent accountability and candour when things go wrong and a constant drive for improvement • Read and reflect on adverse event reviews or reports from statutory bodies – these need not be local to you. • Participation in/attendance at external bodies such as Multi-Agency Public Protection Arrangements, Child/Adult Protection Case Conferences. • Multi-source feedback demonstrating awareness of own limitations, ability to recognise the value and contributions of others. • Participate in MDT reflective practice group / similar structures which promote positive healthcare cultures or help develop these where they do not exist. • Attend a leadership development programme e.g. the <u>Leadership Academy's Edward Jenner Programme</u> which is free for NHS staff. •
	<p>Apply understanding of the serious incident review process taking appropriate action where required.</p>	<ul style="list-style-type: none"> • Discuss the SI process in supervision and reflect on its potential impacts on clinicians. • Produce a written reflection – appropriately anonymised. • Support colleagues during serious incident reviews • Attend the clinical governance committee which reviews serious incidents. • Reflect on an adverse or serious event which you have been personally involved in, or reflect on how you might have responded to such an event which has occurred locally or nationally and discuss this in psychiatric supervision. • Participate in local processes for managing significant incidents / concerns, e.g. submit a DATIX report /make an adult or child protection referral/give a statement to an adverse event review.

		<ul style="list-style-type: none"> Engage in timely discussions in supervision about any serious incident you may be involved in.
	Demonstrate knowledge of risk management issues for services for people with learning disability, including risks to patients, families, carers of all ages, staff and members of the public.	<ul style="list-style-type: none"> Create case-logs and reflections relevant to managing people with learning disability who are at risk or who pose a risk to others. Engage in relevant case-based discussions focussing on LD cases involving a risk management component. Participate in safeguarding processes for your patients. Complete training in structured risk assessments which are validated for use in people with learning disability (e.g., HCR-20, RSVP, DRAMS) Complete a structured risk assessment – with appropriate WPBA to confirm. Evidence of formulation of appropriate strategies to mitigate identified risks – reflection/supervision/CBD etc. Engagement with Multi-Agency Public Protection Arrangements (MAPPA) processes, liaison with parties such as the Police. Journal club presentations on risk assessment in learning disabilities.
	Understand the role of environmental risk assessment in learning disability settings and apply the principles of this to the settings in which you work.	<ul style="list-style-type: none"> Reflections on significant adverse events which have occurred as a result of environmental risks to people with learning disability – exposure, drowning etc. Environmental risk is particularly relevant in people with LD who also have epilepsy - evidence of management of such risks from case logs or WPBA. Evidence of consideration of environmental risks – in WPBAs (particularly ACE/Mini-ACE or DONCS for MDT/Adult protection

		<p>discussions) such as highly destructive behaviour, hygiene issues, absconding risks.</p> <ul style="list-style-type: none"> • Evidence of integration of sensory profiles and engagement with occupational therapy into formulation.
	Demonstrate knowledge of the relevant policies and procedures for patient safety in your organisation and how to escalate concerns if these arise.	<ul style="list-style-type: none"> • Participate in team discussions on risk and complexity. Reflect on the role of the psychiatrist in these situations. • Familiarise yourself with the 'Early Indicators of Concern' process in the LD Service, contributing to the discussions where appropriate. • Discuss safeguarding thresholds in supervision and participate in team discussions / decision-making around safeguarding concerns, seeking support from your supervisor as appropriate.
6.2 Quality improvement	Demonstrate knowledge of a range of quality improvement methodologies for developing creative solutions to improve services and apply this knowledge through participation and leadership of activity in your service.	<ul style="list-style-type: none"> • Work with and supervise a junior trainee to undertake an audit / quality improvement project. • Explore qualitative as well as quantitative approaches to quality improvement and discuss these in supervision. • Work with non-psychiatric or non-medical members of the MDT on a QI project. • Produce a report of your QI activity. • Local or national publication of your findings / presentation at a conference.
	Demonstrate knowledge of mechanisms for obtaining feedback from patients, the public, staff and other interested groups, and utilise the feedback obtained to implement/manage change.	<ul style="list-style-type: none"> • Engage where appropriate with your local feedback/complaints department, independent advocacy, carers, third sector organisations and patients directly. • Make a written entry in your portfolio about mechanisms like Patient Liaison / Complaints Services, Independent Advocacy Services etc. • Reflect on positive or negative feedback you may receive in practice, including through multi-source feedback.

