

2021
VERSION 1.0

These training requirements apply to those who begin training on or after July 1, 2021.

ELIGIBILITY REQUIREMENTS TO BEGIN TRAINING

Royal College certification in Psychiatry.

OR

Eligibility for the Royal College examination in Psychiatry.

OR

Registration in a Royal College-accredited residency program in Psychiatry.
(See requirements for these qualifications.)

ELIGIBILITY REQUIREMENTS FOR EXAMINATION¹

All candidates must be Royal College certified in Psychiatry in order to be eligible to write the Royal College examination in Forensic Psychiatry.

The following training experiences are required, recommended, or optional, as indicated.

TRANSITION TO DISCIPLINE (TTD)

The focus of this stage is orientation to the context of Forensic Psychiatry practice, including personal safety and working procedures of forensic psychiatry settings, the dual role of the psychiatrist as clinician and legal expert, and the nature of the patient/evaluatee-physician-third party relationship. This stage includes verification of the knowledge and skills of Psychiatry and a baseline assessment of previous forensic psychiatry exposure, knowledge, and skills in order to individualize training.

Required training experiences (TTD stage):

1. Clinical training experiences
 - 1.1. Inpatient and/or outpatient forensic psychiatry service

¹ *These eligibility requirements do not apply to Subspecialty Examination Affiliate Program (SEAP) candidates. Please contact the Royal College for information about SEAP.*

2. Other training experiences
 - 2.1. Orientation to the dual role of the forensic psychiatrist as both a clinician and legal expert
 - 2.2. Orientation to the institution, program, and work settings
 - 2.3. Orientation to safety issues in forensic psychiatry settings
 - 2.4. Orientation to the forensic psychiatry team
 - 2.5. Orientation to Competence By Design

FOUNDATIONS OF DISCIPLINE (F)

The focus of this stage is the development of a forensic approach to psychiatric assessment and a solid knowledge base of jurisprudence as relevant to Forensic Psychiatry. Clinical experiences at this stage are primarily connected to requests related to criminal cases. This includes performing assessments, providing reports, and preparing for expert testimony. By the end of the stage, the resident will have demonstrated competence with uncomplicated adults undergoing assessment for fitness to stand trial, not criminally responsible on account of a mental disorder (NCRMD), and risk. The resident will have also demonstrated competence in the assessment and ongoing management of patients under a Review Board, and in providing testimony related to those patients.

Required training experiences (Foundations stage):

1. Clinical training experiences
 - 1.1. Forensic Psychiatry, inclusive of new assessments and active cases
 - 1.1.1. Inpatient service
 - 1.1.2. Clinic and/or remand centre
 - 1.1.3. Testimony at a Review Board hearing or in a mock trial or court
 - 1.1.4. Observation of forensic psychiatry testimony at court and/or tribunal related to any legal issue (e.g., fitness to stand trial, treatment orders, NCRMD, and Review Board hearings)
 - 1.1.5. Participation in multidisciplinary meetings
2. Other training experiences
 - 2.1. Formal instruction in
 - 2.1.1. Ethical principles in Forensic Psychiatry, including Canadian Academy of Psychiatry and the Law (CAPL) ethical guidelines
 - 2.1.2. The forensic psychiatry approach, including interview, gathering collateral information, and use of testing
 - 2.1.3. Written communication skills, including writing reports
 - 2.1.4. Principles of risk assessments, including actuarial and structured professional judgment (SPJ) tools
 - 2.1.5. Principles of testifying
 - 2.1.6. Basic elements of criminal, civil, and tribunal procedures; the rules of evidence; the structure of the court system; and the Criminal Code of Canada

- 2.1.7. Fitness to stand trial and treatment orders
- 2.1.8. Criminal responsibility
- 2.1.9. Criminal Code of Canada, Section 672 (CC672) provincial/territorial Review Board assessments

