

## (Draft) Placement Development Plan – Standardised Template (Higher Intellectual Disability Example)

To be completed at the start of training post.

<b>Post Description</b>	Community ID Psychiatry
<b>Post Location</b>	City West
<b>Post Length</b>	1 year
<b>Training Year</b>	ST4
<b>Psychiatric Supervisor</b>	Dr Green
<b>Educational Supervisor</b>	Dr Black

### Proposed Progress Plan

**ST4** – Community Intellectual Disability placement

**ST5** – Inpatient Intellectual Disability and ID Crisis Team placement

**ST6** - Specialist Intellectual Disability placements e.g., Forensic ID and Child ID (Duration according to trainee learning needs and interest), further community ID experience with focus on complex cases, opportunity for Acting Up Consultant post<sup>^</sup> (3 months)

<sup>^</sup>*according to availability*

### Professional Development Sessions (special interest)

ST4 – Epilepsy, Clinical Genetics

ST5 – ASD, ADHD

ST6 – Leadership & management, Research skills

### Post activities

Please link planned activities to the relevant curricula High Level Outcomes (HLOs)

HLO	SELECT CAPABILITY <i>*Please only select a maximum of 10 capabilities per theme</i>	Planned activity	Evidence including example WPBAs	Update on progress & future actions
<b>1. Professional Values and behaviours</b>  1a Professional Relationships.  1b Professional Standards.	<b>1a) Professional Relationships</b> <i>1. Work collaboratively and effectively with patients with an intellectual disability, their families, their carers of all ages, and colleagues, while managing complex risk and system dynamics</i>  <i>2. Understand the fundamental role of multidisciplinary team working in intellectual</i>	<b>1a) Professional Relationships</b> Liaise and work with relevant colleagues and agencies to ensure your patients receive care and support.  Demonstrate 'Professional Curiosity' in your clinical practice and discuss concerns in psychiatric supervision.  Discuss and reflect on developing and maintaining a range of working	CBD DONCS          Mini-PAT Reflective notes Supervisor reports	Chair MDT meetings          Positive feedback on first Mini-PAT

	<p><i>disability practice and the role of the psychiatrist within this. Work with colleagues in the team to deliver a consistently high standard of care for patients</i></p>	<p>relationships in psychiatric supervision.</p>		<p>To reflect on developing role as a leader as well as team member.</p>
	<p><b>1b) Professional Standards</b></p> <p><i>1. Develop strategies to take care of your wellbeing, seeking timely support and guidance. Actively demonstrate self-management of your wellbeing at work and support trainees and other colleagues to do so too</i></p> <p><i>7. Use supervision and reflection effectively, recognising your skills, limitations and your duty of candour</i></p>	<p><b>1b) Professional Standards</b></p> <p>Discuss management of health and wellbeing in psychiatric supervision.</p> <p>Undertake clinical duties in a range of circumstances, including urgent and unexpected situations, and demonstrate how to manage these effectively,</p>	<p>Supervisor reports.</p> <p>ACE, Mini ACE CBD DOPS</p>	<p>No current concerns.</p> <p>To seek opportunities to manage emergencies in next post.</p>

		with an appropriate level of supervision.		
	<i>8. Demonstrate willingness and availability to give effective clinical supervision to colleagues in a timely manner</i>	Provide planned and 'ad hoc' supervision for junior colleagues and obtain feedback from this.	Supervisor reports Anonymised feedback Mini PAT.	Include junior colleagues in second round of Mini-PAT.
<b>2. Professional Skills</b>	<b>2a) Communication</b>	<b>2a) Communication</b>		
2a Communication Skills.	<i>3. Utilise a variety of communication methods including face-to-face meetings, telephone and video consultations</i>	Undertake observed clinical encounters with patients and carers.	ACE Mini ACE Mini PAT AOT Supervisor reports	Chair MDT meetings
2b Clinical Skills.		Participate in professional discussions.		
2c Complexity and Uncertainty.	<i>4. Consistently communicate effectively with patients across the spectrum of cognitive ability, their families, their carers of all ages, and other professionals</i>	Clinically assess patients with ID across the range of communicative ability Employ strategies to support communicative understanding in your patients with ID e.g., pictorial information	ACE Mini ACE  ACE Mini ACE CBD	I will attend Makaton training in June 2021