		<ul style="list-style-type: none"> • Take part in prospective / retrospective efforts to obtain feedback about your service, for example an analysis of data from the 'Friends and Family Test'.
	Understand the role of the 'expert by experience' in improving patient care and support patients with learning disability and their families and carers of all ages to undertake this role.	<ul style="list-style-type: none"> • Reflect on cases where involvement of experts by experience has improved patient outcomes • WPBAs where the primary information source has been collateral history from patient families and carers • WPBAs and other portfolio entries showing engagement with Care and Treatment Reviews (England), Care Programme Approach and other mechanisms for improving patient care by involving patients, families and carers more closely in patient care and treatment.
	Demonstrate a clear understanding of local complaints procedures and participate in handling complaints made about services.	<ul style="list-style-type: none"> • Familiarise yourself with local complaints procedures and discuss in supervision how you can support people with learning disability to access these if needed. • Reflect on and respond to any complaints received, seeking support and advice from your supervisor as you do so. • Support the investigation of a complaint about the service.
	Participate in and lead on clinical governance activities, risk management and audit in order to improve the quality of the service.	<ul style="list-style-type: none"> • Join your local audit committee • Register your audit/QIP with your local audit committee and feed back on this • Engage in deanery/GMC/regulator visits • Submit appropriate risk reports (e.g., DATIX) and encourage and support colleagues to do the same.
	Apply audit principles, relevant clinical guidelines and integrated care pathways to your own work and team practice.	<ul style="list-style-type: none"> • Gain multi-source feedback demonstrating that colleagues have confidence in your ability to formulate appropriate management plans

		<ul style="list-style-type: none"> • WPBAs demonstrating your application of clinical guidelines and integrated care pathways to patient care and management plans • Engage in care pathway discussions in the clinical team meeting.
<p>HLO 7: Lead on the provision of psychiatric assessment and treatment of those who are identified as being vulnerable within Learning (intellectual) disability psychiatry.</p> <p>Demonstrate advocacy, leadership and collaborative working around vulnerability and safeguarding in patients, their families and their wider community.</p>		
High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities
7.1 Safeguarding	Recognise any health concerns, emotional and economic pressures impacting on carers of all ages, which contribute to vulnerability and safeguarding concerns in your patients with learning disability.	<ul style="list-style-type: none"> • Enquire into the health and support needs of carers, as part of your clinical assessment of the patient's social circumstance. • Make relevant referrals to statutory organisations for carer support as required, e.g. social care. • Signpost to relevant third sector resources and organisations offering carer support.
	Work within legislative frameworks and local processes to anticipate and report safeguarding concerns, providing leadership when necessary.	<ul style="list-style-type: none"> • Be familiar with local safeguarding processes, initiating these as required and challenging others when concerns are not being addressed. • Participate in safeguarding meetings for your patients, providing advice on mental health and behavioural needs in this context. • Undertake joint working with members of the LD MDT and with social care for your patients with safeguarding concerns, making onward referrals as needed.

		<ul style="list-style-type: none"> • Discuss cases with potential safeguarding implications in clinical / psychiatric supervision and act on the advice provided by your supervisor.
	Understand the role and responsibilities of psychiatric services in safeguarding people with learning disability and their support networks.	<ul style="list-style-type: none"> • Demonstrate knowledge of relevant organisational policies concerning safeguarding procedures and apply these in the context of providing care to your patients. • Undertake information sharing and discussion with relevant professionals as part of safeguarding processes, being mindful of information governance and capacity/best interests. • Develop links with your organisational safeguarding team and seek advice and input from them to support patient care as necessary.
	Demonstrate an understanding around the use of safe, approved restrictive interventions in psychiatric services and the guidance surrounding this and work with others to minimise the use of these in clinical practice.	<ul style="list-style-type: none"> • Demonstrate knowledge of relevant organisational policies concerning restrictive interventions, e.g. seclusion policy and apply these in the context of providing care to your patients. • Undertake seclusion reviews, discuss and document your findings and rationale for the outcome. • Demonstrate consideration of the least restrictive principle in your clinical practice, including in relation to the use of medication.
	Recognise signs of abuse and trauma in people with learning disability, their families, carers of all ages and the wider community.	<ul style="list-style-type: none"> • In clinical / psychiatric supervision discuss the varying presentations of abuse and trauma in people with LD, including their impact on mental health and behaviour. • Demonstrate sensitive enquiry into experience of trauma and abuse during history taking and incorporate such experiences in your formulation, making onward referrals for support and therapeutic input as needed. • Demonstrate knowledge of local support services for people with LD and for carers who have experienced abuse and trauma and refer/signpost as indicated.

