

The real values of psychiatry: how are they reflected in the new curricula?

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What are the key values of the stakeholders
in psychiatry: patients and clinicians?

How are these values represented in the
curricula?



What were the key moments/influences that resulted in you being here today?



Where did you do your undergraduate training and what was the attitude there toward psychiatry?



What motivates you at work? What would you like to achieve for your patients?

A Competency Based Curriculum for Specialist Core Training in Psychiatry, RCPsych 2013

“What is set out in this document is the generic **knowledge, skills and attitudes**, or more readily assessed behaviour, that we believe is common to all psychiatric specialties.”

Core Psychiatry Curriculum 2022

“The purpose of the Core Psychiatry curriculum is to train medical doctors to specialise in the assessment, diagnosis, treatment, management of patients with mental disorders in a wide range of clinical settings in collaboration with the patient, other health professionals, and relevant others including families and carers of all ages.”

Core Psychiatry Curriculum 2022

Psychiatrists of the future will be well-equipped to:

- Maintain their key focus on developing & achieving the necessary professional values and behaviours, professional skills, and professional knowledge to build strong therapeutic relationships with their patients, their carers and families, and to provide safe person-centred care;
- Embrace continuing person-centred holistic advances in Psychiatry, as well as developments in technology & practice, which are consistent with the principles of sustainability;
- Have the relevant specialist knowledge and communication skills to operate effectively in a range of service delivery landscapes.

SILVER GUIDE, RCPsych 2022

PERSON-CENTRED HOLISTIC MODEL OF PSYCHIATRY

- whole person: body, mind, and spirit

- clinical approach based on both values & evidence

- multidisciplinary model

- shared responsibility and decision-making

- drawing on the social sciences, neurosciences, & humanities

- impact of culture, religion, and social systems

SILVER GUIDE

Curricula structure based on GMC's

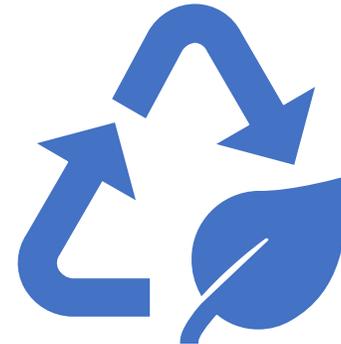
- Excellence by Design
- Generic Professional Capabilities
- WHY, WHAT, HOW? approach



SILVER GUIDE



Inclusion of history of psychiatry



Sustainability



WHAT?

- Bio-psycho-social model
- Person-centred approach

WHY?