	<p><b>2b) Clinical</b></p> <p><i>1. Demonstrate proficiency in the assessment and diagnose mental disorders and neurodevelopmental disorders in patients with intellectual disability across the spectrum of cognitive ability</i></p>	<p><b>2b) Clinical</b></p> <p>Take a detailed developmental history and use established clinical tools to assess level of functioning e.g., Vineland, ABAS,</p> <p>Observe a formal IQ assessment and discuss the scope and limitations of its findings.</p>	<p>ACE Mini ACE CBD</p>	
	<p><i>5. Demonstrate proficiency in obtaining a detailed psychiatric history and performing a mental state examination in patients with intellectual disability in both routine and urgent settings</i></p>	<p>Take a detailed psychiatric history, perform a mental state examination, arrange necessary investigations and create a management plan for patients with ID and: Psychosis, Mood disorders, Anxiety disorders, Personality disorders &amp; Dementia.</p>	<p>Reflective notes Supervisor reports ACE Mini ACE CBD Supervisor reports</p>	<p>Assess and manage cases with additional neurodevelopmental co-morbidity e.g., autism, ADHD.</p>
	<p><i>6. Demonstrate skills in the assessment and management of acute mental health crises in</i></p>	<p>Undertake emergency assessments and devise a suitable management plan, with an appropriate level of supervision.</p>	<p>ACE Mini ACE CBD DOPS Supervisor reports</p>	<p>Work with increasing independence in emergency situations.</p>

	<p><i>patients with intellectual disability</i></p> <p><i>12. Demonstrate proficiency in the assessment of risk in people with intellectual disability leading to a formulation and risk management plan</i></p> <p><i>25. Use the clinical formulation to devise a safe, effective and evidence-based management plan</i></p>	<p>Complete risk assessment documentation</p> <p>Assess and formulate challenging behaviour in people with ID, in consultation with the MDT.</p>	<p>ACE Mini ACE CBD</p>	<p>Complete an independent formulation.</p>
	<p><b>2c) Complexity &amp; Uncertainty</b></p> <p><i>1. Demonstrate an understanding of unconscious processes including transference, countertransference, projection and the experience of splitting, and</i></p>	<p><b>2c) Complexity &amp; Uncertainty</b></p> <p>Observe psychotherapeutic intervention in people with ID and reflect on this with the therapist/professional concerned.</p>	<p>Reflective notes CBD DOPS</p>	<p>Co-lead group sessions on anxiety with psychology in next placement.</p>

	<i>the impact of these on professional relationships</i>	Use psychiatric supervision to discuss countertransference issues arising from supporting people with ID and their care networks.	CBD Supervisor reports	Undertake guided reading on PBS and discuss in psychiatric supervision.
	<i>2. Demonstrate an understanding of individual variation and the impact of social and cultural, factors, including effects of deprivation, discrimination and racism</i>	Assess and manage patients with Intellectual Disability who have experienced trauma.	CBD Reflective notes	Lead a complex case discussion session.
	<i>4. Work with others to promote therapeutic optimism and hope in the management and care of patients with intellectual disability</i>	Work with the MDT to devise and implement positive behaviour support planning.	CBD SAPE	
	<i>6. Reflect in complex situations and the capacity to tolerate uncertainty</i>	Discuss complexity and uncertainty and their impact on patients with ID and their		

		care network in psychiatric supervision.		
	<i>7. Maintain appropriate professional attitudes and behaviour when managing situations of ambiguity and uncertainty</i>	Attend and participate in complex case discussion group.		Lead a complex case discussion session.
<b>3. Professional Knowledge</b>  3a Knowledge of legal and organisational frameworks in your UK Jurisdiction.  3b Working within NHS organisational structures.	<b>3a) Knowledge of legal and organisational frameworks</b>  <i>1. Demonstrate a working knowledge of the specific ethical and legal principles which apply to people with an intellectual disability</i>  <i>3. Understand and apply the current legislation governing the care and treatment of people with intellectual disability and mental disorders in both inpatient and a variety of community settings. This</i>	<b>3a) Knowledge of legal and organisational frameworks</b>  Assess capacity to consent to medication in people with ID.  Assess patients with ID under the MHA.	          CBD DOPS Supervisor reports	Complete a capacity report for the Court of Protection during next placement.  Gain experience of MHA report writing and presenting at a tribunal during next placement.



