

This document applies to those who begin training on or after July 1st, 2016.

DEFINITION

Child and Adolescent Psychiatry is a branch of medicine and a subspecialty of psychiatry concerned with the biopsychosocial approach to etiology, assessment, diagnosis, treatment and prevention of developmental, emotional and behavioral disorders from infancy through adolescence alone or as they coexist with other medical disorders.

GOALS

Upon completion of training, the resident is expected to be a competent subspecialist in Child and Adolescent Psychiatry, capable of assuming a consultant role in the subspecialty.

Residents must demonstrate the requisite knowledge, skills and attitudes for effective patient- and family-centred care and service to a diverse population of children and youth. The resident must acquire a working knowledge of the theoretical basis of Child and Adolescent Psychiatry, including its foundations in developmental psychopathology.

Only candidates certified by the Royal College of Physicians and Surgeons of Canada in Psychiatry may be eligible for certification in Child and Adolescent Psychiatry.

In all aspects of specialist practice, the resident must be able to address issues of age, gender, cognitive and physical development, culture, sexual orientation, ethnicity, spirituality and ethics in a professional manner.

CHILD and ADOLESCENT PSYCHIATRY COMPETENCIES

Upon completion of this subspecialty residency training, Child and Adolescent Psychiatrists will have developed a range of specific competencies in multiple domains described as follows:

Working knowledge:	Able to demonstrate core aspects of Child and Adolescent Psychiatry, such as basic interviewing, problem formulation and treatment. The resident can understand the scientific literature.
Proficient:	Able to demonstrate working knowledge in Child and Adolescent Psychiatry enhanced by a developmental, cultural and lifespan perspective, allowing detailed interviewing and comprehensive biopsychosocial problem formulation with capacity to teach, consult, assess and manage referrals. The resident can critically review and apply the scientific literature to all domains of Child and Adolescent Psychiatry competence.
Advanced:	Detailed and sophisticated understanding which is multimodal and interdisciplinary, leading to advanced teaching and consultation on complex referrals. The resident has a detailed knowledge of, and is able to apply the scientific literature, adapting and extrapolating as required.
Expert/Master:	Requires advanced training, leading to enhanced skills that enable management of patients with complex co-morbidities, treatment resistance or rare conditions. The expert Child and Adolescent Psychiatrist has the capacity to both critically review and contribute to the literature with enhanced expertise. This level of competency is mostly achieved following years of practice in the subspecialty.

At the completion of training, the resident will have acquired the following competencies and will function effectively as a:

Medical Expert

Definition:

As *Medical Experts*, Child and Adolescent Psychiatrists integrate all of the CanMEDS roles, applying medical knowledge, clinical skills and professional attitudes in their provision of patient and family-centred care with children and adolescents including aspects of cognitive and physical development, culture, ethnicity, and in a number of settings, including inpatient/residential, outpatient and community. *Medical Expert* is the central physician role in the CanMEDS framework.

Key and Enabling Competencies: Child and Adolescent Psychiatrists are able to...

1. Function effectively as consultants, integrating all of the CanMEDS Roles to provide optimal, ethical, patient/family-centred and evidence-based medical care

- 1.1. Perform a consultation, including the presentation of well documented assessment, biopsychosocial formulation and recommendations in written and/or verbal form in response to a request from another health care professional
 - 1.2. Demonstrate use of all CanMEDS competencies relevant to Child and Adolescent Psychiatry
 - 1.3. Demonstrate the ability to prioritize professional duties when faced with multiple patients and problems
 - 1.4. Demonstrate compassionate patient and family-centred care
 - 1.5. Recognize and respond to the ethical dimensions of child and adolescent psychiatric decision-making
 - 1.6. Identify and appropriately respond to relevant clinical issues arising in patient care, including awareness and understanding of:
 - 1.6.1. Aggressive behaviours
 - 1.6.2. Attachment disturbances
 - 1.6.3. Burden of medical, surgical and psychiatric illness upon children, adolescents, families and health care, educational and welfare systems
 - 1.6.4. Culture and spirituality
 - 1.6.5. Co-morbidity – medical, psychiatric, developmental and substance abuse
 - 1.6.6. End of life issues in children, adolescents and their families
 - 1.6.7. Ethics and law, including boundary issues, capacity, competence, confidentiality, consent, legal and forensic matters
 - 1.6.8. Family issues, including custody and parental mental illness
 - 1.6.9. Long term illness and rehabilitation
 - 1.6.10. Policy in practice or development in the areas of education, health care, juvenile justice and welfare as it relates to the mental health of children and adolescents
 - 1.6.11. Psychiatric manifestations of common medical and neurological illnesses
 - 1.6.12. Reactions and factors influencing those experienced by patients and their parents (or their substitutes) to the physician and other health professionals
 - 1.6.13. Reactions experienced personally when dealing with patients and their families, including the reaction to suicidality, perceived hostility, depression, psychoses, unreasonable demands, and cognitive impairment in both patients and parents (or their substitutes)
 - 1.6.14. School issues, including academic and social functioning as well as bullying and victimization
 - 1.6.15. Stigma
 - 1.6.16. Suicide, self-harm, or harm directed towards others
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1.6.17. Therapeutic alliance

