

Clinical Fellowship in Addiction Medicine

## **INTRODUCTION**

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

The Institute of Mental Health (IMH) is a 2,000-bed acute tertiary psychiatric hospital situated on a 23-hectare campus at Buangkok Green Medical Park. Set amidst serene surroundings, IMH offers a comprehensive range of psychiatric, rehabilitative and counselling services for children, adolescents, adults, and the elderly.

IMH's tradition of care started in 1928. It was the first mental hospital in Singapore, starting with some 1,000 patients. Since then, many advances have been made in treatment, training, and research. The treatment integrates evidence-based therapies, supported by the departments of clinical psychology, nursing, occupational therapy, and medical social work, to provide holistic care for our patients. IMH is equipped with modern facilities, with 50 wards for inpatients and seven Specialist Outpatient Clinics.

IMH also plays a key role in training the next generation of mental health professionals in Singapore. IMH trains psychiatrists and mental health professionals through the NHG-AHPL Residency Programme for psychiatry and through collaborations with the local tertiary institutions.

### **About the National Addictions Managements Service (NAMS)**

NAMS is managed by a multi-disciplinary team of specialists who provide total abstinence based treatment for a broad range of addictions, i.e. addiction to drugs, alcohol, gambling, gaming and other forms of behavior addictions. Located within IMH, NAMS comprises of an outpatient clinic which provides consultation and counselling services and an inpatient ward (Serenity Centre) which provides residential detoxification and rehabilitation services. NAMS' services include individual counselling, group psychoeducation, pharmacological treatments for addictions, comorbid dual diagnosis management, family therapy as well as support group programs for patients and their family members.

NAMS is the Centre of addiction medicine training in Singapore. All residents in psychiatry training and medical students have to complete a posting in NAMS as part of attaining their core clinical competencies. NAMS contributes to teaching in Graduate Diploma in Mental Health[GDMH]Program for the primary care physicians. NAMS continues to work more closely

with numerous community partners, other healthcare service providers, in order to build a continuum of care for the recovering addiction clients.

As part of outreach services to partners, NAMS conducts training to help them identify and assess high-risk behaviors at early stages which enables partners to conduct brief interventions, and make referrals to NAMS clinic. NAMS conduct forums and talks regularly to educate the public on addiction-related topics, such as the signs and symptoms of addictive behaviors, treatment options, and the need to seek help early.

NAMS' research team evaluates the effectiveness of its treatment programs by conducting regular assessments of substance use, gambling behavior, quality of life and patients' satisfaction with treatment received at NAMS. It also conducts research studies on pharmacotherapies and psychological interventions to enhance recovery from addiction, as well as investigating neurobiological and psychological correlates and risk factors for addictive disorders.

#### **TITLE OF PROGRAMME**

Clinical Fellowship in Addiction Medicine, IMH

#### **NAME OF PROGRAMME DIRECTOR**

Dr Gomathinayagam Kandasami, Chief, Department of Addiction Medicine, IMH

#### **DURATION OF PROGRAMME**

Full time, 42 hours per week, duration of 6 months to 12 months. Maximum duration of 12 months

No night duties.

Fellowship is self-funded and successful applicants are not eligible for reimbursement or benefits.

#### **OBJECTIVES**

Key objectives of this clinical fellowship program are to introduce;

1. Holistic psychiatric assessment of substance and behavior disorders use disorders
2. Good practices of Addiction Medicine assessment by ensuring good clinical history of substance use disorders, detecting co-morbidity, performing risk assessment, conducting assessment of motivation to change, developing a total abstinence treatment plan via multi-disciplinary team approach and engaging families with consent
3. NAMS inpatient program which involves 2-prong approach, i.e. detoxification and rehabilitation

4. NAMS post-detox outpatient, recovery-based and relapse prevention program [for e.g. psychiatric treatment of comorbid disorders, individual and group based peer support counseling sessions]
5. Clinical management and risk assessments of dually disordered patients in Forensic and General Psychiatric settings
6. NAMS Community Addiction Program
7. Partnership with external agencies such as WECARE, Halfway Houses and understanding prison based rehabilitation services for ex-offenders such as visits to Singapore Anti-Narcotics Association [SANA].
8. Research initiatives in the arena of Addiction Medicine
9. Training and Outreach activities

### **MINIMUM ENTRY REQUIREMENTS**

1. Medical Degree from accredited medical university
2. Meets Singapore Medical Council [SMC]'s basic requirements for Temporary Registration as a Clinical Fellow
3. At least 6 months' experience in General Psychiatry
4. Been registered as a medical practitioner in the country where he/she is currently practicing
5. Been certified to be of good standing by his/her country's medical council or relevant national authority
6. Fulfill English language requirements of SMC
7. Appropriate management and organization experience
8. Good oral and written communication skills
9. Proven ability to work well in multidisciplinary teams
10. Exhibit professionalism and commitment
11. References and testimonials, if available

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

#### **Knowledge and Skills**

1. Diagnostic interviews and mental state examinations
2. Motivational Interviewing (MI) skills
3. Differential diagnoses
4. Diagnosing Dual disorders
5. Case formulation
6. Management of substance use disorders and behavioral addictions
7. Management of dual disorders
8. Crisis and risk management in substance and dual disorders
9. Detoxification with symptomatic medications
10. Understanding the role of physical assessment /investigations in substance use disorders and the specialist referral processes for the treatment chronic infections like Hepatitis C, HIV.
11. Multidisciplinary Teamwork (MDT)