	<i>includes the use of emergency powers and compulsory treatment</i>			
<b>4. Health promotion and illness prevention</b>  4a Health promotion and illness prevention in individuals and community.	<b>4a) Health promotion and illness prevention in individuals and community</b>  5. <i>Demonstrate an understanding of the physical health conditions associated with the most significant causes of morbidity and mortality in people with intellectual disability</i>  6. <i>Demonstrate advanced understanding of the concept of diagnostic overshadowing and how this affects people with intellectual disability and the care they receive, including challenging when this occurs in both primary and secondary care</i>  12. <i>Work with primary and secondary care to support</i>	<b>4a) Health promotion and illness prevention in individuals and community</b>  Screen for potential physical causes of psychiatric and behavioural presentations in your patients with ID and Initiate relevant investigations and referrals arising from this.  Discuss the physical health: mental health & behavioural interface in psychiatric supervision.  Liaise with health professionals in primary and	CBD DOPS  CBD Supervisor reports  CBD DOPS	Attend physical healthcare in ID seminar.  Contribute to Trust Epilepsy Care Pathway

	<i>your patients with intellectual disability to have their health needs met</i>	secondary care. Participate in best interest meetings to plan for health interventions for your patients with ID.	DONCS Supervisor reports	
<b>5. Leadership and Teamworking</b>  5a Teamworking.  5b Leadership.	<b>5a) Teamworking</b>  <i>1. 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.</i>  <i>2. Be prepared to question and challenge the performance of other team members when standards appear to be compromised, and escalate concerns appropriately</i>  <i>3. Work in collaboration with patients with intellectual disability, their</i>	<b>5a) Teamworking</b>  Attend and contribute to team meetings. Discuss team dynamics, strengths and weaknesses in psychiatric supervision.  Discuss challenging clinical encounters in psychiatric supervision.  Undertake joint working with members of the MDT. Attend and contribute to	DONCS ACE Mini ACE CBD  CBD Supervisor reports  CBD DONCS CBD	

	<p><i>families and carers of all ages, and the multi-disciplinary team</i></p> <p><i>4. Follow treatment plans, maintaining therapeutic optimism to enable safe and positive decision-making.</i></p>	<p>case discussion and formulation meetings.</p> <p>Co-produce treatment plans with your patients with ID and their care networks and support their implementation.</p>	<p>Supervisor reports</p> <p>ACE Mini ACE CBD</p>	
	<p><b>5b) Leadership</b></p> <p><i>1. Understand the importance of leadership and the role of a consultant psychiatrist in intellectual disability, in the context of team and multiagency working</i></p> <p><i>2. Have 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</i></p> <p><i>6. Manage and lead a team/service, including</i></p>	<p><b>5b) Leadership</b></p> <p>Observe consultant leadership styles and reflect on these in psychiatric supervision.</p> <p>Complete First Year modules of East Midlands Leadership Academy.</p>	<p>Reflective notes Supervisor reports</p> <p>Module certificates</p> <p>Meeting minutes</p>	<p>Ongoing for 3 years Take on secretarial role next year</p>

	<p><i>managing referrals and delegating work appropriately</i></p> <p><i>9. Actively participate in service development work.</i></p>	<p>Chair a team meeting / case discussion.</p> <p>Attend and participate in the ID Service Medical Staff committee.</p>	<p>DONCS</p>	
<p><b>6. Patient Safety and Quality Improvement</b></p> <p>6a Patient Safety.</p> <p>6b Quality improvement.</p>	<p><b>6a) Patient Safety</b></p> <p><i>4. Demonstrate knowledge of risk management issues for services for people with intellectual disability, including risks to patients, families, carers of all ages, staff and members of the public</i></p> <p><i>5. Understand the role of environmental risk assessment in intellectual disability settings and apply the principles of this to the settings in which you work</i></p>	<p><b>6a) Patient Safety</b></p> <p>Undertake seclusion reviews.</p> <p>Contribute to the DoLS assessment/review process for your patients with ID.</p> <p>Complete risk assessment documentation</p>	<p>DOPS DONCS CBD</p> <p>CBD</p>	

