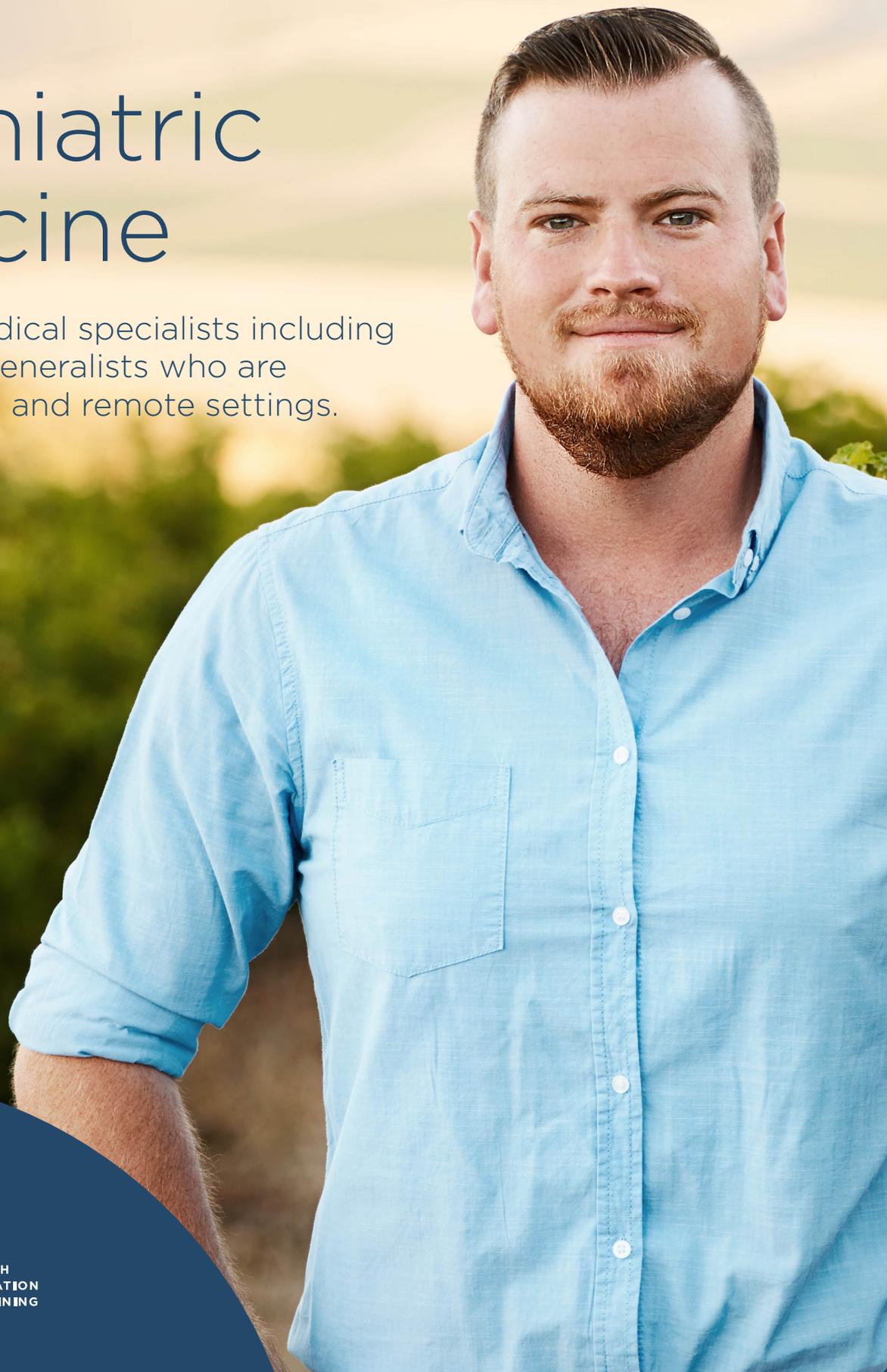


Postgraduate Courses

2021 Psychiatric Medicine

Tailored for medical specialists including GPs and rural generalists who are working in rural and remote settings.



Making a Difference

At HETI, the Health Education and Training Institute, we are driven to make a difference in mental health, and proudly present to you progressive, recovery-led, postgraduate Psychiatric Medicine courses. These courses are designed to support doctors wanting to develop within their own profession and deliver modern mental health care.