- 2.2. Review of landmark legal cases
 - 2.2.1. R. v. Taylor, 1992 CanLII 7412 (ON CA)
 - 2.2.2. R. v. Morrissey, 2007 ONCA 770 (CanLII)
 - 2.2.3. R. v. Demers, 2004 SCC 46 (CanLII)
 - 2.2.4. M'Naghten's Case, 10 Cl. & F. 200, 8 Eng. Rep. 718 (H.L. 1843)
 - 2.2.5. R. v. Abbey, 1982 CanLII 25 (SCC)
 - 2.2.6. R. v. Chaulk, 1990 CanLII 34 (SCC)
 - 2.2.7. R. v. Swain, 1991 CanLII 104 (SCC)
 - 2.2.8. Kjeldsen v. The Queen, 1981 CanLII 218 (SCC)
 - 2.2.9. R. v. Oommen, 1994 CanLII 101 (SCC)
 - 2.2.10. Cooper v. R., 1979 CanLII 63 (SCC)
 - 2.2.11. R. v. Bouchard-Lebrun, 2011 SCC 58 (CanLII)
 - 2.2.12. Winko v. British Columbia (Forensic Psychiatric Institute), 1999 CanLII 694 (SCC)
 - 2.2.13. *National Justice Compania Naviera S.A. v. Prudential Assurance Co. Ltd. ("The Ikarian Reefer")* [1993] 2 Lloyd's Rep. 68 (Q.B.)
 - 2.2.14. *Daubert v. Merrell Dow Pharmaceuticals*, 509 U.S. 579 (1993).
 - 2.2.15. R. v. Mohan, 1994 CanLII 80 (SCC)
 - 2.2.16. R. v. J.-L.J., 2000 SCC 51 (CanLII)
 - 2.2.17. *White Burgess Langille Inman v. Abbott and Haliburton Co.*, 2015 SCC 23 (CanLII)
 - 2.2.18. *Tarasoff v. Regents of University of California*, 551 P.2d 334 (1976)
 - 2.2.19. Smith v. Jones, 1999 CanLII 674 (SCC)

Recommended training experiences (Foundations stage):

- 3. Clinical training experiences
 - 3.1. At least one of the following forensic psychiatry populations
 - 3.1.1. Sexually offending behaviours
 - 3.1.2. Correctional
 - 3.1.3. Youth
 - 3.1.4. Civil

- 4. Other training experiences
 - 4.1. Formal instruction in time management
 - 4.2. Participation in a mock trial
 - 4.3. Review of examples of forensic psychiatry reports

Optional training experiences (Foundations stage):

- 5. Other training experiences
 - 5.1. Initiation of a scholarly project

CORE OF DISCIPLINE (C)

This stage focuses on the breadth of forensic psychiatry practice, including the full range of case complexity in all forensic settings and in both criminal and civil cases. In this stage, residents build on the skills attained earlier in training to provide legally defensible psychiatric assessments and reports, and testimony before courts or tribunals. They provide consultation, treatment, and rehabilitation of complex patients in the inpatient setting. They develop their role as a leader within the interprofessional forensic psychiatry clinical team, and as a resource to professionals working within the legal, justice, and correctional systems.

Required training experiences (Core stage):

- 1. Clinical training experiences
 - 1.1. Forensic Psychiatry, with a diverse population of new assessments and active cases in the inpatient and/or outpatient setting, in all of the following domains:
 - 1.1.1. Fitness to stand trial assessments, with application of Canadian jurisprudence
 - 1.1.2. NCRMD assessments, with application of Canadian jurisprudence
 - 1.1.3. Review Board assessments and/or risk assessments
 - 1.1.4. Risk assessments using actuarial and SPJ tools
 - 1.1.5. Consultation, treatment, and rehabilitation of complex patients in a team model
 - 1.1.6. Testimony at Review Board hearings, other tribunals, mock trials, or court
 - 1.1.7. Sexual behaviour assessments
 - 1.1.8. Correctional psychiatry
 - 1.1.9. Civil forensic psychiatry
- 2. Other training experiences
 - 2.1. Formal instruction in
 - 2.1.1. Use of risk assessment measurement tools
 - 2.1.2. Principles of psychological and neuropsychological testing
 - 2.1.3. NCRMD assessments, including special defenses
 - 2.1.4. Dangerous offender and/or long-term offender assessments
 - 2.1.5. Principles of correctional psychiatry
 - 2.1.6. Principles of child and youth forensic psychiatry
 - 2.1.6.1. Youth Criminal Justice Act
 - 2.1.7. Civil forensic issues
 - 2.1.8. Sexual behaviour assessment and treatment
 - 2.2. Review of landmark cases

