

Christchurch Psychiatric Registrar Training Programme
(Incorporating Nelson)
The Walshe Centre

 **Telephone:** +64 +3 366 8244

 **Fax:** +64 +3 365 3150

 **Address:** 71 Durham Street South, Sydenham
Christchurch 8023

 **Email:** **Co-Directors of Training:**
alan.faulkner@cdhb.health.nz
carol.dean@cdhb.health.nz

Administration:
bridget.benoit@otago.ac.nz

Co-Directors of Training:

Dr Alan Faulkner

MB ChB (Auckland), FRANZCP

Dr Carol Dean

FRANZCP

Administration:

Mrs Bridget Benoit

CONTENTS

- ❖ Letter from the Director
- ❖ Why specialize in Psychiatry?
- ❖ Career Prospects
- ❖ What does the future hold for Psychiatry?
- ❖ Training in Psychiatry
- ❖ Overview of the Christchurch Programme
- ❖ How is Training organised in the Christchurch programme
- ❖ What about psychotherapy training?
- ❖ Are there any opportunities for Trainees to do research?
- ❖ How is the training committee organised?
- ❖ What are the consultants like?
- ❖ Is there any local assessment?
- ❖ What about part-time training or breaks in training?
- ❖ Who employs Psychiatric Registrars?
- ❖ Are there any other advantages of training in Christchurch?
- ❖ What about the Christchurch Earthquakes?
- ❖ Who can apply to become a Trainee?
- ❖ How to apply

The Walshe Centre

Christchurch Psychiatric Registrar Training Programme (incorporating Nelson)

3 May 2016

Dear Doctor
Kia Ora!

Thank you for taking the time to consider the possibility of training as a Specialist Psychiatrist in Christchurch, New Zealand. As Co-Directors of Training of our training programme, we can assure you that pursuing training here would give you an excellent start to a fascinating and rewarding career in mental health care.

The distinctions of the Christchurch programme are easy to list:

- Our academic Department of Psychological Medicine is internationally respected for its strong research output and the quality of its teaching.
- Our District Health Board is committed to training and serves a large community.
- We have many attachments covering a very broad range of psychiatric subspecialties.
- The Registrar group is small enough at around 25 to be cohesive and supportive.
- The city is large enough to function as a truly modern city with great cultural and sporting opportunities, all embedded in a beautiful environment with very wild, unspoiled mountains, forests and coasts nearby.

Please read through the information in this booklet and consult the relevant websites detailed in it. If there is anything we can do to help, our excellent administration staff and we will be only too pleased to give you advice – email us, phone us or just drop in!

Yours sincerely

Dr Alan Faulkner and Dr Carol Dean
Co-Directors of Training

A joint programme of the Canterbury District Health Board and the University of Otago, Christchurch
www.otago.ac.nz/christchurch/departments/psychmed/registrartraining
The Walshe Centre, 71 Durham Street South, Christchurch 8023
Ph: +64 3 3668244, Fax: +64 3 3653150 Email: bridget.benoit@otago.ac.nz

WHY SPECIALISE IN PSYCHIATRY?

It is in the development of the mind that evolution has most distinguished us from other species. That makes disorders of the mind the most human part of medicine: complex, often difficult, but rewarding. Psychiatry is certainly a branch of medicine in which there is no such thing as a 'routine case' since no two people are ever the same, so it keeps on being challenging and interesting. It melds the art and science of medicine in a unique way.

CAREER PROSPECTS

New Fellows are presently experiencing a relative ease in securing consultant posts soon after completing their FRANZCP because of a bi-national shortage of psychiatrists. A number of developing areas within psychiatry and alternative models for the provision of care will offer more opportunities in the future. Areas of interest (to name a few) include:

- Child and Adolescent Psychiatry
- Community Psychiatry
- Emergency Psychiatry
- Forensic Psychiatry
- Consultation Liaison Psychiatry
- Old Age Psychiatry
- Psychotherapy
- Rehabilitation Psychiatry

WHAT DOES THE FUTURE HOLD FOR PSYCHIATRY?

Psychiatry is in a period of change. Treatment services are primarily provided in psychiatric hospitals and community settings with the emphasis remaining on the latter, and medical mental health professionals work alongside other health workers. Major advances in biological, psychological and social treatments in psychiatry continue. New antipsychotic, antidepressant and other psychotropic drugs are continually being developed and marketed. The value of psychological and behavioral therapies in treating specific disorders is only now being fully realised and integrated with other treatments. The important principles of psychodynamic theory are also being appreciated and employed by increasing numbers of psychiatrists in relation to general psychiatry as well as psychotherapy. A great deal of importance is placed on the awareness of the social environment and its supports in determining the long-term outcome of psychiatric illness and in implementing strategies for the prevention of psychiatric morbidity in the future.