HETI's postgraduate courses explore and examine current evidence from clinical practice, the neurosciences and broader literature whilst immersing students in a diverse, experienced community of learning. Medical specialists including GPs and rural generalists who are working in rural and remote settings and psychiatric trainees learn together and enrich each other's development.

Uniquely placed within Australia's largest healthcare system, HETI's curriculum draws on leading specialists and experts whilst embracing learnings from the NSW Institute of Psychiatry's 50-year history.

HETI's commitment to support professional and interdisciplinary practice ensures students are offered many opportunities to learn from a range of clinicians and academics in addition to the skilled psychiatrists who form the core of our Psychiatric Medicine teaching.

We understand the challenges of clinical practice, study and preparing for exams, and HETI's team of support staff are there to help guide you with your studies, enabling you to develop your own style of excellence in practice for the future.

Thank you for considering studying with us and we look forward to welcoming you to HETI Higher Education.

Dr Nick O'Connor FRANZCP FRACMA
Chair, Health Education and Training Institute
Higher Education Governing Council



Why Study with HETI?

"I would listen to a lecture on sleep or cognitive behavioural therapy and apply that knowledge to my patients the very next day. I didn't expect postgraduate education to directly inform my practice in that way, but it was fantastic."

Gerard Shorrock
Masters of Psychiatric
Medicine Graduate

FACT

According to the Quality Indicators for Learning and Teaching (QILT) 2019 Graduate Outcomes Survey in the area of Medicine, HETI Higher Education scored an excellent result with 74.1% of our graduates agreeing their experience was indicative of good teaching compared to the national average of 54.4%.

Your learning experience will be enriched through HETI's commitment to:

- Developing medical specialists including GPs and rural generalists who are working in rural and remote settings for professional and interprofessional practice
- Collaboration with, and learning alongside, a diverse range of mental health practitioners including general practitioners, rural and remote specialists and psychiatry trainees
- Recovery-oriented, contemporary, evidence-based curriculum that will prepare you for practice and exam success
- Expert seminars, workshops and tutorials led by an inspiring team of academics and clinicians from across NSW and beyond, enhanced by people with lived experience of mental illness
- Excellent facilitation that empowers improvement of current work practices through reflection
- Flexible study options and online resources
- Student support - we're small enough to know you personally
- Accredited courses - Graduate Certificate, Graduate Diploma and Masters

WHO SHOULD APPLY?

Medical specialists including GPs and rural generalists who are working in rural and remote settings with a passion for improving mental health and wellbeing.

Who is Eligible?

To enrol in our postgraduate courses in Psychiatric Medicine as an Award or professional development student, General Practitioners, rural and remote specialists and other doctors must:

- Be registered in Australia or New Zealand
- Have a minimum one year of clinical experience

Medical practitioners with registration in other countries may enrol in our Applied Mental Health Studies courses, visit heti.edu.au for more information.

MEETING THE NEEDS OF GENERAL PRACTITIONERS AND RURAL AND REMOTE SPECIALISTS AT HETI HIGHER EDUCATION

The Psychiatric Medicine Framework has been constructed to meet the needs of medical specialists including GPs and rural generalists who are working in rural and remote settings:

- Opportunity to enrol within General Practice or rural and remote specialisations mapping topics to the ACRRM Mental Health AST Curriculum and the Five Domains of General Practice
- Access to General Practitioner or rural and remote Professional Lead throughout your studies
- Extend mental health knowledge and skills beyond those obtainable through skills training workshops
- Develop knowledge and skills required to lead integrated mental health care beyond your current workplace settings

COURSE ACCREDITATION

Ensuring quality of learning, appropriate to professionals needs underpins all education at HETI Higher Education.

HETI was awarded the status of a higher education provider by National standards body for all universities and higher education providers, the Tertiary Education Quality Standards Agency (TEQSA) on 27 October 2016. HETI has been granted the maximum registration period of seven years as a higher education provider with concurrent accreditation of its six courses.

The courses within the Psychiatric Medicine framework are accredited:

- By TEQSA for study towards attainment of Graduate Certificate, Graduate Diploma or Masters qualifications
- GPs completing the formal degree course can apply for accreditation from the RACGP. On current advice from the RACGP, it is understood that the College would give the equivalent of 40 CPD per unit studied at HETI Higher Education.

