EXAMS

Multiple Choice Question (MCQ) Examination
Candidates are advised to familiarise themselves with the computer based multiple choice examination format prior to sitting the paper by completing the practice examination available on the Pearson Vue website. This provides an experience of the functionality of the online exam and future candidates are recommended to avail themselves of this opportunity.

It has been brought to the attention of the Committee for Examinations that in the February 2016 MCQ examinations there were a couple of instances where candidates who chose to commence the MCQ examination with CAPs (rather than EMQs) found themselves exiting the examination prematurely at the end of the CAP section.

Candidates who choose to commence the MCQ exam with the CAP component should read carefully the instruction pages at the conclusion of the CAP component and carefully note the warning messages that appear on the screen. The College has been in discussions with Pearson Vue to further clarify the wording in those warning messages.

Candidates are also advised to familiarise themselves with a set of instructions that has been prepared if they decide to commence the examination with CAPs. This document will be shortly located on the Exam Centre Page, under Computer-based practice exam.

The College has also made Pearson Vue aware of some noise issues reported at their exam centres in the February 2016 examination. Pearson Vue has assured the College that they will have protocols in place to ensure minimal noise at the examination.

Psychotherapy Written Case
Following discussions with the Faculty of Psychotherapy, Associate Professor Beth Kotze (Chair, Case History Subcommittee, Committee for Examinations) has prepared a video primarily aimed at psychotherapy supervisors, to help them assist trainees in the preparation and submission of the Psychotherapy Written Case. The video will also be useful for trainees in their preparation for submission of the written case. The video, lasting 19 minutes can be found under Resources on the Psychotherapy Written Case page of the 2012 Fellowship Program of the College website. There is also an accompanying power point PDF. [https://www.ranzcp.org/Pre-Fellowship/2012-Fellowship-Program/Assessment-overview/Psychotherapy-Written-Case.aspx](https://www.ranzcp.org/Pre-Fellowship/2012-Fellowship-Program/Assessment-overview/Psychotherapy-Written-Case.aspx)
Committee for Examination correspondence
All written examination queries from trainees, SIMGs and supervisors should be directed to the Committee for Examinations, care of the Examination Secretariat. Correspondence should be emailed as follows:

- MCQ and Essay-style examination writens@ranzcp.org
- Psychotherapy Written Case cases@ranzcp.org
- Scholarly Project scholarly@ranzcp.org
- OSCE clinicals@ranzcp.org

CBFP - Mid-rotation ITAs
Trainees and supervisors are reminded to please use the latest version of the mid-rotation ITA forms available on the Training program forms page. These forms are fillable PDFs and can be completed on screen.

Stage 2 EPAs reminder
Stage 2 trainees must complete the following EPAs by the end of Stage 2:

- four mandatory General Psychiatry EPAs:
  - ST2-EXP-EPA1: Electroconvulsive therapy (ECT)
  - ST2-EXP-EPA2: Mental Health Act
  - ST2-EXP-EPA3: Risk assessment
  - ST2-EXP-EPA5: Cultural awareness
- two out of three Psychotherapy EPAs:
  - ST2-PSY-EPA2: Therapeutic alliance
  - ST2-PSY-EPA3: Supportive psychotherapy
  - ST2-PSY-EPA4: CBT: Anxiety management
- two Child and Adolescent Psychiatry EPAs during the mandatory CAP rotation:
  - ST2-CAP-EPA1: Manage an adolescent
  - ST2-CAP-EPA2: Prepubertal child
- two Consultation–Liaison Psychiatry EPAs during the mandatory CL rotation:
  - ST2-CL-EPA1: Delirium
  - ST2-CL-EPA2: Psychological distress
- two Addiction Psychiatry EPAs during any rotation:
  - ST2-ADD-EPA1: Intoxication and withdrawal
  - ST2-ADD-EPA2: Comorbid substance use
- two Psychiatry of Old Age EPAs during any rotation:
  - ST2-POA-EPA1: Behavioural and psychological symptoms in dementia
  - ST2-POA-EPA2: Medications in patients 75 and over
- and any two area of practice EPAs during variable rotation in the associated area of practice:
  - e.g. if in Adult rotation, trainee MUST attain two ST2-AP EPAs.
To ensure the correct EPAs are completed during the rotation, please discuss them with your Director of Training. A print friendly table of all Stage 1 and Stage 2 EPAs is available on the EPA forms page.

**Stage 3 AOP vs FELL EPAs**

For generalist trainees, Fellowship (FELL) EPAs can be attained in any rotation, while Area of practice (AOP) EPAs can be attained in the relevant area of practice only. E.g. if a trainee is in a Psychiatry of Old Age post, they are able to attain all of the POA AOP EPAs and the POA FELL EPAs as well as any FELL EPAs available in Stage 3. A print friendly table of all Stage 3 EPAs is available on the EPA forms page.

**Clinical Practice Guidelines – ‘Schizophrenia and related disorders’ now available**

Please be advised the Schizophrenia and related disorders CPG is now available. This is a new addition to the already available guidelines for:

- Anxiety disorders
- Deliberate self-harm
- Eating disorders
- Mood disorders

**Training Reports – Certificate Programs**

Directors of Advanced Training, trainees and Fellows enrolled in one of the seven 2012 Certificate Programs are advised that the new Certificate reports are not yet available. Due to the Certificate Programs themselves being finalised late in 2015, this has caused an unfortunate delay in finalising the new database structures and then the reports, which will be generated from the modified database. Please continue to submit selection notifications and forms as normal which will be updated to your Training Report when available. We will keep you advised of the progress in this regard, and thank you for your patience.