1.6.18. Trauma, abuse and neglect and its impact on child and youth development

1.7. Demonstrate medical expertise in situations other than patient care, such as providing expert legal testimony or advising governments, as needed

2. Establish and maintain clinical knowledge, skills and attitudes appropriate to Child and Adolescent Psychiatry

2.1. Establish, apply and maintain knowledge of the clinical, developmental and basic sciences relevant to Child and Adolescent Psychiatry, at the level of the subspecialist. The level of competence in each of knowledge, skills and attitudes must be at the designated level of proficient or advanced knowledge for purposes of core competence in each of:

2.1.1. Demonstrate advanced knowledge with regards to etiology, epidemiology, diagnosis, course of illness and effective treatment and clinical practice guidelines relevant to:

2.1.1.1. Anxiety disorders

2.1.1.2. Obsessive-compulsive and related disorders

2.1.1.3. Trauma- and stressor-related disorders

2.1.1.4. Attention deficit hyperactivity disorder

2.1.1.5. Disruptive, impulse-control, and conduct disorders

2.1.1.6. Early-onset psychoses, including early-onset schizophrenia and early-onset bipolar disorder

2.1.1.7. Depressive disorders, including disruptive mood dysregulation disorder

2.1.2. Child and Adolescent Psychiatrists will be proficient with regards to the following:

2.1.2.1. Etiology, epidemiology, diagnosis, course of illness, and effective treatment and clinical practice guidelines relevant to:

2.1.2.1.1. Adjustment disorders and relational problems, problems related to abuse or neglect and conditions related to mental disorders that may require clinical attention

2.1.2.1.2. Autism spectrum disorders

2.1.2.1.3. Attachment disorders

2.1.2.1.4. Communication disorders

2.1.2.1.5. Delirium and other cognitive disorders

2.1.2.1.6. Elimination disorders

2.1.2.1.7. Feeding and eating disorders

2.1.2.1.8. Intellectual disability

2.1.2.1.9. Specific learning disorders

- 2.1.2.1.10. Motor disorders, including Tourette's disorder
- 2.1.2.1.11. Psychiatric disorders affecting and or secondary to medical conditions
- 2.1.2.1.12. Sexual disorders and gender dysphoria
- 2.1.2.1.13. Sleep-wake disorders
- 2.1.2.1.14. Somatic symptom and related disorders
- 2.1.2.1.15. Substance-related and addictive disorders

- 2.1.2.2. Basic principles of developmental psychopathology
- 2.1.2.3. Psychiatric rehabilitation
- 2.1.2.4. Psychotherapeutic constructs – individual, family, and group
- 2.1.2.5. Psychopharmacology as it applies to children and adolescents
- 2.1.2.6. Referral patterns, community agencies, systems of mental health care and delivery
- 2.1.2.7. Forensic aspects of Child and Adolescent Psychiatry
- 2.1.2.8. Basic principles of the genetics of psychiatric disorders
- 2.1.2.9. Basic neuroscience of psychiatric disorders in children and adolescents
- 2.1.2.10. Principles of public health relevant to Child and Adolescent Psychiatry
- 2.1.2.11. Research methodology, critical appraisal and medical statistics
- 2.1.2.12. Complementary and alternative care in Child and Adolescent Psychiatry

- 2.2. Apply lifelong learning skills of the Scholar Role to implement a personal program to keep up to date, and enhance areas of professional competence
- 2.3. Contribute to the enhancement of quality care and patient safety in psychiatric practice, integrating the best available evidence and best practices
- 2.4. Describe the CanMEDS framework of competencies relevant to Child and Adolescent Psychiatry