- 2.2.1. Regina v. Simpson, 1977 CanLII 1142 (ON CA)
- 2.2.2. R. v. Owen, 2003 SCC 33 (CanLII)
- 2.2.3. R. v. Parks, 1992 CanLII 78 (SCC)
- 2.2.4. R. v. Stone, 1999 CanLII 688 (SCC)
- 2.2.5. R. v. Lavallee, 1990 CanLII 95 (SCC)
- 2.2.6. Director of Public Prosecutions v Beard, [1920] AC 479 (HL (ENG))
- 2.2.7. McAskill v. The King, 1931 CanLII 58 (SCC)
- 2.2.8. R. v. Daviault, 1994 CanLII 61 (SCC)
- 2.2.9. R. v. Daley, 2007 SCC 53 (CanLII)
- 2.2.10. R. v. Whittle, 1994 CanLII 55 (SCC)
- 2.2.11. R. v. Mills, 1999 CanLII 637 (SCC)
- 2.2.12. Regina v. Langevin, 1984 CanLII 1914 (ON CA)
- 2.2.13. R. v. Lyons, 1987 CanLII 25 (SCC)
- 2.2.14. R. v. Johnson, 2003 SCC 46 (CanLII)
- 2.2.15. R. v. Gladue, 1999 CanLII 679 (SCC)
- 2.2.16. Reibl v. Hughes, 1980 CanLII 23 (SCC)
- 2.2.17. Morrow c. Hôpital royal Victoria, 1989 CanLII 1297 (QC CA)
- 2.2.18. Athey v. Leonati, 1996 CanLII 183 (SCC)
- 2.2.19. Resurfice Corp. v. Hanke, 2007 SCC 7 (CanLII)

2.3. Career planning

Recommended training experiences (Core stage):

3. Clinical training experiences

- 3.1. Assessments of dangerous offenders
- 3.2. Pre-sentence assessments and/or mitigation factors assessments
- 3.3. Assessments for Youth Criminal Justice Act (YCJA) and adult sentencing of youths
- 3.4. Assessments of forensic issues in older adults
- 3.5. Assessments of forensic issues in individuals with an intellectual disability or developmental disorder
- 3.6. Maximum security forensic facility

4. Other training experiences

- 4.1. Completion and dissemination of a scholarly project
- 4.2. Attendance at CAPL or American Academy of Psychiatry and the Law (AAPL) annual conference
- 4.3. Submission of abstract to CAPL conference
- 4.4. Formal and informal teaching of junior learners and multidisciplinary teams
- 4.5. Review of landmark cases
 - 4.5.1. R. v. Barnier, 1980 CanLII 184 (SCC)
 - 4.5.2. Pinet v. St. Thomas Psychiatric Hospital, 2004 SCC 21 (CanLII)
 - 4.5.3. Mazzei v. British Columbia (Director of Adult Forensic Psychiatric Services),

- 2006 SCC 7 (CanLII)
- 4.5.4. Mental Health Centre, Penetanguishene v. Magee, 2006 CanLII 16077 (ON CA)
 - 4.5.5. R. v. Oickle, 2000 SCC 38 (CanLII)
 - 4.5.6. R. v. Jones, 1994 CanLII 85 (SCC)
 - 4.5.7. R. v. O'Connor, 1995 CanLII 51 (SCC)
 - 4.5.8. Starson v. Swayze, 2003 SCC 32 (CanLII)

Optional training experiences (Core stage):