	<p>6. <i>Demonstrate knowledge of the relevant policies and procedures for patient safety in your organisation and how to escalate concerns if these arise.</i></p>	<p>Work with the team to raise risk and safeguarding concerns.</p>	<p>DONCS CBD</p>	
	<p>8. <i>Promote a therapeutic and open culture in the healthcare system where you work, for the benefit and safety of patients and staff.</i></p>	<p>Reflect on these concerns and discuss in psychiatric supervision.</p>	<p>CBD Reflective notes Supervisor reports.</p>	
	<p><b>6b) Quality improvement</b></p> <p>2. <i>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</i></p>	<p><b>6b) Quality improvement</b></p> <p>Take on ID representative role in the Health &amp; Wellbeing forum.</p>	<p>Meeting minutes DONCS Supervisor reports</p>	
	<p>5. <i>Participate in and lead on clinical governance activities, risk management and audit in order to improve the quality of the service</i></p>	<p>Lead on data collection and analysis for PBS audit.</p>	<p>Audit report</p>	<p>To lead audit project in next placement.</p>

<p><b>7. Safeguarding vulnerable groups</b></p> <p>7a Safeguarding.</p>	<p><b>7a) Safeguarding</b></p> <p><i>4. 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</i></p> <p><i>5. Recognise signs of abuse and trauma in people with intellectual disability, their families, carers of all ages and the wider community</i></p> <p><i>6. Demonstrate applied knowledge of risk management, including risks to patients with intellectual disability, carers of all ages, staff and members of the public</i></p> <p><i>9. Work within legislative frameworks and local processes to anticipate</i></p>	<p>Undertake seclusion reviews</p> <p>Contribute to the DoLS assessment/review process for your patients with ID.</p> <p>Attend "Trauma in mind" course.</p> <p>Liaise with other professionals to support safe care in the community.</p> <p>Participate in joint working with social care, including raising concerns as required</p>	<p>Course certificate Reflective notes</p> <p>CBD Reflective notes Supervisor reports</p> <p>DONCS CBD Supervisor reports</p>	
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	<p><i>techniques and the use of feedback</i></p>	<p>doctors placed in Psychiatry of Learning Disabilities Department</p> <p>Teach on the medical student ID programme and reflect on the feedback.</p> <p>Teach professionals allied to medicine: undertake joint session with PS at Community Team Meeting and reflect on this in Psychiatric Supervision.</p> <p>Provide clinical supervision for CT colleagues in the department and when on call.</p>	<p>AOT Attendee feedback Reflective notes Supervisor reports</p> <p>AOT Attendee feedback Reflective notes Supervisor reports</p> <p>Mini PAT</p>	<p>Organise induction programme in next posting.</p> <p>Organise programme in ST6.</p>
	<p><i>6. Actively participate in clinical, psychiatric and educational supervision</i></p>	<p>Reliably attend and actively participate in psychiatric and educational supervision, as per your educational agreement</p>	<p>Review meetings on portfolio Supervisor reports</p>	



<p><b>9. Research and Scholarship</b></p> <p>9a Conducting research and critical appraisal.</p>	<p><b>9a) Conducting research and critical appraisal</b></p> <p><i>1. Maintain an understanding of current evidence-based practice and research methodologies</i></p> <p><i>2. Demonstrate awareness of current evidence-based treatment guidelines, their range of application and also their limitations in the population with intellectual disability</i></p> <p><i>5. Demonstrate knowledge of ethical considerations and capacity/consent issues when conducting research with people with intellectual disability.</i></p> <p><i>8. Communicate the evidence base using a variety of formats, including accessible information where appropriate, to your patients, their families and carers of all ages to help</i></p>	<p>Attend and present regularly at the ID Department Academic Meeting.</p> <p>Discuss evidence-based practice in psychiatric supervision, in relation to clinical questions.</p> <p>Assess capacity to consent to treatment, using information provided in different formats.</p> <p>Co-produce treatment plans with your patients and their families/carers, based on evidence-based information.</p>	<p>Attendance register CBD AOT</p> <p>CBD Supervisor reports</p> <p>DOPS Mini ACE CBD</p> <p>DOPS Mini ACE CBD</p>	<p>Ongoing PDP item</p>
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	<p><i>them make informed decisions about treatment</i></p> <p><i>12. Actively engage with research innovations in practice that will benefit your patients with intellectual disability.</i></p>	<p>Develop and submit research proposal in conjunction with Trust R&amp;D Department, looking at patient and carer experience of video consultation. Commence data collection once approved.</p>	<p>Uploaded copy of proposal and its approval Research supervisor report Supervisor reports</p>	<p>First stage of ongoing project.</p> <p>Research supervisor agreed as Dr White.</p>
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**Trainee Comments:**

**Supervisor Comments:**