3. Perform a relevant and appropriate assessment of a patient

- 3.1. Establish and maintain an effective therapeutic alliance with patients, including families when appropriate
- 3.2. Identify and explore issues to be addressed in a patient encounter effectively, including the patient's and patient's family context, preferences and confidentiality
- 3.3. Perform an appropriate and accurate diagnostic individual and/or family interview for the purposes of evaluation, diagnosis and treatment planning, including prevention and health promotion

- 3.4. Perform an appropriate and accurate mental status examination for the purposes of evaluation, diagnosis, and treatment planning, including prevention and health promotion
- 3.5. Perform a focused physical examination, including a focused neurological examination, that is relevant and accurate for the purposes of evaluation, diagnosis and treatment planning, including prevention and health promotion
- 3.6. Demonstrate proficiency in selecting appropriate investigations in a resource effective and ethical manner, including:
 - 3.6.1. Age-appropriate use of evidence-based emotional and behavioral questionnaires and self-report measures
 - 3.6.2. Collateral information gathering
 - 3.6.3. Medical investigation or consultation, including laboratory testing
 - 3.6.4. Psychological, neuropsychological and psychoeducational testing
 - 3.6.5. Neuroimaging
- 3.7. Demonstrate proficiency in effective clinical problem solving and judgment to address patient problems, including interpreting available data and integrating information to generate a comprehensive assessment and treatment plan including:
 - 3.7.1. Appropriate differential diagnosis informed by current versions of the International Classification of Diseases (ICD) and the Diagnostic and Statistical Manual of Mental Disorders (DSM) diagnostic classification
 - 3.7.2. Integrated case formulation that presents a relevant biopsychosocial understanding
 - 3.7.3. Appropriate evaluation plan, including relevant laboratory, imaging, medical, psychological investigations and collateral information
 - 3.7.4. Comprehensive evidence-based treatment plan implementing an integrated biopsychosocial approach

4. Use therapeutic interventions effectively

- 4.1. Demonstrate advanced knowledge in implementing a management plan in collaboration with patients and their families, including:
 - 4.1.1. Assessing risk and applying appropriate therapeutic interventions to minimize risk
 - 4.1.2. Assessing suitability for and prescription of appropriate psychotherapeutic and psychopharmacological treatments
 - 4.1.3. Addressing issues of primary, secondary and tertiary prevention as relevant
 - 4.1.4. Facilitate therapeutic interventions by addressing patient and family education in a culturally sensitive manner

- 4.2. Demonstrate advanced knowledge and skill in assessing suitability for psychopharmacological intervention and implementing a treatment plan with consideration of the specific issues relevant to children and adolescents
 - 4.2.1. Patient/family education regarding evidence-based use of pharmacological interventions
 - 4.2.2. Provision of full informed consent for patients and families including potential risks, benefits and side effects medication
 - 4.2.3. Appropriate dosage and monitoring of pharmacological interventions, including appropriate age and weight dosage and laboratory monitoring as indicated
 - 4.2.4. Recognition, monitoring and understanding of the issues regarding medication compliance
- 4.3. Demonstrate advanced competency in assessing suitability for, prescribing and delivering at least one of the following psychotherapeutic interventions. For all of the remaining psychotherapies, demonstrate a proficient level of knowledge and skill
 - 4.3.1. Behavioral treatments
 - 4.3.2. Cognitive behavioral therapy
 - 4.3.3. Crisis intervention
 - 4.3.4. Family therapy
 - 4.3.5. Group therapy with children and adolescents
 - 4.3.6. Parental skill development
- 4.4. Demonstrate working knowledge and skill in assessing suitability for, prescribing and delivering the following psychotherapeutic interventions:
 - 4.4.1. Psychodynamic psychotherapy with children and adolescents
 - 4.4.2. Dialectic behavior therapy
 - 4.4.3. Interpersonal therapies
 - 4.4.4. Mindfulness training
 - 4.4.5. Motivational interviewing
 - 4.4.6. Relaxation therapy
 - 4.4.7. Supportive therapy
- 4.5. Demonstrate proficiency in assessing and managing treatment adherence
- 4.6. Ensure appropriate informed consent is obtained for therapies