12. Individualized Discharge planning and follow-up care after the inpatient treatment
13. Pharmacological management of alcohol and substance use disorders
14. Assessment and treatment of behavior addictions [cyber gaming, sex]
15. CBT based individual counseling approach
16. Running group counseling sessions
17. Medico legal reports writing
18. Understanding forensic interface with substance use disorders
19. 12 steps based recovery programs
20. Role of peers and volunteers support in recovery
21. Role of community based rehabilitation in recovery

### Key Clinical Areas

#### 1. NAMS Outpatient Services

- Sit-in sessions with Doctors, daily for 1 month, subsequently be able to run clinic independently with on-site supervision of cases for 8 months
- Methadone clinic sit-in, fortnightly for 2 months
- Sit-in sessions with two different Counsellors, twice weekly for 8 months
- Sit- in outpatient MDT sessions
- Sit-in once weekly sessions with MSW [ Medical social worker] for 3 months
- Attend evening weekly BRIDGE group sessions for 3 months
- Attend evening weekly BRIDGE Family group sessions for 3 months
- Attend GAME (Gambling Addiction Management through Education), for 1 month
- Attend GAME FAMILY sessions for 1 month
- Attend AA meetings for 1 month

#### 2. NAMS Inpatient Program

Two days a week at the Inpatient unit covering the following for 8 months

- Sit-in morning ward rounds
- Sit -in inpatient MDT Sessions
- Follow counsellors for intake assessments
- Sit -in group counseling sessions
- Sit- in individual counseling sessions
- Interviewing the inpatients for intake and review assessments
- Sit -in with senior NAMS specialists for case discussions

#### 3. Community based treatment and rehabilitation Services (for observation)

- Attachment in NAMS Community Addiction Program [CAP team Attachment]
- Attachment at WECARE day rehabilitation program for 1 week
- Attachment at Halfway House for 1 week [ preferably Highpoint]
- Visits to prison based rehabilitation services [ SANA, SACA, NCADA]

#### 4. Academic /RESEARCH/ medico legal reports training

- Attend weekly NAMS Grand Ward Rounds (GWR)
- Attend once a year NAMS / zonal joint GWR sessions
- Attend weekly Journal Club sessions at NAMS

- Weekly one-hour individual supervision with NAMS supervisor
  - MI training done by NAMS Counsellor [ 2 hours one training session]
  - Understanding the NAMS counseling manuals
  - IMH Continuous Medical Education [CME] sessions
  - Sponsoring for one local Addiction Conference [ APBAM Singapore]
  - Discussion with NAMS senior specialists on the role of addiction specialists as an Expert Witness and in forensic assessments
  - Sit-in with Research assistants at NAMS Clinic to understand Treatment Outcome Monitoring [TOM] assessments and attendance at research meetings
5. Forensic Psychiatry [ 1month posting]
- Sit-in with a Consultant for Forensic Assessments
  - Attachment at forensic remand ward
  - Sit-in outpatient clinic sessions
  - Attend weekly ward MDT meetings
  - Attend GWR and Journal Clubs
6. General Psychiatry [ 1 month posting]
- Sit-in morning rounds in general psychiatric ward
  - Attend weekly ward MDT meetings
  - Attend Zonal GWR and Journal Club sessions
  - Accompanying Ipharm assessments on the General psychiatric ward with NAMS Counselors

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

Components of training include:

1. Observational Attachments and running clinics at NAMS outpatient clinic
2. Attachments at NAMS inpatient unit
3. Observational Attachments to Halfway Houses and community based Rehab agencies [WECARE]
4. Observational Attachments to General Psychiatry and Forensic Psychiatry treatment settings
5. Sit-in observations at multidisciplinary team meetings at NAMS
6. Sit -In observations at evening support groups
7. Regular weekly supervision and teaching with assigned supervisor and other senior NAMS specialists
8. Regular attendance at weekly academic and monthly research meetings at NAMS
9. Presentations at academic sessions
10. Periodical attendance at IMH CME meetings
11. Writing simple medico legal reports related to addictions under supervision

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

1. Department of Addiction Medicine

2. The fellow/doctors may be attached to other departments for exposure and for observation only. The attachment is usually for one month. Other departments include:
  - General and Forensic Psychiatry
3. The fellow will be sent to community-based rehabilitations services for observation as part of the training program

Name of Department	Name of Institution	Frequency of Practice (in percentage)
Department of Addiction Medicine	Institute of Mental Health	100%

**AREAS SERVICED**

Department of Addiction Medicine, IMH

**MAXIMUM INTAKE**

Maximum of 2 clinical fellows at any one time

**METHOD (S) OF TRAINEE SUPERVISION**

Individual supervision by a Department of Addiction Medicine consultant who is the assigned supervisor.

The fellow will be supervised at all times by a SMC-approved supervisor from Department of Addiction Medicine, IMH.

**METHOD (S) OF TRAINEE ASSESSMENT**

- 360-degree feedback at mid-fellowship and end-of-fellowship
- Work performance reviews at mid-fellowship and end-of-fellowship

**CRITERIA FOR EARLY TERMINATION OF PROGRAMME**

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

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

Counselling and feedback to be conducted during individual supervision sessions with the Chief of Department and Supervisors.

### **RESPONSIBLE TO**

1. Supervisor-in-charge (Department of Addiction Medicine, IMH)
2. Clinical Chief (Department of Addiction Medicine, IMH)