5. Clinical training experiences
 - 5.1. Parental fitness assessments
 - 5.2. Mental health court/diversion court
 - 5.3. Workplace violence assessments
 - 5.4. Stalking assessments
 - 5.5. Domestic violence assessments
 - 5.6. Probation/parole assessments
6. Other training experiences
 - 6.1. Participation in the administrative activities of the program and/or institution

TRANSITION TO PRACTICE (TTP)

This stage focuses on the consolidation of skills required for practice, including triaging referrals and managing a typical workload of cases. The setting(s) for the clinical experiences of this stage may be individualized in response to the resident's interest and/or future career goals. This stage also focuses on preparation for the non-clinical aspects of practice management with instruction in areas of administrative and professional responsibility, including billing, office management, development of a professional curriculum vitae (CV), and the development of plans for lifelong learning and professional development.

Required training experiences (TTP stage):

1. Clinical training experiences
 - 1.1. Any forensic psychiatry experience
2. Other training experiences
 - 2.1. Formal or informal instruction in
 - 2.1.1. Practice management, including contract and retainer negotiation, and aspects of running a private office
 - 2.1.2. Billing
 - 2.1.3. Preparation for first year of practice, including mentorship and support for that transition
 - 2.1.4. Continuing professional development requirements
 - 2.1.5. Mitigation of complaints, and the complaints process at regulatory College

2.1.6. Licensure and regulatory requirements

2.2. Review of CV, including the list of cases over the training period

CERTIFICATION REQUIREMENTS

Royal College certification in Forensic Psychiatry requires all of the following:

1. Royal College certification in Psychiatry;
2. Successful completion of the Royal College examination in Forensic Psychiatry; and
3. Successful completion of the Royal College Forensic Psychiatry Portfolio.

NOTES:

The Forensic Psychiatry Portfolio refers to the list of entrustable professional activities across all four stages of the residency Competence Continuum, and associated national standards for assessment and achievement.

In the Foundations stage, section 1.1, the inpatient and/or outpatient settings must provide experience with new assessments and active cases and with fitness to stand trial and treatment order assessments and reports; NCRMD assessments and reports; risk assessment and reports; and assessment and management of, and provision of reports for, Review Board patients.

ACCREDITATION COUNCIL FOR GRADUATE MEDICAL EDUCATION (ACGME) ACCREDITED TRAINING IN FORENSIC PSYCHIATRY AND ROYAL COLLEGE CERTIFICATION

1. Eligibility for examination

Individuals who have completed training in an ACGME accredited program in Forensic Psychiatry may be eligible for the Royal College examination in Forensic Psychiatry if they

- a) hold Royal College certification in Psychiatry; and*
- b) demonstrate evidence of significant supervised experience in application of Canadian jurisprudence completed after general Psychiatry training.*

2. Eligibility for certification

Individuals who have completed training in an ACGME accredited program in Forensic Psychiatry may be eligible for the Royal College certification in Forensic Psychiatry if they

- a) hold Royal College certification in Psychiatry; and*
- b) successfully complete the Royal College examination in Forensic Psychiatry.*

MODEL DURATION OF TRAINING

Progress in training occurs through demonstration of competence and advancement through the stages of the Competence Continuum. Forensic Psychiatry is planned as a one-year residency program. There is no mandated period of training in each stage. Individual duration of training may be influenced by many factors, which may include the resident's singular progression through the stages, the availability of teaching and learning resources, and/or differences in program implementation. Duration of training in each stage is therefore at the discretion of the faculty of medicine, the competence committee, and the program director.

Guidance for programs

The Royal College Specialty Committee in Forensic Psychiatry's suggested course of training, for the purposes of planning learning experiences and schedules, is as follows:

2 weeks in Transition to Discipline

3 months in Foundations of Discipline

8 months in Core of Discipline

2-4 weeks in Transition to Practice

Guidance for postgraduate medical education offices

The stages of the Competence Continuum in Forensic Psychiatry are generally no longer than

2 weeks for Transition to Discipline

3 months for Foundations of Discipline

8 months for Core of Discipline

4 weeks for Transition to Practice

Total duration of training – 1 year

This document is to be reviewed by the Specialty Committee in Forensic Psychiatry by December 31, 2022.

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