5. Seek appropriate consultation from other health professionals

- 5.1. Demonstrate insight into own limitations of expertise
- 5.2. Demonstrate effective, appropriate, and timely consultation of other health professionals as needed for optimal patient care
- 5.3. Arrange appropriate followup care services for patients and their families

Communicator

Definition:

As *Communicators*, Child and Adolescent Psychiatrists enable patient centred diagnostic and therapeutic communications through shared decision making and effective developmentally appropriate interactions with children, adolescents, parents/caregivers, families, other professionals and agencies/institutions. The competencies for this role are essential for establishing rapport and trust, formulating and conveying child and adolescent psychiatric diagnoses and information, understanding pertinent developmental issues, achieving mutual understanding, and facilitating a shared plan of psychiatric treatment and care for children and/or adolescents.

Key and Enabling Competencies: Child and Adolescent Psychiatrists are able to...

1. Develop rapport and trust, as well as ethically, therapeutically, culturally and developmentally informed relationships with children, adolescents, their parents/caregivers, and families

- 1.1. Recognize that being a good communicator is a core clinical skill of Child and Adolescent Psychiatrists, and that effective physician-patient communication can foster patient satisfaction, physician satisfaction, adherence, and improved clinical outcomes
 - 1.1.1. Ensure that physician-patient communication fosters child and adolescent patient satisfaction, is developmentally-informed, and includes physician communication with parents/caregivers and families
 - 1.1.2. Use expert verbal and non-verbal communication with children, adolescents, parents/caregivers and families
 - 1.1.3. Convey tolerant and inclusive attitudes towards children, adolescents, parents/caregivers and families
- 1.2. Establish positive therapeutic relationships with children, adolescents, and their parents/caregivers and families reflective of understanding, trust, respect, honesty and empathy
- 1.3. Demonstrate respect for child and/or adolescent patient confidentiality, privacy and autonomy within the parental/caregiver and family context
- 1.4. Listen effectively to children and/or adolescents within the parental/caregiver and family context
- 1.5. Demonstrate awareness of and responsiveness to the non-verbal cues of children and/or adolescents within the parental/caregiver and family context

- 1.6. Demonstrate awareness of and responsiveness to individual developmental needs across the range of child and adolescent psychiatric encounters, involving children, adolescents, parents/caregivers, and families
- 1.7. Facilitate a structured clinical encounter effectively across a range of child and adolescent psychiatric encounters, involving children, adolescents, parents/caregivers, and families
- 2. Accurately elicit and synthesize relevant information and perspectives of children, adolescents, parents/caregivers, families, colleagues, and other professionals**
 - 2.1. Gather information about a psychiatric disorder and associated child, adolescent, parent/caregiver and familial beliefs, values expectations, developmental issues and illness experience
 - 2.2. Seek out information and consultation from other relevant sources
- 3. Convey evidence-based information and explanations accurately to children, adolescents, parents/caregivers, families, colleagues, and other professionals**
 - 3.1. Deliver information to children, adolescents, parents/caregivers, families, colleagues and other professionals in a humane manner and in such a way that is understandable, developmentally and culturally appropriate, and encourages discussion and participation in decision-making
- 4. Develop a common understanding on issues, problems and plans with patients, families, and other professionals to develop a shared plan of care**
 - 4.1. Identify and explore problems to be addressed from a patient encounter effectively, including the patient's context, responses, concerns, and preferences
 - 4.2. Respect diversity and difference, including but not limited to the impact of gender, religion and cultural beliefs on decision-making
 - 4.3. Encourage discussion, questions, and interaction in the encounter
 - 4.4. Engage patients, families, and relevant health professionals in shared decision-making to develop a plan of care
 - 4.5. Address challenging communication issues effectively, such as obtaining informed consent, delivering bad news, and addressing anger, confusion and misunderstanding
- 5. Convey effective oral and written information about a child and adolescent psychiatric encounter**
 - 5.1. Maintain clear, accurate, appropriate and timely records (written or electronic) of clinical encounters and plans across the range of child and adolescent psychiatric encounters, including such encounters with children, adolescents, parents/caregivers and families

- 5.2. Demonstrate ability to present clear and relevant verbal reports of clinical encounters and plans across the range of child and adolescent psychiatrists' encounters, including such encounters with children, adolescents, parents/caregivers and families

Collaborator

Definition:

As *Collaborators*, Child and Adolescent Psychiatrists effectively work within an interprofessional team to achieve optimal mental health care for children, adolescents and their families.