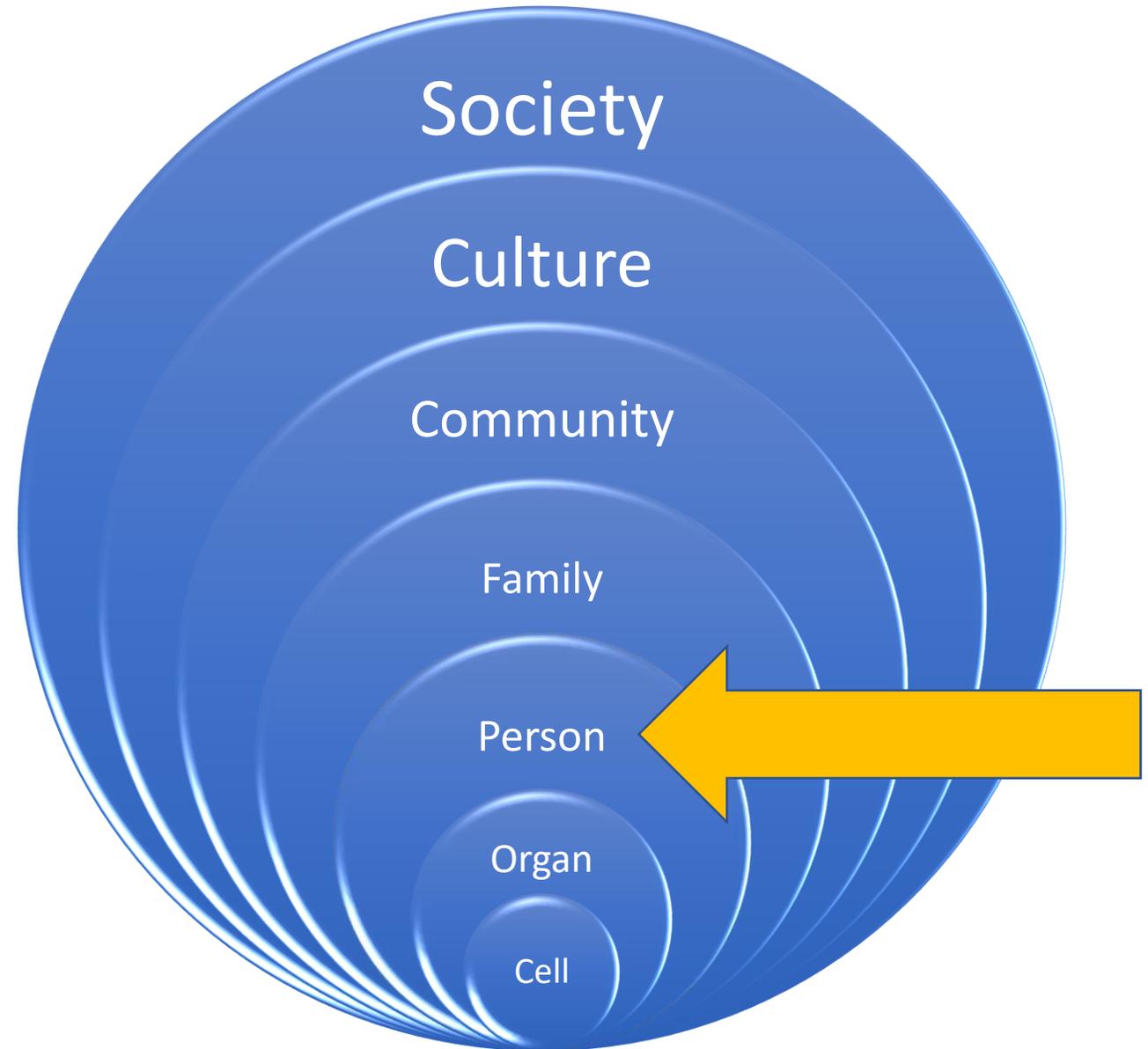
- Core Values of psychiatrists (RCPsych, 2017)
- Good Medical Practice (GMC, 2013)

HOW?

- VBP to complement EBM

The bio-psycho-social model

- **The Need for a New Medical Model: A Challenge for Biomedicine.** Engel, 1977, *Science*
- **The clinical application of the biopsychosocial model.** Engel, 1980. *American Journal of Psychiatry*. 137 (5): 535–544.



The bio-psycho-social model

- The biopsychosocial model of illness: a model whose time has come. Wade & Halligan 2017





WHAT?