➔ For eligibility information visit heti.edu.au



Choose your Pathway

Medical specialists including GPs and rural generalists who are working in rural and remote settings can choose their pace of learning:

- Studying a single unit to meet specific professional development needs.
- 1 unit per semester (completing the Graduate Certificate in two years)*
- 2 units per semester (completing the Graduate Certificate in one year)

Non-Award courses and units can be studied in two ways:

- As a standalone non-award unit, students will complete assessment tasks, have the opportunity to receive a Certificate of Attainment and accrue academic credit
- As professional development units, students won't have to complete assessments, only achieve participation requirements for training to meet the requirements of professional bodies and receive a Certificate of Participation

DEVELOP YOUR SKILLS IN A PARTICULAR AREA

As a professional development student, you may choose from a range of units from both Psychiatric Medicine and Applied Mental Health Studies Frameworks. You are not restricted to Graduate Certificate units. Options include units specialised in infant and perinatal mental health, child and adolescent mental health and older persons mental health.

Contact us to discuss your options.

WORKLOAD

In a typical week, a year one Award student will spend 10-20 hours in activities including:

- Reflection upon their practice and workplace learning
- Engaging with pre-teaching activities
- Participating in three teaching sessions (seminars, tutorials, workshops or web forums) (approx. 3 hours)
- Reading recommended sections of texts or articles

All year one GP and Rural and Remote students may choose to participate in:

- Supplementary workshops accredited with GPMHSC, ACRRM and RACGP
- 3 evening webinar type sessions focused on practical issues in actively addressing mental health needs in General Practice

Award students must also pass two to three varied assessment tasks for each unit such as recorded oral presentations, extended matching questions, short answer questions, essays or projects.

FLEXIBLE LEARNING

Students can elect to learn at our campus in North Parramatta, through live web video, conferencing, or delayed online participation - or a combination of these. The choice is yours.

We are continually updating our technology to better meet student needs. Our facilities are equipped to ensure remote participants can see, hear and join in class activities, in real time.

Students are provided access to our resources through myHETI, our online learning system, and participate in forums that support interdisciplinary collaboration.

Students require only a simple set up:

- a computer, tablet or similar
- a current email address
- access to the internet and a modern web browser
- ability to save documents in Microsoft Office format
- audio/video playback capabilities
- a web cam and microphone

Some units also require students to purchase one to two textbooks.

CLASS TIMES

Live teaching sessions for Award and professional development students occur from 2 to 4pm across 18 teaching weeks with an addition hour on scheduled weeks, plus personalised support in three additional evening zoom sessions with our GP and RR clinical lead academics.

- Tuesdays (Graduate Certificate – Year 1)
- Wednesdays (Graduate Diploma – Year 2)
- Thursdays (Masters – Year 3)

* times correct at time of printing.

Free Registration at GP Workshops

General Practitioners and Rural and Remote Graduate Certificate students are invited to register for two GP workshops for free. The workshops are for General Practitioners and AGPT registrars who are seeking GP Mental Health Skills training or a comprehensive update of skills.

GP MENTAL HEALTH ASSESSMENT AND MANAGEMENT SKILLS WORKSHOP: HOW TO DEVELOP A GP MENTAL HEALTH PLAN, SAFETY PLAN AND REVIEW

TBA

This two day workshop aims to develop skills in comprehensive mental health assessment and management planning, derived from the person's experiences of illness, and is based on a recovery-focused model. Participants benefit from an interactive experience with experts from psychiatry, general practice, trauma-focused care and addiction medicine, along with shared perspectives from persons with lived experience.

FOCUSED PSYCHOLOGICAL THERAPIES IN GENERAL PRACTICE WORKSHOP

TBA

This three day workshop is designed to educate and instruct GPs in key Focused Psychological Therapies. Education and skills training will be provided in Motivational Interviewing, Behavioural and Cognitive Behavioural Strategies, Relaxation Therapy and Mindfulness.

RACGP ACCREDITATION

In 2020, the RACGP is revising their accreditation processes. HETI Higher Education will inform students as soon as accreditation details for RACGP, ACRRM and GPMHSC are known. If there are delays beyond the planned workshop dates, we will provide guidance to students on self-directed learning or self-directed activity modes of accreditation.

Workshop 1 is GPMHC, ACRRM, RACGP accredited.

Workshop 2 is ACRRM approved. GPMHC, RACGP pending.

“Our Psychiatric Medicine Framework is designed to maximise the capacity of each doctor to be an evidence-based collaborative leader of the future, and build great relationships along the way.”