As well as developments in service provision and therapeutics, there has been an explosion in basic and applied research on the brain in recent decades. These advances in neurobiology will undoubtedly increase our understanding of disorders and further improve therapeutic effectiveness.

TRAINING IN PSYCHIATRY

The Royal Australian and New Zealand College of Psychiatrists defines the training requirements and sets the examinations for Fellowship of the College. This is the principal post-graduate qualification in psychiatry in Australasia and it is automatically recognized in Australia and New Zealand. Full details of the regulations governing training are available from the College website: www.ranzcp.org

To be accepted into the RANZCP training programme in New Zealand, doctors need to have completed a minimum of two year Full Time Equivalent (FTE) medical officer (House Surgeon) experience after gaining their medical degree. After commencing training, the psychiatric trainee gains clinical experience in a variety of specified areas of psychiatry over a minimum period of five years.

Training is organised along apprenticeship lines with each trainee having specified consultant supervisors who have direct responsibility for the care and management of the trainee's patients. Individual face-to-face supervision of at least one hour per week (two hours per week for first year trainees) provides a forum for detailed discussion of clinical and theoretical issues, which along with group supervision makes up the minimum requirement of at least four hours supervision per week. Part-time training is accepted. Many Christchurch trainees, for example, have taken some time out to parent their families.

The RANZCP training in psychiatry involves the completion of a minimum of five years of training. This is broken into three blocks: Stage 1 (1st year), Stage 2 (2nd and 3rd years) and Stage 3 (4th, 5th and 6th years). For each stage of training, trainees achieve a number of predetermined competencies which are assessed internally by Supervisors. There are also external assessments including the write up of a formal case history, the completion of a scholarly project and written and clinical examinations. These external assessments are weighted towards the end of training.

In addition to the core, generalist psychiatric training, trainees have the option of doing specific approved sub-specialty training. This is generally a two year training which gives the individual very high levels of skill and sub-specialty expertise. Christchurch offers such sub-specialty training in areas including:

Adult	Drug & Alcohol (one of the two years only)
Forensic	Consult-Liaison
Psychotherapy	Older Persons Mental Health
Child & Adolescent	

Trainees are Associates of the College which confers a number of benefits including receiving the College journals: The Australian and New Zealand Journal of Psychiatry and Australasian Psychiatry. There are around 1,100 accredited psychiatric trainees in Australian and New Zealand and around 3,645 Fellows of the RANZCP, many of whom play an active role in the training program as supervisors and/or in local didactic programmes.

IS THERE ANY LOCAL ASSESSMENT?

New RANZCP training regulations, introduced in late 2012, and based on the CANMEDS model of workplace based assessment, have greatly strengthened the contribution of local assessment throughout the programme. At the half way point and at the completion of each six-month attachment, there is a formal opportunity for discussion of the trainees progress with his or hers supervisor. Both areas of strength and areas for growth are identified and documented. Trainees are also asked to discuss and formally document the quality of the training experience and supervision they have received.

Our new training framework places a strong emphasis on work place based assessments of training. Throughout training, specific target competencies are designated, these being appropriate for the level of experience and maturity of the trainee. These competencies (called Entrustable Professional Activities) are assessed throughout training by the supervisors working with the trainee in real world situations.

OVERVIEW OF THE CHRISTCHURCH PROGRAMME

Christchurch has a well-established specialist training programme in Psychiatry which has now been running for over forty years. The Training Programme is integrated with the clinical services provided by Canterbury District Health Board (www.cdhb.govt.nz) with academic input from the Department of Psychological Medicine of the University of Otago, Christchurch (<http://www.otago.ac.nz/christchurch/departments/psychmed/registrartesting>) and is focused around Trainees gaining the qualification of FRANZCP (Fellowship of the Royal Australian and New Zealand College of Psychiatrists).

The Christchurch Programme has an establishment of around 25 FTE training posts located in a wide variety of service locations. These include Hillmorton Hospital (the regional psychiatric hospital), Christchurch Public and Women's Hospitals, Princess Margaret Hospital, Burwood Hospital and Community Clinics. These posts involve clinical work in outpatient, daypatient and inpatient settings, together with work in the community and in prisons.