- Bio-psycho-social model
- Person-centred approach

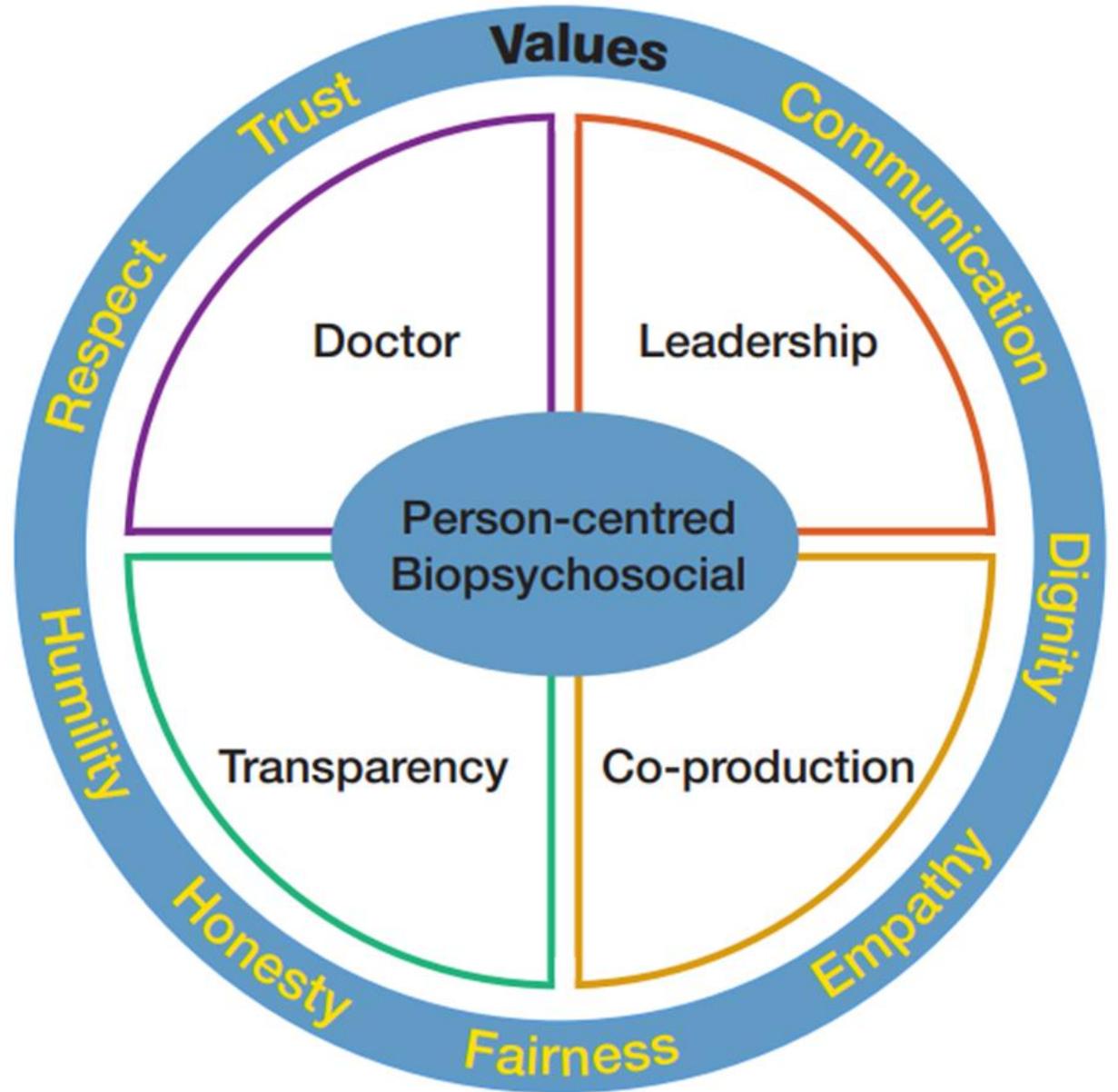
WHY?

- Core Values of psychiatrists (RCPsych, 2017)
- Good Medical Practice (GMC, 2013)

HOW?

- VBP to complement EBM

Core Values for Psychiatry





WHY?

- Core Values of psychiatrists (RCPsych, 2017)
- Good Medical Practice (GMC, 2013)

WHAT?

- Bio-psycho-social model
- Person-centred approach

HOW?

- VBP to complement EBM

Evidence-based medicine (EBM) can guide us about the efficacy and safety of diagnostic and treatment interventions but is silent about the personal importance attached to these by patient and doctor.



This is where values-based practice (VBP) comes into play.

