

Severe Persistent Mental Illness (SPMI) Longitudinal Rotation:

The objective of this rotation is for the resident to experience in the comprehensive continuing care and rehabilitation for patients with severe persistent mental illness (SPMI).

This rotation takes place during the inpatient rotation in PGY2 as part of the Foundations Stage training requirements. Residents are expected to reach out to the rotation supervisor at the beginning of the rotation to be assigned an SPMI patient who they will see monthly in the outpatient setting.

Residents are expected to organize with the rotation supervisor (Dr. Mohammad Abu Zaid) to schedule their patient monthly during his clinic time (ideally at the end of the day to avoid interruptions to the inpatient schedule). The encounter should not take longer than an hour. *Residents are expected to assess the same patient for at least five out of the six scheduled encounters.* Rotation length can be extended longitudinally to ensure completion of required assessments.

Residents are expected to organize with their inpatient supervisors in advance around scheduling their SPMI encounters. Inpatient supervisors are expected to allow residents time off inpatient duties to complete the training requirements.

An ITER will be completed by the SPMI Rotation Supervisor at the end of the rotation on Elentra.

Expected CANMEDS Milestones:

1. ME 1.3 Apply knowledge of pharmacodynamics and pharmacokinetics at various developmental stages
2. ME 1.6 Adapt care as the complexity, uncertainty, and ambiguity of the patient's clinical situation evolves
3. ME 3.2 Describe the indications, contraindications, risks, and alternatives for a given treatment plan
4. ME 2.2 Assess and monitor patient adherence and response to therapy
5. ME 2.2 Assess potential harmful or beneficial drug-drug interactions
6. ME 3.2 Use shared decision-making in the consent process
7. ME 4.1 Develop plans for ongoing management and follow-up
8. COL 1.2 Negotiate overlapping and shared-care responsibilities with physicians and other colleagues in the health care professions in episodic and ongoing care
9. HA 1.1 Facilitate access to appropriate medications

Possible EPA's to be mapped to this rotation:

1	FOD 2 Performing psychiatric assessments referencing a biopsychosocial approach, and developing basic differential diagnoses for patients with psychiatric disorders
2	FOD 3 Developing and implementing management plans for patients with routine uncomplicated psychiatric presentations
3	FOD 4 Performing risk assessments that inform the development of an acute safety plan for patients posing risk for harm to self or others
4	FOD 6 Integrating the foundational principles and skills of psychopharmacology into patient care
5	COD 1 Performing psychiatric assessments and developing comprehensive treatment/management plans for adult patients
6	COD 2 Developing comprehensive biopsychosocial formulations for patients across the lifespan
7	COD 5 Identifying, assessing, and managing emergency situations in psychiatric care across the lifespan

Rotation Supervisor: Dr. Mohammad Abu Zaid