A wide range of clinical attachments are available in Christchurch including:

- * Adult General Psychiatry
- * Community Psychiatry
- * Emergency Psychiatry
- * Consultant-Liaison Psychiatry
- * Child and Adolescent Psychiatry
- * Forensic Psychiatry
- * Addiction Psychiatry
- * Older Persons Mental Health
- * Eating Disorders
- * Anxiety Disorders
- * Mothers and Babies Psychiatry
- * Rehabilitation
- * Psychiatry of people with intellectual disability
- * First-episode psychosis
- * Rural Psychiatry
- * Psychotherapy

All posts are supervised by consultant psychiatrists who are approved by the RANZCP and it is the apprenticeship training in these posts that forms the mainstay of training. Added to this is regular teaching for all Trainees, consisting of didactic as well as practical sessions on a comprehensive range of topics in clinical psychiatry. A preparation programme for registrars attempting the FRANZCP Exams is also arranged. Trainees take an active part in weekly Psychiatry Clinical Meetings and are welcome to attend research meetings held fortnightly by the Department of Psychological Medicine as well as benefiting from visits by visiting academics.

Once you are successful in your application to join the Psychiatric Training Programme in Christchurch, the local Training Committee will take responsibility for ensuring you have a full set of supervised clinical runs that not only suit your personal needs and interests but also meet the RANZCP requirements for accredited training.

HOW IS TRAINING ORGANISED IN THE CHRISTCHURCH PROGRAMME

The over-riding emphasis of the Training Programme is on the individual apprenticeship of the trainee with their Supervisors. In terms of the didactic training sessions, trainees are currently divided into three main groups. There is a separate programme for Stage 1 (1st year) Registrars. There is a 2 year long didactic programme for Stage 2 (2nd and 3rd year) Registrars and an additional stream for the Stage 3 trainees completing their generalist training and/or embarking on additional sub-specialty training. All trainees have dedicated weekly time off for training. Stage 1 and Stage 2 trainees have a half day off each week of the year (Thursday mornings) as do Stage 3 trainees (Thursday afternoons)

Most of the formal education (didactic) programme is concentrated in the first 3 years of psychiatric training. Here, trainees have access to a weekly, structured training programme utilizing medical and other skilled teachers, many of whom are allied with the Department of Psychological Medicine. This core teaching covers a wide curriculum, consistent with the RANZCP training regulations. Again, there is a dedicated curriculum for 1st year trainees which focuses on basic interviewing skills and the assessment and management of common conditions in general adult psychiatry as well as providing an introduction to the practice of psychotherapy. This is followed by a 2 year long educational programme which expands on the basic concepts of 1st year, looking at a wider range of psychiatric disorders and special populations (such as child psychiatry, forensic psychiatry or old age psychiatry).

Registrars sitting College Written and Clinical examinations form small study groups and receive input to assist their preparations including formal Mock exams, secretarial assistance to collate past papers, consultant feedback, informal practices and overarching guidance as required. As well as this examination focus, Stage 3 trainees will participate in a peer driven but consultant supervised series of seminars, presentations including peer review, leadership and management and journal club in accordance with RANZCP training requirements. Sub-specialty Certificate trainees, who may commence this sub-specialty training in Stage 3 and complete it as a junior consultant, will receive extra input according to their training programmes.

A distinctive part of the Christchurch Programme is its close links with the strong academic Department of Psychological Medicine (part of the University of Otago in Christchurch), with many able teachers and researchers, as well as frequent visits from internationally recognised Psychiatrists.

Another key factor that commends Christchurch is its combination of a reasonably sized scheme with all the benefits of a wide range of specialist runs and supervisors, and its modest-sized host city which means that trainees can form a cohesive group that meets regularly. Runs are generally based within 10 – 15 minutes of the city hospital.

WHAT ABOUT PSYCHOTHERAPY TRAINING?

Psychotherapy training is an integral part of the Christchurch Psychiatric Training Programme. It is an important component of the formal education programme during the first 3 years of training. In addition to more didactic psychotherapy teaching, trainees conduct psychotherapy under supervision. Starting towards the end of the first year, an hour per week of psychotherapy supervision (in addition to regular clinical supervision) is provided. The aim is for all trainees to gain a basic understanding of the main psychotherapeutic techniques and to complete the College requirements for experience in this field.

ARE THERE ANY OPPORTUNITIES FOR TRAINEES TO DO RESEARCH?