	<p>Demonstrate applied knowledge of risk management, including risks to patients with learning disability, carers of all ages, staff and members of the public.</p>	<ul style="list-style-type: none"> • Participate in risk management meetings for your patients, including decision making around mental health and behavioural needs. • Use psychiatric supervision to reflect on the complexity of providing support to individuals with LD whose behaviour places them both at risk from others as well as them being a risk to others. • Discuss the principles of positive risk-taking in psychiatric supervision and demonstrate how these can be applied in your clinical practice.
	<p>Assess risk, capacity to consent and the need for detention in complex cases with learning disability.</p>	<ul style="list-style-type: none"> • Complete risk assessment documentation for your patients, including providing a clear management plan. • Undertake capacity assessments for people with LD and a range of additional needs, for example autism and dementia. • Demonstrate knowledge of the relevant mental health and mental capacity legislation in your jurisdiction and apply this to patients with LD.
	<p>Demonstrate an understanding of the issues around confidentiality in learning disability practice.</p>	<ul style="list-style-type: none"> • Apply capacity and best interest principles when considering information sharing in your clinical practice. • Demonstrate an understanding of the governance processes surrounding information sharing in clinical practice in both your organisation and jurisdiction and discuss clinical dilemmas arising from this in clinical / psychiatric supervision. • Work with other organisations including health, social care, education and the criminal justice system, to ensure good communication and appropriate information sharing to support the management of your patients with LD.
	<p>Include the views and voice of the person with learning disability when working within safeguarding processes, mindful of capacity.</p>	<ul style="list-style-type: none"> • Demonstrate an understanding of advocacy processes for people with LD in your locality, including reasons and mechanisms for referral.

		<ul style="list-style-type: none"> • Identify any need for advocacy support in your patients and refer / support others to refer as necessary. • Demonstrate 'keeping the patient in the centre' in your approach to safeguarding processes, respectfully challenging other professionals in this regard where necessary.
HLO 8.1: Promote and lead on the provision of effective education and training in clinical, academic and relevant multi-disciplinary settings.		
High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities
8.1 Education & Training	Provide education and training to medical, multi-disciplinary and multi-agency colleagues including effective planning, delivery techniques and feedback using technology as appropriate.	<ul style="list-style-type: none"> • Attend a Train the Trainer or similar course. • Attend a workshop on teaching preparation and skills. • Plan and deliver remote video-based / face-to-face teaching to medication students / core trainees / other CLDT staff / social care staff. • Attend and participate in postgraduate education / academic meetings. • Complete WPBAs for more junior trainees after they have delivered some teaching / presentation. • Participate in / take a lead role in, a MRCPsych / Core Psychiatry Course teaching module or session. • Participate in / take a lead role in CASC preparation sessions including giving feedback. • Plan and deliver induction teaching on mental health in LD for CT or FY doctors placed in Psychiatry of Learning Disabilities services.

		<ul style="list-style-type: none"> Plan and deliver some teaching to other Community Learning Disability Team (CLDT) professionals on psychotropic medications / psychiatric risk assessment etc. Plan and deliver some teaching or training on positive behavioural support to carers. Plan and deliver some teaching or training on how to work effectively with people with LD and their carers in an acute healthcare setting to a ward or to FYs at an acute hospital, alone or with a colleague. Plan and teach on the medical student ID programme and reflect on the feedback.
	<p>Demonstrate knowledge of the process of continuing professional development and its role in maintaining practice and supporting revalidation.</p>	<ul style="list-style-type: none"> Read, and reflect on what was new to you, in the RCPsych Continuing professional development Guidance for psychiatrists OP98 Familiarise yourself with the RCPsych guidance on Revalidation and present this or summarise this for ST6 peers
	<p>Apply the principles of co-production in teaching and training with people with learning disability and their families/carers.</p>	<ul style="list-style-type: none"> Attend and reflect on the value of a co-produced training / workshop / lecture that you have attended. Attend an LD service user / carer forum, e.g. speaking up group, people first group etc. in order to hear what issues are important from their perspective. Produce an accessible patient information resource and revise this in response to service user and patient feedback. Co-produce an accessible patient information leaflet and evaluate its effectiveness. Co-plan and co-produce some teaching or workshop or training resource for professionals or carers.