Key and Enabling Competencies: Child and Adolescent Psychiatrists are able to...

1. Participate effectively and appropriately in an interprofessional health care team

- 1.1. Demonstrate proficiency in working in an interprofessional team, facilitating communication within the team, and collaborating respectfully in supporting children and adolescents with mental health problems and their families
- 1.2. Consult and help determine roles and responsibilities of team members according to areas of expertise and training
- 1.3. Describe the roles and responsibilities of child and adolescent psychiatrists to other professionals
- 1.4. Describe the roles and responsibilities of other professionals within the interprofessional team
- 1.5. Recognize and respect the diversity of roles, responsibilities and competencies of other professionals in relation to their own
- 1.6. Work with other team members to assess, plan, provide and integrate care for children and adolescents with mental health problems and their families
- 1.7. Work with others collaboratively to assess, plan, provide and evaluate other tasks, such as education, research or administration as it pertains to child and adolescent mental health where indicated
- 1.8. Participate actively in interprofessional team meetings
- 1.9. Describe the principles of team dynamics
- 1.10. Respect team ethics, including confidentiality, resource allocation and professionalism
- 1.11. Demonstrate leadership within the health care team, as appropriate
- 1.12. Work with other health professionals effectively to negotiate, and resolve interprofessional conflict

2. Collaborate with community agencies, schools and other professionals working with children/adolescents with mental illness, and their families

- 2.1. Demonstrate consistent and effective communication with primary care physicians to support, educate and provide consultation
- 2.2. Identify appropriate community agencies, understand the role of various service providers, and facilitate regular communication to efficiently and effectively provide collaborative treatment planning and delivery
- 2.3. Communicate with school personnel to obtain appropriate collateral information and develop a comprehensive evaluation and treatment plan to address mental health concerns recognizing illness impact on social and academic functioning.
- 2.4. Demonstrate the skills to provide support, education and consultation to school personnel and other non-traditional mental health providers as relevant to a comprehensive biopsychosocial treatment plan

Manager

Definition:

As *Managers*, Child and Adolescent Psychiatrists are integral participants in health care organizations, organizing sustainable practices, making decisions about allocating resources, and contributing to the effectiveness of the health care system.

Key and Enabling Competencies: Child and Adolescent Psychiatrists are able to...

1. Participate in activities that contribute to the effectiveness of their health care organizations and systems

- 1.1. Work collaboratively with others in their organizations
- 1.2. Participate in systemic quality process evaluation and improvement, including patient safety initiatives, audits, risk management, occurrence and incident reporting
- 1.3. Describe the structure and function of the health care system as it relates to their subspecialty, including the roles of Child and Adolescent Psychiatrists and principles of health care financing

2. Develop skills to manage their practice and career effectively

- 2.1. Set priorities and manage time to balance patient care, practice requirements, outside activities, personal life, and career goals
- 2.2. Implement processes to ensure personal practice improvement
- 2.3. Employs information technology to enhance patient care and patient/family education

3. Allocate finite health care resources appropriately

- 3.1. Recognize the importance of just allocation of health care resources, balancing effectiveness, efficiency and access with optimal patient care

- 3.2. Apply evidence-based practices and management processes for cost-appropriate care

4. Serve in administration and leadership roles, as appropriate

- 4.1. Participate effectively in committees and meetings
- 4.2. Participate in activities to implement change in health care, such as increased collaboration with nontraditional mental health providers
- 4.3. Plan relevant elements of health care delivery (e.g. work schedules)

Health Advocate

Definition:

As Health Advocates, Child and Adolescent Psychiatrists responsibly use their expertise and influence to advance the health and well-being of individual patients, communities, and populations.

Key and Enabling Competencies: Child and Adolescent Psychiatrists are able to...