Research is an important part of specialist psychiatric training. Trainees in Christchurch are encouraged to become involved in at least one research project at some point during the Programme. One of the assessment requirements during training is to do a scholarly project. Many trainees choose to do a research project for this, though it could take other forms such as a quality improvement project or an appropriate clinical audit. Even for those with no long-term interest in research, involvement in a project will increase awareness of the strengths and limitations in different research methodologies and enable more critical reading of the psychiatric literature. Subject to appropriate supervision and ethical approval, research may be undertaken at any time and in any setting, and involve any topic of interest. It is usually easier for trainees to become involved with pre-existing projects, but new ideas and new projects are actively encouraged. There are, however, no mandatory requirements to do research.

The Christchurch Psychiatric Training Programme has strong links with the Christchurch School of Medicine's Department of Psychological Medicine, through which excellent opportunities for doing research are available to trainees. Research within the Department has increased markedly over the past ten years and has involved diverse perspectives (clinical, epidemiological and neurobiological). Current areas of interest are:

- * Alcohol and Drug Disorders
- * Anxiety Disorders
- * Childhood and Adolescent Development
- * Psychotherapy
- * Eating Disorders
- * Mood Disorders
- * Personality Disorders
- * Suicide
- * Forensic Psychiatry
- * Older Persons Mental Health

For those Trainees who develop a major interest in research, The Department of Psychological Medicine in Christchurch is now an academic centre of international stature. Members of the Department are involved in the Training Programme as supervisors, tutors and Training Committee members.

HOW IS THE TRAINING COMMITTEE ORGANISED?

The Christchurch Training Committee consists of:

- * Directors of Training, Advanced Training and Psychotherapy Training
- * Two elected clinical supervisors and one or two academic psychiatrists
- * Three elected trainees
- * Three ex-officio members

The ex-officio members are: the Head of the University Department of Psychological Medicine, the Service Manager responsible for Psychiatry Registrars and the Clinical Director responsible for Psychiatry Registrars. Other members are elected onto the committee at regular intervals. There is a bi-monthly meeting of the Training Committee. The clinical supervisors all meet separately four times a year to discuss aspects of supervision.

In the present environment of accountable and cost-driven public health services, the Training Committee functions as an assertive lobby group to ensure that training needs are not ignored.

WHAT ARE THE CONSULTANTS LIKE?

There is a capable, energetic group of psychiatrists in Canterbury. The level of commitment to maintaining and improving our Training Programme is high. Despite Consultants' busy clinical loads, trainees are well supported and seldom have difficulty getting their training needs met. Most clinical teams have a relatively flat power structure and a multi-or inter-disciplinary focus so Registrars typically feel very much part of the team.

WHAT ABOUT PART-TIME TRAINING OR BREAKS IN TRAINING?

Part-time training or a break in training is possible in Christchurch, provided there is a legitimate reason (eg: parenting) and adequate notice is given. Usually part-time training involves job-sharing with another part-time trainee. We encourage Trainees to gain a year or two of international training experience if this is well thought through.

WHO EMPLOYS PSYCHIATRIC REGISTRARS?

The employing body for Psychiatric Registrars is Canterbury District Health Board.

As part of their employment contract registrars are required to work on-call and remuneration is calculated accordingly. Night shifts are done in blocks of one week at a time, and Registrars are exempt from daytime duties for this period. On-call work is regarded as a necessary part of the Training Programme.

Once a trainee is recruited into the Programme annual re-appointment is normally guaranteed for up to four subsequent years, subject to satisfactory performance and payment of training fees. Training for longer than five years is certainly possible and is assessed on a case-by-case basis.

ARE THERE ANY OTHER ADVANTAGES OF TRAINING IN CHRISTCHURCH?

Christchurch - the Garden City - is a beautiful environment in which to live and work. It is a large city by New Zealand standards and so has all the amenities of a larger centre, but in a compact, accessible form. City highlights include: Christchurch International Airport, the various facilities of the University of Canterbury and the University of Otago's Christchurch campus, the Canterbury Museum, Art Gallery and other galleries of repute, libraries, the Court Theatre, numerous cinemas, restaurants, cafes and bars, the Casino, the renowned Christchurch Botanical Gardens, Hagley Park, Orana Park (the zoo), numerous first class golf courses.

Whenever an international figure comes to New Zealand, be it a distinguished University Professor or the latest international band, Christchurch will almost invariably be on the itinerary. Further, Christchurch is renowned for its educational facilities, and is fast becoming an international conference and education centre. Its range of high quality primary and secondary schools is well known.

