

## INTRODUCTION

### ***About Institute of Mental Health (IMH)***

Located at Buangkok Green Medical Park, Institute of Mental Health (IMH) is a 2,000-bed acute tertiary psychiatric hospital that offers a comprehensive range of psychiatric, rehabilitative and counselling services for children, adolescents, adults, and the elderly.

IMH believes in providing holistic integrative mental healthcare. Its modern facilities complement evidence-based multidisciplinary practices ranging from clinical psychology, nursing, occupational therapy, to medical social work.

As Singapore's only tertiary psychiatric care institution, IMH nurtures the next generation of mental healthcare practitioners through the NHG-AHPL Residency Programme, and collaborate with the local tertiary institutions, continuing its tradition of care since 1928.

### ***About Department of Emergency and Crisis Care (DECC)***

IMH is the only hospital in Singapore with a round-the-clock psychiatric Emergency Services. The Department of Emergency and Crisis Care (DECC) anchors the provision of psychiatric emergency and crisis care services in IMH, which include the following:

- a. Emergency Services (ES)
- b. Short Stay Unit (SSU)
- c. High Dependency Psychiatric Care Unit (HDPCU)
- d. 24/7 Psychiatric Crisis Hotline with supporting Ambulatory Crisis Teams

To enhance your experience with us, you will be rotated across the Emergency Services (ES), the Short Stay Unit (SSU) and High Dependency Psychiatric Care Unit (HDPCU) to maximise your exposure and learning. You will also have the opportunity to learn from highly experienced emergency psychiatrists in assessing, managing and treating psychiatric and suicidal patients, as well as gaining the unique and invaluable experience in working closely with our Multi Disciplinary Team (MDT) in a dynamic psychiatric emergency care setting.

#### Emergency Services (ES)

IMH's ES is the only tertiary-level, dedicated psychiatric facility designed to evaluate and treat patients presenting with behavioural health crises and emergencies in Singapore. It is a 24/7 psychiatric emergency service that sees patients from direct self-referral, other healthcare institutions and from partners such as the Singapore Police Force. The service conducts psychiatric and medical assessment, stabilization, and immediate management for patients presenting to IMH ES, which includes thorough assessment and management suicidal and aggression risks.

#### Short Stay Unit (SSU)

The SSU is a short-term (72 hours) crisis stabilisation inpatient service that assists with the de-escalation of patients' distress and/or addressing the urgent care needs associated with their mental health disorder. Available evidence supports that crisis residential care is as effective as other longer psychiatric inpatient care at improving symptoms and functioning, thereby minimising unnecessary admissions to acute psychiatric care wards.

### High Dependency Psychiatric Care Unit (HDPCU)

HDPCU is IMH's only intensive care facility for rapid stabilisation and management of very acutely disturbed, aggressive, violent, and suicidal patients who cannot be safely and effectively managed in the general acute wards. Aligned with best practices internationally, HDPCU's care model includes intensive nursing and medical management in a safe and secure environment, and psychological therapies.

Emergency Psychiatry is a dynamic subspecialty area that requires comprehensive knowledge beyond the general medicines and mental health conditions, as well as unique assessment and clinical skills to best provide care to a challenging patient population.

### **TITLE OF PROGRAMME**

Clinical Fellowship in Emergency Psychiatry

### **NAME OF PROGRAMME DIRECTOR**

Dr Bhanu Gupta, Senior Consultant, Dy Chief, DECC

### **DURATION OF PROGRAMME**

Full time, 42 hours per week for a minimum of 6 months and up to 1 year.

Successful applicants are not eligible for reimbursement or benefits.

### **OBJECTIVES**

The main objectives for Clinical Fellows are:

1. To enhance psychiatry knowledge and skills in an emergency psychiatry setting;
2. To gain exposure and experience in adult psychiatry practice and mental health services;
3. To develop leadership in the use of psychosocial model and multidisciplinary team approach.

Secondary objectives include:

1. To participate in ward rounds, journal readings, case conferences and other training programmes;
2. To experience cross cultural psychiatric practice in a multicultural society;
3. To gain exposure in clinical quality and patient safety activities.

### **MINIMUM ENTRY REQUIREMENTS FOR APPLICATION AS A CLINICAL FELLOW – REGISTRAR LEVEL**

1. Meets SMC basic requirements for Temporary Registration as a Clinical Fellow;
2. At least 6 months experience in General Psychiatry;
3. Appropriate management and organization experience;
4. Good oral and written communication skills;
5. Proven ability to work well in multidisciplinary teams;
6. Exhibit professionalism and commitment;
7. References and testimonials, if available.

### **MINIMUM ENTRY REQUIREMENTS FOR APPLICATION AS A CLINICAL FELLOW – MEDICAL OFFICER LEVEL**

1. Meets SMC basic requirements for Temporary Registration as a Clinical Fellow;
2. At least 12 months experience in General Psychiatry;
3. Appropriate management and organization experience;

4. Good oral and written communication skills;
5. Proven ability to work well in multidisciplinary teams;
6. Exhibit professionalism and commitment;
7. References and testimonials, if available.

## **KNOWLEDGE AND SKILL AREAS/ KEY CLINICAL CASES**

### *Knowledge and Skills*

At DECC, we look forward to helping you build up core competencies in Emergency Psychiatry, including:

1. Conducting comprehensive psychiatric assessments, including detailed exploration of psychosocial stressors, suicidal and violence risk assessments, differential and dual diagnoses.
2. Developing appropriate treatment plans that involve dispositions to inpatient, outpatient, and connecting to community partners programme.
3. Developing suicidal and aggressive risk management strategies by involving family and community support networks for patients discharged from ES.
4. Multidisciplinary teamwork
5. Consultation liaison

## **COMPONENTS, FREQUENCY & METHOD OF TRAINING (CLINICAL AND/OR NON-CLINICAL)**

1. Registrar-level or MO-level duties in the department's services (e.g. attachments to wards, emergency services etc) – daily and will involve night duties if needed;
2. Regular supervision and teaching with assigned supervisors – weekly/ monthly;
3. Regular training involvement (e.g. ward rounds, case discussions, journal readings, case conferences etc) – as arranged;
4. Night duties at ES may be scheduled.

### MAXIMUM INTAKE

Maximum of 2 clinical fellows at any one time

## **HOSPITALS AND CLINICAL DEPARTMENTS IN WHICH TRAINEES WILL BE ROTATED THROUGH**

Name of Dept	Name of Institution	Frequency of Practice (in %)
Department of Emergency and Crisis Care	Institute of Mental Health	100

## **METHOD (S) OF TRAINEE SUPERVISION**

Individual and group supervision by a senior clinician who is the assigned supervisor, and on-the-job supervision by senior clinicians in the department.

## **METHOD (S) OF TRAINEE ASSESSMENT**

360 degree feedback, mid-fellowship and end-of-fellowship work performance reviews.

## **CRITERIA FOR EARLY TERMINATION OF PROGRAMME**

1. Unprofessional or unethical behaviour
2. Serious breach of patient confidentiality
3. Serious and founded complaints by patients or staff
4. Any behaviour that could compromise effective teamwork

**FEEDBACK AND COUNSELLING PROCEDURES (BETWEEN SUPERVISORS AND TRAINEES)**

To be done during individual supervision sessions.

**RESPONSIBLE TO**

1. DECC Supervisor assigned
2. Clinical Chief of DECC