Case vignette

- 66-year-old retired lawyer with paranoid schizophrenia
- Stable on a conventional antipsychotic without side effects for many years, even small dose reduction led to relapse previously
- Developed Parkinson's disease and neurologist started him on antiparkinsonian medication, on which he developed nausea and dizziness
- Neurologist suggesting change to quetiapine or clozapine

How would you proceed?



Values- Based Practice

psychology

sociology

anthropology

law

philosophy

Ten key pointers to good process in VBP

PRACTICE SKILLS

1. AWARENESS
2. REASONING
3. KNOWLEDGE
4. COMMUNICATION

MODELS OF SERVICE DELIVERY

5. USER-CENTRED
6. MULTIDISCIPLINARY
7. “TWO-FEET” PRINCIPLE
8. “SQUEAKY WHEEL” PRINCIPLE
9. SCIENCE AND VALUES

PARTNERHSIP

10. PARTNERSHIP

VBP

RESPECT FOR
DIFFERENCES

FRAMEWORK VALUES

GOOD PROCESS



KNOWLEDGE



How can we learn more about the values involved in clinical decision making?

KNOWLEDGE

Sources of knowledge of values relevant to specific situations can come from:

- first-hand narratives
- social science research
- ethnographic studies
- media reports
- literature, theatre, film
- philosophical methods

The values of psychiatry

Unconditional positive regard

Recovery orientation

Multidisciplinarity

Bio-psycho-social approach

The values of psychiatry

The patient's narrative takes
centre stage

Systemic approach to explore
changes in social roles & identities

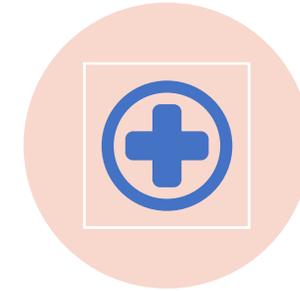
Co-production

Psychiatric training

How can we know
we are on the right
track?



**CLINICAL
IMPROVEMENT**



**PATIENT
SATISFACTION**



**CLINICIAN
SATISFACTION**

NEW VS OLD CORE CURRICULUM

Values more prominent & better explained

Person-centred care appears prominently

Co-production appears

Power imbalance in doctor-patient relationship, protected characteristics, racism appear