Christchurch is the gateway to Banks Peninsula and the Southern Alps. The countryside surrounding the city offers outstanding outdoor recreation opportunities, such as biking, skiing, hiking and boating. Our temperate climate results in bracing winters and warm, pleasant summers. Several beaches are within half an hours drive, from wild coastal to gentle harbour beaches.

WHAT ABOUT THE CHRISTCHURCH EARTHQUAKES?

Christchurch has been rocked by a series of significant earthquakes since September 2010. It is important that people considering coming to Christchurch to train understand the effects these have had upon the city. For more information, see the Wikipedia entry:

http://en.wikipedia.org/wiki/2011_Canterbury_Earthquake

As of April 2016, the last significant aftershock was on 14 February 2016 (5.7). It had occurred after a period of very little seismic activity in the city and was certainly a reminder of the most significant earthquake five years earlier, though this aftershock was associated with only minor property damage. The overall trend has been very much of a reduction in earthquake activity in the city, though relatively small aftershocks are likely to occur (with decreasing frequency) for quite some time yet.

The mental health effects of the earthquakes were very similar to other natural disasters. After an initial drop in demand for psychiatric services during the early phases post quakes, there was an increase in presentations of all kind of health conditions, including psychiatric disorders. Although there were some true PTSD cases, most of the mental health presentations were with high prevalence disorders such as anxiety and depression. For many in the population, the difficulties dealing with issues such as the dislocation of housing, schooling and work as well as the complicated dealings with the EQC (Earthquake Commission) and insurance companies were more stressful than the direct effects of the quakes themselves. For a period after the initial earthquakes, our mental health services offered earthquake related individual and group treatments at primary care and secondary care levels and the response to the earthquakes was the subject of research. These earthquake specific mental health initiatives have now concluded, but there are still significantly increased rates of referrals of a wide range of mental health problems to Mental Health Services.

It is worth noting that the effects of this series of earthquakes were far from uniform across the city. Many suburbs, particularly those in the North and West of the city, were relatively little affected while

other areas, particularly in the city's Eastern and Hill suburbs as well as the City Centre, sustained significant damage. In the last few years, the focus has been very much on rebuilding. There have been major infrastructure works, particularly replacing underground services and roading, all around the city. The Central Business District, which was badly damaged in the February 2011 earthquake, is being rebuilt and restructured according to a comprehensive redevelopment plan. Most of the private households in the city have now completed their earthquake repairs. All of this rebuild activity has been associated with a boom in the local economy. For a period after the earthquakes, dislocated residents and the influx of rebuild workers meant that housing was in short supply. However, with the repair to many homes being completed and new areas of housing development, this accommodation shortage has greatly improved. Christchurch city residents are now also enjoying new arts, sporting and cultural projects which have helped revitalize the city. The rebuild process is expected to provide us with a truly world-class urban environment.

WHO CAN APPLY TO BECOME A TRAINEE?

Usually, specialist training in Psychiatry begins after a minimum of two year as a house-surgeon has been completed. Not infrequently, however, applications come from Registrars of other specialties and from General Practitioners. Applications are also regularly received from overseas doctors (usually at SHO or Registrar level) who wish to immigrate to New Zealand or to work temporarily in this country. Further information on New Zealand Medical Council requirements can be found on their website (www.mcnz.org.nz). New Zealand immigration information is contained at www.immigration.govt.nz.

Technically, joining our training programme involves two processes. The first is being selected by the RANZCP as appropriate for specialist training in psychiatry. The second is being selected by the employer (Canterbury DHB) as appropriate for a registrar position. These processes are usually combined in a single interview for short listed applicants, this being conducted by representatives of the RANZCP (including the Director of Training and a registrar representative) and the employer.

It is a recent requirement of Health Workforce New Zealand that trainees in all medical specialties be either New Zealand citizens or have Permanent Residency in order for employers (in this case, the Canterbury DHB) to receive a training subsidy. This may influence DHB's in terms of who they select for training positions.

The Training Committee tries to select those applicants who will make the best psychiatrists. Other considerations may include; the likelihood of an applicant completing the FRANZCP qualification, the likelihood of an applicant remaining in Christchurch and New Zealand as a consultant, and at which stage in training an applicant wishes to join the scheme if previous training has been done elsewhere.

Whatever your current circumstances are, don't hesitate to make contact with us if you are at all interested in psychiatric training in Christchurch. We would be most happy to discuss things further and answer any questions you may have.