Dr Roderick McKay
Director Psychiatry
and Mental Health Programs, HETI

➤ You can elect to enrol in directly into age specialisation units for professional development, see our Graduate Diploma options. heti.edu.au

Course Outcomes Overview

Graduates of the Masters of Psychiatric Medicine will develop their abilities to:

- Identify strategies to balance personal wellbeing and professional responsibilities in order to support development as an ethical reflective practitioner who is inclusive and future-focused through ongoing, innovative work-integrated life-long learning
- Integrate management of a patient's physical and mental health
- Support informed consent through recovery-oriented application of mental health and related legislation
- Describe the principles of quality improvement and discuss their application to improve recovery-oriented care within a selected service setting
- Critically appraise and apply contemporary research, psychiatric knowledge and treatment guidelines
- Understand and apply principles of interprofessional practice and quality improvement
- Work safely within a scope of practice through use of supervision and additional guidance
- Communicate with multiple partners in a manner consistent with professional and ethical standards
- Apply knowledge of, and respect for, Aboriginal peoples and cultures in practice
- Utilising the RANZCP CanMED range of medical competencies, support recovery journeys of people with mental illness from across cultures
- Construct, perform and report on biopsychosocial strength based assessments and culturally appropriate biopsychosocial formulations, diagnoses and collaborative management plans

HETI graduates will have the capabilities to support the recovery journeys of people with mental illness: maximising hope, optimism, strength, resilience, self-determination, self-management and advocacy of each person in their community of choice.

HETI Graduate Attributes

 [Apply now heti.edu.au](https://www.heti.edu.au)

Key Dates

SEMESTER 1 2021

ACTIVITY/EVENT	DATE
Applications open	9 November 2020
Enrolments open	11 January 2021
Semester begins	8 February 2021
Applications close	19 February 2021
Mid Semester break	5 - 16 April 2021
Semester ends	25 June 2021

SEMESTER 2 2021

ACTIVITY/EVENT	DATE
Applications/Enrolments open	9 November 2020
Semester begins	2 August 2021
Applications close	13 August 2021
Mid Semester break	4 - 8 Oct 2021
Semester ends	17 December 2021

2021 FEES

The 2021 tuition fees for Psychiatric Medicine Award and non-award units is \$2270.

The 2021 tuition fee for units studied as Professional Development is \$1485 per unit.

SCHOLARSHIPS

HETI Higher Education offers scholarships specific to General Practitioners undertaking study of the Psychiatric Medicine Course. Visit [heti.edu.au/scholarships](https://www.heti.edu.au/scholarships)

Psychiatric Medicine Units

Graduate Certificate, Graduate Diploma and Masters

Units with nine and 18 topics will be taught over 18 weeks.

The Research and Project Planning unit (page 20), and the Mental Health Capstone unit (page 24) will be taught over 15 weeks.

YEAR 1 GRADUATE CERTIFICATE

SEMESTER 1	Recovery Focused Psychiatric Medicine	A Whole Person Approach to Psychiatry
SEMESTER 2	Collaborative Mental Health Care	Introduction to Contemporary Psychiatric Interventions

YEAR 2 GRADUATE DIPLOMA

SEMESTER 1	Reconsidering the Context	Integrating Physical and Mental Health
SEMESTER 2	Developmental Perspectives in Context 1: From Perinatal to Youth	Developmental Perspectives in Context 2: Adults, Ageing and Beyond
	<i>One Developmental Perspectives unit may be replaced with one of the following:</i>	
	Family-Oriented Care in Mental Health**	Individual Therapies in Mental Health Care**

YEAR 3 MASTERS

SEMESTER 1	Comorbidity and Complexity	Research and Project Planning*	
SEMESTER 2	Psychotherapy and Recovery	Neurosciences and Recovery: From the Cellular to the Social	Mental Health Capstone*

* Common to Applied Mental Health Studies and Psychiatric Medicine Frameworks.
 ^ Research and Project Planning is a prerequisite for Mental Health Capstone.

■ core ■ elective

Recovery Focused Psychiatric Medicine

Utilising an innovative, contemporary approach to the study of psychiatry, students will be introduced to the concepts of recovery and the CanMEDS competencies underpinning both this unit and the orientation of studies in psychiatry and mental health throughout the Psychiatric Medicine program. Students will learn to distinguish between clinical and personal recovery in developing holistic and integrated biopsychosocial mental health care practice. The concept of recovery will be explored within the context of the students' experiences of practice, forming the basis for development of the medical practitioner who works interprofessionally within diverse settings with individuals with experience of mental illness and their supporters.