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HLO 8.2: Demonstrate effective supervision and mentoring skills as essential aspects of education to promote safe and effective learning environments.

High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities
8.2 Supervision	Apply knowledge of the principles of clinical and psychiatric supervision, providing safe and effective clinical supervision in both emergency and non-emergency situations, in a timely manner.	<ul style="list-style-type: none"> • Provide clinical supervision for a CT colleague in the department and when on call. • Plan and provide supervision for a group of CTs on LD related calls or attendances they have had whilst on call. • Attend training or a workshop on providing effective supervision.
	Actively participate in clinical, psychiatric and educational supervision.	<ul style="list-style-type: none"> • Reliably attend and actively participate in psychiatric and educational supervision, as per your educational agreement. • Keep your training portfolio up to date without need for prompting and reminding.
HLO 9: Apply an up-to-date knowledge of research methodology, critical appraisal and best practice guidance to clinical practice, following ethical and good governance principles.		
High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities
9.1 Undertaking research and critical appraisal	Critically evaluate data, papers, reviews, and meta-analyses and implement findings in daily clinical practice.	<ul style="list-style-type: none"> • Read journals and keep up to date with latest research areas and findings • Attend and contribute to locality teaching and the LD academic meeting. • Present a critical appraisal of a research paper in LD psychiatry • Review NICE Guidance on mental health and reflect on how it applies to LD patient group.

		<ul style="list-style-type: none"> • Demonstrate knowledge of ethical frameworks and research methodologies when carrying out or appraising research.
	Translate research into local clinical practice and disseminate critical appraisal findings to wider communities.	<ul style="list-style-type: none"> • Formulate evidence-based management plans with patients, family, and carers • Facilitate pharmacological treatment when appropriate along with other treatment modalities. • Discuss the importance of patient and public Involvement in research. • Participate in the Dementia Care Pathway review process, including reviewing and summarising the latest national guidance.
	Apply knowledge of up-to-date appropriate statistical methods.	<ul style="list-style-type: none"> • Understand the applicability of the research findings to a particular patient /or group. • Arrange a teaching session on understanding and using statistics in critical appraisal for your peers.
	Demonstrate proficiency in the use of objective evidence-based clinical assessment instruments.	<ul style="list-style-type: none"> • Understand and be familiar with the usual outcome measures used for assessments. E.g. HoNOS- ID, ADOS, ADI-R, etc. including their applications and limitations. • Attend a training course on HCR-20, formulate risk assessments using this instrument.
	Work within ethical frameworks when carrying out or appraising research.	<ul style="list-style-type: none"> • Attend a local ethical advisory committee • Attend a local research approval meeting which discuss the issues involved. • Apply for a project for approval, filling in the appropriate forms. • Understand the barriers for research for this patient group. • Understand the pro and cons of applicability of research findings from a non-disabled patient group.

		<ul style="list-style-type: none"> • Understand the importance of patient and public involvement in research • Understanding / advocating meaningful engagement of people with learning disability in developing research or co-production in research • Discuss the differences between research, audit, and quality improvement and how these approaches can complement each other.
	Apply the principles of Research Study Protocols where available.	<ul style="list-style-type: none"> • Critique the protocol of a current local study, discussing your findings with a research-active senior colleague. • Formulate a research question, and rationale. • Attend the local Medical Education Research Forum.
	Demonstrate practical contribution to an ethically approved research study.	<ul style="list-style-type: none"> • Contribute to a research project- e.g. data collection, follow-up, analysis etc • Work with a librarian to understand the different terminology undertaken for searches involved to do a review of literature • Undertake a systematic review on a topic. • Take on a research project with a supervisor and support. • Poster presentation at local, national, international level. • Paper presentation at local, national, international level. • Publication in a peer reviewed journal. • Attend courses or conferences to enhance knowledge.