1. Respond to individual child and adolescent psychiatric health care needs and issues as part of patient care

- 1.1. Identify the mental health needs of the child or the adolescent
- 1.2. Identify opportunities for advocacy, mental health promotion and disease prevention with individuals to whom they provide care, via:
 - 1.2.1. Awareness of the major regional, national and international advocacy groups in child and adolescent mental health care
 - 1.2.2. Awareness of governance structures in child and adolescent mental health care and education
 - 1.2.3. Awareness of legal issues in mental health care for children and adolescents

2. Respond to the mental health needs of the communities that they serve, specifically with respect to the child and adolescent psychiatric patient population

- 2.1. Describe the practice communities that they serve
- 2.2. Identify opportunities for mental health advocacy, health promotion and disease prevention in the communities that they serve, and respond appropriately
- 2.3. Appreciate the possibility of competing interests between the communities served and other populations
- 2.4. Advise organizations in early intervention and prevention of psychiatric illness in children and adolescents and promote the use of evidence-based practices

3. Identify the social determinants of mental health for the child and adolescent psychiatric patient population

- 3.1. Identify the social determinants of mental health of the populations, including barriers to access to care and resources
- 3.2. Identify vulnerable or marginalized populations, including issues of poverty, homelessness and ethnicity, children in care, children of parents who have severe mental illness

4. Promote the mental health of individual patients, communities, and populations regarding child and adolescent psychiatric issues

- 4.1. Describe an approach to implementing a change in a determinant of health of the populations served
- 4.2. Describe how public policy impacts on the health of the populations served
- 4.3. Identify points of influence in the health care system and its structure
- 4.4. Describe ethical and professional issues inherent in health advocacy, including altruism, social justice, autonomy, integrity and idealism
- 4.5. Appreciate the possibility of conflict inherent in their role as a health advocate for a patient or community with that of manager or gatekeeper
- 4.6. Describe the role of the medical profession in advocating collectively for health and patient safety

Scholar

Definition:

As *Scholars*, Child and Adolescent Psychiatrists demonstrate a lifelong commitment to reflective learning, as well as the creation, dissemination, application and translation of knowledge of developmental psychopathology and other knowledge relevant to child and adolescent mental health.

Key and Enabling Competencies: Child and Adolescent Psychiatrists are able to...

1. Maintain and enhance professional activities through ongoing learning

- 1.1. Demonstrate an understanding of and a commitment to the need for continuous learning
- 1.2. Describe the principles of maintenance of competence
- 1.3. Describe the principles and strategies for implementing a personal knowledge management system
- 1.4. Recognize and reflect on learning issues in practice, particularly conflict of interest
- 1.5. Conduct a personal practice audit
- 1.6. Pose an appropriate learning question
- 1.7. Access and interpret the relevant current evidence

- 1.8. Integrate new learning into practice
- 1.9. Evaluate the impact of any change in practice
- 1.10. Document the learning process
- 2. Critically evaluate medical information and its sources, and apply this appropriately to practice decisions**
 - 2.1. Describe the principles of critical appraisal for studies of etiology, diagnosis, outcome, treatment, systematic reviews and clinical practice guidelines
 - 2.2. Develop and implement an ongoing and effective personal learning strategy with an analysis and evaluation of the relevant medical literature
 - 2.3. Critically appraise medical information and integrate information from a variety of sources
 - 2.4. Integrate critical appraisal conclusions into clinical care
- 3. Facilitate the learning of children, adolescents and their families, as well as medical trainees, other health professionals and trainees, and the public**
 - 3.1. Teach the fundamentals of Child and Adolescent Psychiatry to medical trainees and other allied health trainees
 - 3.2. Describe the principles of learning and help others learn by collaboratively providing guidance, teaching, identifying the learning needs and providing constructive feedback
 - 3.3. Assess and reflect on a teaching encounter
 - 3.4. Develop the ability to present all topic areas in Child and Adolescent Psychiatry in formal or informal educational settings
 - 3.5. Describe the principles of ethics with respect to teaching
 - 3.6. Deliver an effective lecture or presentation
- 4. Contribute to the development, dissemination, and translation of new medical knowledge and practices**
 - 4.1. Describe the principles of research and scholarly inquiry, research methodology, and study design
 - 4.2. Describe the principles of research ethics
 - 4.3. Exhibit working knowledge of and appreciation for the conduct of research in Child and Adolescent Psychiatry
 - 4.4. Demonstrate understanding of the contribution of basic and clinical sciences to Child and Adolescent Psychiatry
 - 4.5. Pose a scholarly question, and perform and summarize a thorough literature review using a range of opportunities, such as for an academic presentation, poster preparation, manuscript submission or collection of new data

- 4.6. Demonstrate an understanding of the importance of research to all aspects of the practice of Child and Adolescent Psychiatry
- 4.7. Participate in a scholarly research, quality assurance, or educational project relevant to Child and Adolescent Psychiatry, demonstrating primary responsibility for one of the following elements of the project:
 - development of the hypothesis, which must include a comprehensive literature review
 - development of the protocol for the scholarly project
 - preparation of a grant application
 - development of the research ethics proposal
 - interpretation and synthesis of the results

Professional

Definition:

As *Professionals*, Child and Adolescent Psychiatrists are committed to contributing to the health and well-being of individual children and adolescents, as well as their families and to the health of society as a whole, through ethical practice, profession-led regulation, and high personal standards of behaviour.