As students learn about the nature, onset, impact and assessment of both the psychoses and substance related disorders, the CanMEDS competencies that underpin the Medical Expert will be introduced, with orientation to their relationship to the professional competency frameworks of differing medical specialties. Students will particularly make use of the domains of the Professional and Health Advocate as lenses to understand and explore ethics, ethical and professional behaviour, and mental health legislation. The unit also includes a skills-based workshop regarding a recovery-informed approach to the management of emergencies in psychiatry.

LEARNING OUTCOMES:

- The distinction between personal and clinical recovery and the roles of families, carers and community organisations in supporting these.
- The breadth of the doctor's role in delivering recovery-focused care.
- Improving knowledge of substance related and psychotic disorders.
- Ethics, professionalism, professional development and personal wellbeing.
- Interprofessional practice.
- Informed consent and mental health legislation.
- Prevention, promotion, and early intervention.

TEACHING SCHEDULE

	Orientation
Topic 1	Underpinnings of Recovery-Oriented Psychiatry
Topic 2	Professionalism, Ethics and Wellbeing
Topic 3	Recovery-Oriented use of Mental Health Legislation
Topic 4	Influences of Normal Development for Practice
Topic 5	Mental Health Care in Australia
Topic 6	Psychoses: Biologically or Socially Determined?
Topic 7	Introduction to Substance Related Disorders
Topic 8	Recovery-Oriented Management of Psychiatric Emergencies

A Whole Person Approach to Psychiatry

This unit emphasises an integrative approach to collaborative mental health care with a focus on the development of assessment and management capabilities. Students will develop within the CanMEDS domains of Medical Expert and Scholar as they increase their ability to perform and report strength-based biopsychosocial assessments, formulations and diagnoses in a manner that supports the collaborative development of evidence-based biopsychosocial management plans.

As students learn about mood and anxiety disorders, the foundations of the students' lifelong learning will be strengthened through examination of reflective practice, feedback and supervision, critical evaluation and the principles of adult education in teaching both peers and others.

LEARNING OUTCOMES:

- Improving knowledge of mood and anxiety disorders.
- Utilising the CanMED Medical Expert and Scholar medical competencies to support the recovery journeys of people with mental illness.
- Critical appraisal and application of contemporary psychiatric knowledge, treatment guidelines and research to inform appropriate care strategies.
- Strength-based biopsychosocial mental health assessment, formulation, diagnosis and initial care planning.
- Contemporary principles of adult teaching and learning.
- Reflection on personal learning goals to improve recovery informed practice.

TEACHING SCHEDULE

Topic 1	Making a Good Start – Engaging, Interviewing and Assessing
Topic 2	Formulation and Care Planning
Topic 3	Using Diagnosis Wisely
Topic 4	Evidence-Based Practice and Recovery-Oriented Care
Topic 5	Understanding Depression
Topic 6	Understanding Anxiety
Topic 7	Anxiety and Trauma
Topic 8	Working with People with Mood Disorders
Topic 9	Excellence in Care across Settings

Collaborative Mental Health Care

In this unit students will learn to establish, develop, promote and model effective collaborations and communication pathways in psychiatry, making use of the CanMEDS domains of Collaborator and Communicator. Students will explore settings and populations of people where breakdowns in these domains are a higher risk. Issues affecting Aboriginal people, people from culturally and linguistically diverse (CALD) backgrounds, and those from rural and remote populations will be addressed. Students will explore personality and organic disorders through these domains, completing the unit with an interprofessional exploration of opportunities to improve the physical health for people living with mental illness. Students have access to a complementary workshop focused on the needs of those where past trauma has a lasting effect.

LEARNING OUTCOMES:

- Utilising the CanMED Communicator and Collaborator medical competencies.
- Improved knowledge of personality and organic disorders.
- Key factors of a culturally appropriate approach to mental health care.
- Continuous improvement of the student's own written communication.
- The impact of different perspectives of mental wellbeing of Aboriginal people.
- The effects of geographic, social and/or professional isolation.
- Integration and collaborative management of the patient's physical and mental health.
- Normal personality development.

