

Physical Medicine & Rehabilitation: Transition to Practice EPA #1

Managing a psychiatric practice

Key Features:

- This EPA focuses on a typical psychiatrist's practice – working simultaneously in more than one setting (e.g. covering more than one clinical service at a time, teaching, committees)
- This includes contribution to team functioning, coordination of care between different parties, time management including in-office patient flow, office management including effective task delegation, and remuneration practices.
- This EPA also includes appropriate follow-up of both patients and investigation results.
- It may include managing the administrative aspects of bed flow, length of stay, wait lists, triage, surge beds, off-service admissions, and communication with hospital administration and operational staff.
- This EPA may be observed in some combination of inpatient, outpatient and consultation service settings, and must be based on a block of time of at least a week.
- Feedback from patients, and hospital administrators, including medical office staff, on issues such as time management, communication, and collaboration, may be incorporated by the psychiatrist to inform the observation of this EPA

Assessment plan:

Direct or indirect observation by a psychiatrist, which may include feedback from others

Use Form 1. Form collects information on:

- Experience type (check all that apply): bed flow meeting; billing for clinical encounters and forms; booking and running senior's clinic; completion of forms; completion of health records; responding to requests from staff, other physicians & health professionals; running any psychiatry outpatient clinic; running consultation service; running inpatient service; other (write in)
- Setting (check all that apply): inpatient rehabilitation unit; outpatient psychiatry clinic; consultation service

Collect 3 observations of achievement.

- At least 3 different experience types
- Strongly recommended to include both an inpatient and outpatient setting
- 3 different observers

Relevant Milestones

- 1 L 4.1 Set priorities and manage time to fulfil diverse responsibilities including clinical, administrative, supervisory and teaching responsibilities**
- 2 ME 1.5 Prioritize patients based on the urgency of clinical presentation**
- 3 S 3.4 Integrate best evidence and clinical expertise into decision-making**
- 4 L 2.2 Apply evidence and management processes to achieve cost-appropriate care**

- 5 COM 5.1 Document clinical encounters in an accurate, complete, timely and accessible manner, and in compliance with legal and privacy requirements**
- 6 COL1.1 Establish and maintain healthy relationships with physicians and other colleagues in the health care professions to support relationship-centred collaborative care
- 7 COL 1.2 Negotiate overlapping and shared care responsibilities with physicians and other colleagues in the health care professions in episodic and ongoing care
- 8 COL. 1.3 Engage in respectful shared decision-making with physicians and other colleagues in the health care professions
- 9 COL 2.2 Implement strategies to promote understanding, manage differences, and resolve conflicts in a manner that supports a collaborative culture**
- 10 P 1.1 Respond appropriately to feedback from patients, families and health care professionals**
- 11 P 2.1 Demonstrate accountability to patients, society and profession by adhering to ethical billing practices**
- 12 P 4.1 Manage the mental and physical challenges that impact physician wellness and/or performance in demanding or stressful clinical settings