

ST3-FP-AOP-EPA8 – Women’s consultation–liaison

Area of practice	Forensic psychiatry		EPA identification	ST3-FP-AOP-EPA8	
Stage of training	Stage 3 – Advanced		Version	v0.7 (EC-approved 10/04/15)	
The following EPA will be entrusted when your supervisor is confident that you can be trusted to perform the activity described at the required standard without more than distant (reactive) supervision. Your supervisor feels confident that you know when to ask for additional help and that you can be trusted to appropriately seek assistance in a timely manner.					
Title	Women’s forensic psychiatry: consultation–liaison.				
Description Maximum 150 words	Undertake assessment and provide advice on treatment and management in a consultation–liaison role regarding complex female forensic patients within a secure environment, eg. prison.				
Fellowship competencies	ME	1, 2, 3, 4, 5, 6, 7, 8	HA	1, 2	
	COM	1, 2	SCH	2	
	COL	1, 2, 3, 4,	PROF	1, 2, 3, 5	
	MAN	1, 2, 4, 5,			
Forensic competencies For Certificate of forensic psychiatry trainees only	ME	a, b, c, d, e	HA	a, b, c, d	
	COM	a, b, c, d	SCH	a, b	
	COL	a, b, c	PROF	a, b	
	MAN	a, c			
Knowledge, skills and attitude required The following lists are neither exhaustive nor prescriptive.	<p>Competence is demonstrated if the trainee has shown sufficient aspects of the knowledge, skills and attitude described below.</p> <p>Ability to apply an adequate knowledge base</p> <ul style="list-style-type: none"> Evidence of knowledge of the literature in the area of mentally disordered female offenders, including the background theories of female offending behaviours and the epidemiological, criminological and cultural factors involved in these theories. The relevant legislation and case law that pertains particularly to women forensic patients. For example, infanticide, women in abusive relationships. 				

	<ul style="list-style-type: none"> • Specific knowledge of the literature in areas more commonly related to female offending, both with respect to criminogenic factors and personal factors, eg. arson, shoplifting, PTSD, borderline personality disorder, depression and victim issues. • The impact of gender upon presentations of common mental disorders and the gender-related issues toward incarceration. This may include life-cycle stages and motherhood, etc. <p>Skills</p> <ul style="list-style-type: none"> • Demonstrates skills in leadership of a team when advising on treatment and management of complex female forensic patients. • Liaises with other disciplines involved in the care of complex female forensic patients. • Manages boundary issues and challenging team dynamics specific to working with female forensic patients. • Frames advice or recommendations cognisant of the available resources. • Identifies issues such as privacy and confidentiality and how they impact upon communications. • Advocates as appropriate for the forensic client within a multi-agency system. <p>Attitude</p> <ul style="list-style-type: none"> • Recovery-focused approach to the problems female forensic patients raise. • A diligent attitude to communicating information and plans to other health workers involved. • Awareness of own limitations and willingness to seek others' opinion when required. • Awareness of the presence, and implications, of stigma for female forensic patients.
Assessment method	Progressively assessed during individual and clinical supervision, including three appropriate WBAs.
Suggested assessment method details	<ul style="list-style-type: none"> • Case-based discussion. • Mini-Clinical Evaluation Exercise – direct observation of consultation with other services in the assessment, treatment and management of female forensic patients.
References	

COL, Collaborator; COM, Communicator; HA, Health Advocate; MAN, Manager; ME, Medical Expert; PROF, Professional; SCH, Scholar