TEACHING SCHEDULE

Topic 1	A Practical Approach to Culturally Inclusive Practice
Topic 2	Improving Communication
Topic 3	Impact of Location and Socioeconomic Status
Topic 4	Aboriginal Mental Wellbeing
Topic 5	Dimensions of Personality
Topic 6	Personality Disorder
Topic 7	Organic Disorders
Topic 8	Responses to Trauma
Topic 9	Integrating Physical and Mental Health

Introduction to Contemporary Psychiatric Interventions

Bringing together recovery-oriented practice with evidence-based medicine requires an integration of all the CanMEDS competencies. Whilst this unit focuses upon the doctor as Medical Expert, students will consider how all the other CanMEDS domains facilitate and contribute to recovery-oriented care. This unit focuses on developing the student as a Medical Expert and Manager through examination of contemporary psychiatric treatments including biological, social and psychological treatments as well as the students evolving role as a psychiatric trainee working within a scope of practice, managing workloads and constructively participating in quality improvement activities.

Students will develop their abilities to demonstrate creativity and initiative in the application of skills in recovery-oriented psychotherapeutic, pharmacological, biological and sociocultural interventions. A skills-based workshop will focus on cognitive behavioural therapy skills.

LEARNING OUTCOMES:

- The impact of role and scope of practice upon supervision and safe practice.
- Using a "structured" recovery-oriented management approach where treatment does not appear to have been effective.
- Effective and appropriate communication and engagement techniques for informed and collaborative decision making.
- Application of the Manager and Medical Expert CanMEDS competencies in collaboratively selecting and initiating treatment.
- A range of therapies used in a stepped biopsychosocial approach to care.

TEACHING SCHEDULE

Topic 1	Introduction to Psychotherapy
Topic 2	Collaborative Care Planning
Topic 3	Motivational Interviewing and Supportive Psychotherapy
Topic 4	Cognitive Behavioural Therapies
Topic 5	Medications in Recovery Oriented Care - Antipsychotic
Topic 6	Medications in Recovery Oriented Care - Antidepressants, hypnotics and mood stabilisers
Topic 7	Social and Preventative Interventions
Topic 8	Putting it all Together - Stepped Care and Scope of Practice
Topic 9	Psychodynamic Therapies in Practice

GRADUATE DIPLOMA
SEMESTER 1

Reconsidering the Context

Applying the CanMEDS domain of Health Advocate students will develop and adapt their recovery-oriented mental health practice to work with diverse populations and within diverse settings, accounting for context in assessment, treatment and collaborative care planning for people with mental illness. The impact of working in consultation-liaison, private rooms and rural and remote settings on practice and supervision will be explored.

All students will further develop knowledge and skills in working with Aboriginal people, and make a deeper exploration of the mental health needs of Culturally and Linguistically Diverse (CALD) communities to enhance their ability to work effectively with migrant, refugee and other culturally diverse populations.

Using the CanMEDS domain of the Scholar, students will increase their research skills to equip them to rigorously evaluate changes to their practice, complete a future Scholarly Project and prepare for a Masters level research, or quality improvement project.

LEARNING OUTCOMES:

- A practical approach to culturally inclusive practice.
- The use of research skill(s) to support quality improvement.
- Critical appraisal of mechanisms for obtaining or providing supervision or additional guidance, in rural, remote or professionally isolated settings.
- Advocacy for people experiencing stigma and mental distress, across differing places, communities and cultures.
- Effects and implications of health inequalities and disparities in relationships with health care providers.
- Theories of group participation.
- Opportunities for improving relationships with external partners relevant to Aboriginal people's social and mental wellbeing.
- The impact of Clinical Governance and organisational structure.

TEACHING SCHEDULE

- Topic 1** Research and Practice Improvement
- Topic 2** Research Design, Analysis and Appraisal
- Topic 3** Culture and Psychiatric Practice
- Topic 4** Working Across Governance Systems
- Topic 5** Cultural and Linguistic Diversity and Psychiatric Practice
- Topic 6** Mental Health in Rural and Remote Contexts
- Topic 7** Improving Aboriginal Mental Health and Wellbeing
- Topic 8** Gender, Mental Health and Mental Illness
- Topic 9** Essay Workshop

Integrating Physical and Mental Health

Using the CanMEDS domains of Professional and Medical Expert, students will investigate opportunities and barriers to the implementation of collaborative, integrated approaches to care. Students will increase their collaborative skills across consultation liaison and other settings in contributing to both improving the mental health of people with physical illness, and physical health of people with mental illness, taking into account the limitations of these distinctions. Topics covered will include responses to medical illness and trauma, abnormal illness behavior, demoralisation and important endocrine, cardiac and metabolic updates. Students will further develop strategies for maintaining professional standards and importantly, address self-care as mental health professionals.