Key and Enabling Competencies: Child and Adolescent Psychiatrists are able to...

- 1. Demonstrate a commitment to their child and adolescent patients and their families, as well as to their profession and to society through ethical practice**
 - 1.1. Demonstrate awareness and application of ethical principles and processes relevant to the practice of medicine and psychiatry, and to Child and Adolescent Psychiatry in particular
 - 1.2. Demonstrate awareness of the ethical principles governing research with child and adolescent subjects and relevant institutional governance and documentation related to these principles
 - 1.3. Recognize gender, culture, poverty, mental and physical disability, sexual orientation, stigma, and access to resources as potential determinants of children's mental health, and approach these issues collaboratively and respectfully with patients and families
 - 1.4. Recognize what constitutes a conflict of interest in the areas of practice, research and education, as well as demonstrate an awareness of the appropriate steps to take to address such conflicts transparently if and when these occur
 - 1.5. Establish a treatment plan that is flexible, evidence-based where possible, practical, and sensitive to a patient and family's specific needs and consistent with the clinical practice guidelines of the profession
 - 1.6. Endeavour to the best of his or her abilities to deliver the highest quality care to patients and their families with integrity, honesty, empathy, compassion, and respect for diversity

- 1.7. Demonstrate collaborative relationships with children and adolescent patients and their families, as well as with colleagues, which accommodate their gender, cultural and spiritual backgrounds. Seek supervision and support in instances where collaboration may be threatened by issues related to capacity and resources
- 2. Demonstrate a commitment to their child and adolescent patients, and their families, as well as to their profession and to society through participation in profession-led regulation**
 - 2.1. Practice Child and Adolescent Psychiatry in a manner ethically and legally consistent with the obligations of a physician and subspecialist
 - 2.2. Demonstrate proficiency with regards to health care and other regulations, including but not restricted to: The Young Offenders Act and relevant provincial legislation pertaining to mental health, confidentiality, privacy and child welfare
 - 2.3. Demonstrate awareness of the ethical and legal frameworks in which he or she trains and practices, including the codes of professional conduct of professional and licensing bodies and all institutions to which he or she holds affiliations; and the relevant legal principles governing confidentiality, the rights of minors and guardians to receive and refuse treatment, assessment of capacity to consent to treatment, involuntary treatment, schooling regulations, and child protection. Obtain and complete relevant legal documentation
 - 2.4. Commit to participate in a life-long process of self, peer, professional and institutional assessment to continue to identify lapses in professional behaviour and to correct these when identified
 - 2.5. Recognize and support other professionals in need where possible and respond appropriately to protect patient care where necessary
 - 2.6. Demonstrate an ability to receive and to use feedback constructively
 - 2.7. Demonstrate a capacity to acknowledge failures to live up to ideal professional standards, to disclose medical errors promptly and transparently within an appropriate medical legal context, and to collaborate with peers, supervisors and patients where possible to address these issues in order to avoid their repetition
 - 2.8. Fulfil accountability standards to educational, institutional, and professional bodies
 - 2.9. Participate in peer review, quality assurance activities, and evaluation of trainees and other professionals where required
- 3. Demonstrate a commitment to physician health and sustainable practice**
 - 3.1. Maintain his/her health and balance personal and professional priorities in order to practice to the best of his or her abilities and in a sustainable manner. If unable to perform at an optimal level of practice, insure his/her patients are referred to appropriate services
 - 3.2. Maintain appropriate relationships with patients, patients' families and colleagues under everyday and stressful circumstances

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- 3.3. Demonstrate an ability to manage conflicting demands on time in a manner respectful of others
- 3.4. Recognize personal limitations which may interfere with professional practice and seek advice and assistance where necessary
- 3.5. Exhibit responsibility, dependability, self-direction, and punctuality. Recognize failure to do so as an indicator of poor health and practice that requires attention

This document is to be reviewed by the Subspecialty Committee in Child and Adolescent Psychiatry by December 31, 2017.

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