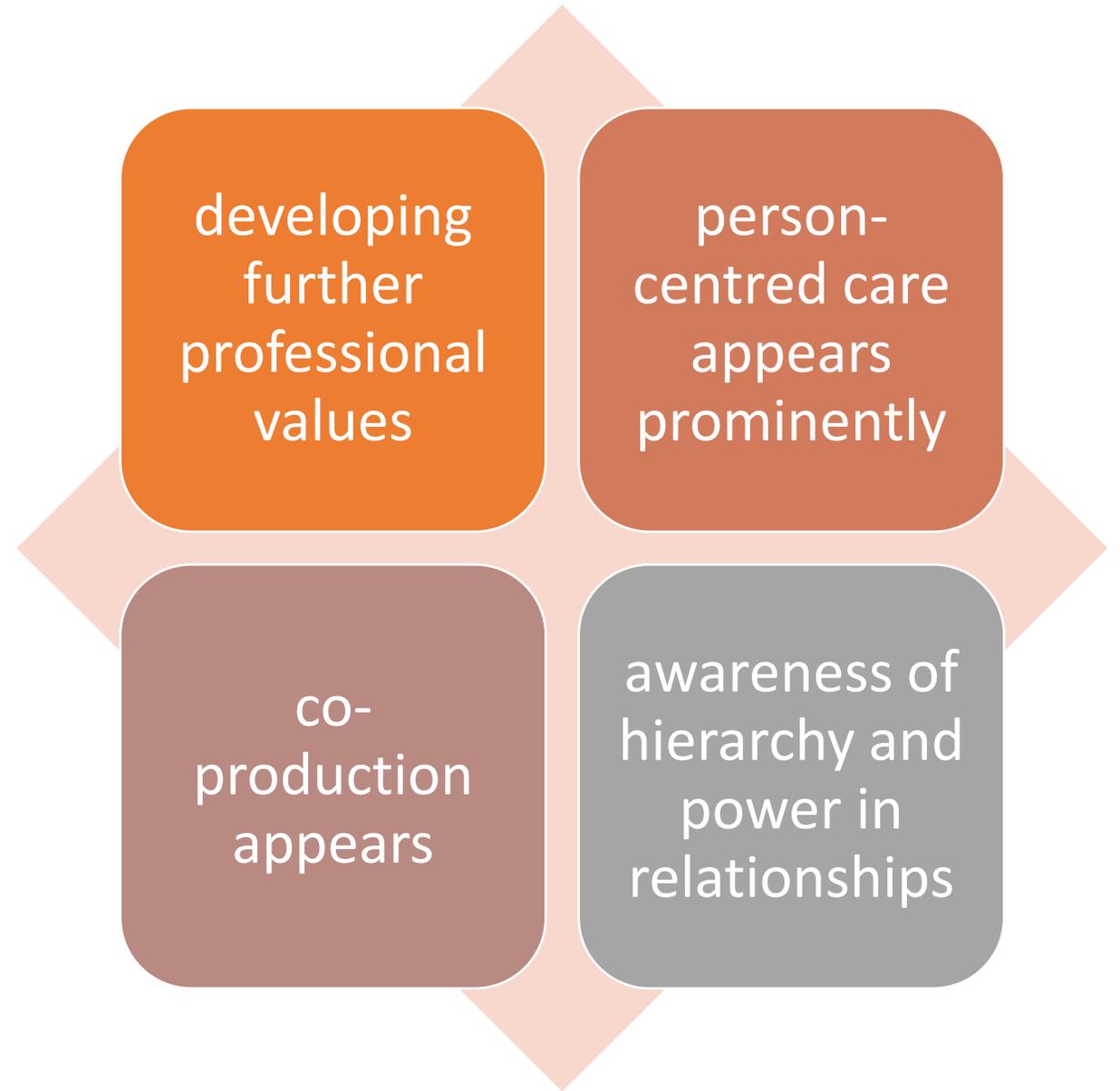
Relevance of the history of psychiatry appears

NEW VS OLD
CORE
CURRICULUM

Bio-psycho-social approach
kept, especially re: aetiology

“biological” & “psychological”
are mentioned particularly
less often

NEW VS OLD OLD AGE CURRICULUM



NEW VS OLD
OLD AGE
CURRICULUM

Keeps the bio-psycho-social model for aetiology & treatment

Fewer mentions of “biological” and “psychological”

More mentions of “social” and “safeguarding”

Suggestions for development

How to apply the person-centred model?

Keeping the full bio-psycho-social model

Hidden curriculum

Uncertainty

Challenges of a changing healthcare system

Values made more prominent & explained better

Bio-psycho-social model kept but less prominent

Need for translation into practice

Summary

Thank you!

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Further reading

Whose values? A workbook for values-based practice in mental health care by Kim Woodbridge and Bill (KWM) Fulford, 2004

Facts / Values: Ten Principles of Values-based Medicine (2007). Fulford, KWM. In: Radden, J. (ed.) *The Philosophy of Psychiatry: A Companion*. OUP, USA.

The Discontents of Psychiatry: What Can the History of Psychiatry and Values-Based Medicine Contribute to Resolving Them? (2020). Dudas, RB. In: Markova, I. and Chen, E. (eds.) *Rethinking Psychopathology*, Springer

Values-based practice: How can history taking help psychiatrists explore the values involved in clinical decision-making? Dudas RB (2021), *BJPsych Advances* 1-10.
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Further reading

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Helping people help themselves. De Silva D. The Health Foundation, May 2011, p6.