LEARNING OUTCOMES:

- Personal self-care and professional development.
- Integrated management of physical and mental health.
- Informed consent, duty of care and local mental health law as they apply to medically-ill patients, including those refusing treatment.
- The influence of various industries, resource availability, and the history of psychiatry, upon the maintenance of a recovery orientation in professional practice.
- The effects of serious mental illness on health service outcomes and the opportunity to improve practice.
- The effects of specific care settings on the practitioner's role when attributing and investigating symptoms/presentations that may represent physical or mental illness.

TEACHING SCHEDULE

- Topic 1** Physical or Mental Illness?
- Topic 2** Population Health, Epidemiology and Health Promotion
- Topic 3** Responses to Illness
- Topic 4** Physical Health in the Presence of Mental Illness
- Topic 5** Organic Disorders
- Topic 6** Clinical Approaches to Considering Mental Health Issues in the Presence of Physical Illness
- Topic 7** Medical Updates
- Topic 8** Recovery and Professionalism
- Topic 9** Practice MCQ (Mock Exam)

GRADUATE DIPLOMA
SEMESTER 2

Developmental Perspectives in Context 1: From Perinatal to Youth

In this unit students will explore the developmental underpinnings of mental health. As health advocates, students will develop an understanding of how normal development, the interaction of environmental and biological factors, shapes mental and physical health for people across the lifespan. Knowledge and skills will be developed in working within a multidisciplinary team and across the community, including schools, children's protection services and juvenile justice. This will include the assessment and management of children, youth and their families, in their specific social, cultural and spiritual context, across a broad range of ages, communities and disorders.

Topics to be addressed include normal development, the neurodevelopmental effects of early trauma and its impact on the individual's developmental trajectory and what contributes to resilience. The neurodevelopmental disorders including autism spectrum disorder and attention deficit hyperactivity disorder; the principles of early intervention and youth-specific approaches; eating disorders, early psychoses and the more common disorders of childhood such as separation anxiety are also explored. The unit will challenge students to think critically about engaging with the recovery paradigm and its applicability in understanding and working with young people.

LEARNING OUTCOMES:

By the end of this unit students will be able to use knowledge of development, mental illness and interventions relevant from infancy to youth, and the perinatal period, a developmental perspective, and reference to the student's work setting and role in recovery-oriented care to:

- Demonstrate the ability to formulate an integrated understanding of the factors contributing to a child, adolescent or youth and families presentation in common developmentally relevant crises, and the appropriate application of consent, mental health and related legislation.
- Construct ethical and appropriate approaches to engagement, assessment and diagnosis with people of relevant ages and their families that demonstrates an understanding of developmental stage, relevant cultural attitudes, beliefs and communication requirements.
- Apply a systemic multidisciplinary approach to working with families, including basic concepts and skills of family therapy.
- Analyse the impact of psychiatric disorders on families, carers and the needs of families with a relative affected by mental illness, including family psychoeducation, issues pertaining to confidentiality, family grief, culture, and violence.
- Prioritise and synthesise information, and communicate this accurately and appropriately with a child or adolescent and their family in a challenging situation.
- Critically apply knowledge of development from infancy to adolescence, including responses to trauma and development of resilience, to critique from a recovery perspective, mental health promotion, early intervention, and illness prevention programs.

TEACHING SCHEDULE

Topic 1	Introduction to Working with Children and Adolescents
Topic 2	Developmental Theories
Topic 3	Perinatal Psychiatry: Focus on the Infant
Topic 4	Preschool to Early Primary School
Topic 5	Families, Parenting and Communication Skills
Topic 6	Adolescent and Youth Psychiatry
Topic 7	Child Psychiatry in the Consultation-Liaison Setting
Topic 8	Perinatal Psychiatry-Focus on the Parent
Topic 9	OSCE Exam Workshop/End of Unit Wrap-Up

Developmental Perspectives in Context 2: Adults, Ageing and Beyond

In an ageing society the wellbeing, mental health care and end-of-life management of the ageing, and older people with mental illness is a priority faced by medical practitioners within a range of practice settings. The developmental perspective shifts within this unit as students focus from adulthood to later life and beyond in relation to the ongoing needs of older consumers with mental illness, their partners, carers and families.