**Reminder – minimum of 4 OCAs for transitioned trainees**

Trainees who have been transitioned to the 2012 Fellowship Program without attaining an Observed Clinical Interview (OCI) pass are reminded that an Observed Clinical Activity (OCA) is required per 6 month rotation, and regardless of the number of rotations required in attaining Fellowship, a minimum of 4 OCAs must be completed by the end of training i.e. even if you are in your final year of stage 3 training, you must complete at least 4 OCAs in order to attain Fellowship.

**About the TRC**

The Trainee Representative Committee (TRC) was established as the Registrar Representative Committee in 2007 to provide formal representation for all trainees (registrars) within the College organisational structure.

This group of sixteen trainees, elected by their peers, has been busy working on a number of projects which include the recent proposal by the RANZCP Board to amend the Constitution to grant voting rights for Associates (trainees) and Affiliates. This work builds on similar moves in a number of medical Colleges, and will, if approved by the Fellowship, give all Associates (trainees) and Affiliates the opportunity to vote in electing Fellows to the RANZCP Board, including the President Elect, and at College Annual General Meetings. A member's forum on this matter will be held immediately following the College’s Annual General Meeting (AGM) on Wednesday 11 May in Hong Kong. This will be led by the College President, Professor Malcolm Hopwood, and will provide an opportunity for all
members and trainees present to put forward their views or ask any questions on the granting of voting rights to Associates (trainees) and Affiliates.

In addition, there has been a considerable amount of trainee involvement in preparing for the 2016 RANZCP International Congress of Psychiatry in Hong Kong, resulting in a number of trainee-focused academic and social events.

Other areas of focus for the TRC in 2015 include the ongoing Health, Welfare and Safety projects (where our representatives sit on working groups of the College Board and Membership Engagement Committee), the transition arrangements for all trainees into the 2012 program, the development of Stage 3 of the 2012 Curriculum and an audit of the Formal Education Courses (FEC) across Australia and New Zealand. This FEC audit builds on the recommendation of the Australian Medical Council that trainees be provided with choice with respect to their Formal Education Course in the Stage 1 and 2 training period.

We have two categories of TRC members - the first being jurisdictional members (where nominations are called for from trainees to represent their State, Territory or New Zealand), and non-jurisdictional members who are nominated by a trainee and appointed by the current TRC to assist the committee to meet the committee’s strategic priorities, and to balance the committee’s skill sets. All of this work would be unable to happen without trainees nominating for election and we strongly encourage you to consider nominating in future elections.

For trainees who may not have time to join the TRC, but are interested in becoming involved in College work, such as sitting on a Faculty or Section Committee as a trainee representative, we invite you to contact us via the TRC Administration Officer, Ben Riethmuller, by email to ben.riethmuller@ranzcp.org as there are often opportunities for trainees to be involved in such committees or on short term College working groups.

GOVERNANCE

Update – Proposal to grant voting rights to Affiliates and Associates

As foreshadowed previously, the Board has recently agreed to take to the Fellowship in 2016, a ballot for constitutional change to grant voting rights to Associates (Trainees) and Affiliates to vote at the Annual General Meeting (AGM) and in electing the RANZCP Board.

Over recent years, the eligibility of Associates (Trainees) and Affiliates to vote in the College’s AGM and in the election of the RANZCP Board (President Elect and Elected Directors) has been raised and discussed in various forums. Under the College’s current Constitution, Fellows only are eligible to vote at the AGM and in Board elections.

Individual resolutions will be listed in the ballot to allow Fellows to vote separately on whether to grant voting rights to Associates (Trainees) and Affiliates.

Prior to proceeding with the ballot, the Board is consulting with the broader membership on this topic and wishes to receive your views. Your feedback is welcome by contributing to the online thread and/or contacting the Board via board@ranzcp.org.

Frequently asked questions

The College has developed FAQs which include, but are not limited to, the reason for the proposal, what this proposal means for the membership and the timing of the ballot, which Members are encouraged to read.
If you have a question that is not addressed, please contact Louise Hain, Manager, Governance, via louise.hain@ranzcp.org. The College will endeavour to address additional questions via the FAQ page on the College website. I encourage you all to participate in the debate around these significant potential changes.

Professor Malcolm Hopwood
President

GRANTS

Neurostimulation in the Vines. 26-28 August, 2016 Crowne Plaza, Hunter Valley

The organising committee invites case presentation abstracts from Fellows and Trainees for this conference by 5pm on Friday 10 June 2016.

The RANZCP Section of Electroconvulsive Therapy is offering Grants to the best submitted case presentation abstracts from the four categories listed below:

Psychiatry Registrar/Associate
ECT
rTMS or Neurostimulation

Enrolled Research Student - Masters or PhD
ECT
rTMS or Neurostimulation.

Short papers oral presentation

A short papers oral presentation is a 10 minute oral presentation followed by 5 minutes for questions.

Themes

The RANZCP Section of Electroconvulsive Therapy and Neurostimulation Conference Committee is seeking case presentations that are clinically relevant to psychiatrists, anaesthetists and other mental health professionals related to the area of ECT and TMS.

Please note:

- All abstracts must be prepared according to the guidelines provided. Incomplete or incorrect submissions will be returned to the author and must be re-submitted immediately in the correct format to be considered for inclusion in the program
- The close of abstracts is 5pm on Friday 10 June 2016
- Authors are reminded to ensure client confidentiality is maintained in all material submitted

To submit your abstract, please review the information and instructions on the guidelines which can be found on the conference website.

If you have any questions, please contact the Conference Office on +61 (0)3 9601 4981 or email senconf2016@ranzcp.org