Using the CanMEDS domains of Collaborator and Health Advocate, students will challenge ageism and the stigma associated with age in continuing an ethically-based, recovery-oriented approach to collaborative mental health care with older people. Students will learn about ongoing neurodevelopmental and neurodegenerative changes that occur in later life and extend their collaborative practice skills and knowledge in psychiatry for the older person.

In exploring the experiences of older people, students will explore symptoms of specific conditions including affective disorders, psychoses and dementia. They will extend their skills into neuropsychiatric assessment, applied imaging and investigations, advocacy, assessment and management of challenging behaviours and the development of effective communication skills. Students will also explore suicide in older people and the legal aspects related to decision-making.

LEARNING OUTCOMES:

- Health inequities and risk and protective factors for successful maintenance of mental health in later life.
- The impact of developmental changes in social and family relationships on the application of recovery-oriented care.
- Accurate and appropriate communication to support collaborative care planning with an older person with cognitive impairment and their carer.
- Factors contributing to an older person's presentation in common psychiatric emergencies and the appropriate application of mental health and related legislation including Guardianship, Testamentary Capacity and Advance Directives, under supervision.
- Recovery-oriented approaches to engagement, assessment and diagnosis with older people and their supporters.
- The implications for management of recent neuroscience research.

TEACHING SCHEDULE

Topic 1	Can I Look Forward to Older Age?
Topic 2	Adapting Practice for Older People
Topic 3	Adapting Treatment for the Older Person
Topic 4	Depression and Suicide in Older People
Topic 5	Is My Memory Going?
Topic 6	"He's not how he used to be...": Personality Change and Psychoses in Older People
Topic 7	Disturbed Behaviour in Older People
Topic 8	Legal Dilemmas – Enabling Consent or Allowing Neglect?
Topic 9	Anxiety in Later Life

GRADUATE DIPLOMA
SEMESTER 2

Family Oriented Care in Mental Health

This unit provides a framework for the understanding of major models of family therapy. It allows students to examine current issues and debates about the applicability of working collaboratively with peers, persons and their families. This unit will enhance the student's knowledge and skills of current family therapy practice and encourages exploration of the integration of family work to enhance the care of a person presenting with mental distress. It also encourages students to debate how and when to apply models of family work in their practice, and to develop interventions that promote collaborative care planning and evidence-based treatment.

LEARNING OUTCOMES:

Upon completion of the unit, students will be able to:

- Demonstrate an understanding of the core principles of recovery-oriented family-focused interventions in mental health across the lifespan.
- Use advanced problem-solving skills to apply collaborative, family-oriented interventions considering all contexts, and be able to critically evaluate outcomes.
- Critically review, analyse and synthesise family therapy literature and research applied within a best practice recovery framework considering mental health models of care and policy and procedures.
- Critically review mental health services and be able to apply family-oriented interventions in the workplace.

WEEKLY SCHEDULE

Week 1	Family-Oriented Practice within a Recovery Framework
Week 2	A Family-Oriented Approach to Mental Health Practice
Week 3	Applying Family-Oriented Mental Health in Practice I
Week 4	Applying Family-Oriented Mental Health in Practice II
Week 5	Assessing Families I – Recovery and the Family Life Cycle
Week 6	Assessing Families II – Recovery and the Family Life Cycle
Week 7	Systemic Case Formulation and Engaging Families
Week 8	The First Family Therapy Interview
Week 9	Solution-Focused Brief Therapy
Week 10	Structural Family Therapy
Week 11	Narrative Therapy
Week 12	Systemic Family Therapy
Week 13	Evidence-Based Practice, Research and Evaluation
Week 14	Applications of Family-Oriented Therapy
Week 15	More Applications, Ethics, Professional Development and Training

Individual Therapies in Mental Health

This unit investigates current issues and debates on the role of psychotherapy, e-therapies and other therapies and technologies in different settings and models of care. Students will consider the suitable application of different psychotherapeutic techniques to practice. They will develop intervention plans that promote collaborative care planning and evidence-based treatment, including models of support for people using e-therapy. As a study focus, this elective unit examines the core principles of Cognitive Behavioural Therapy (CBT) and Motivational Interviewing (MI) within recovery-oriented mental health care, and explores key adaptations required for individuals across life stages. It will enhance students' knowledge and skills in the application of CBT and MI to enhance the care of a person presenting with mental distress.

LEARNING OUTCOMES:

Upon completion of the unit, students will be able to:

- Demonstrate an understanding of the core principles of individual psychotherapy focused interventions (CBT and Motivational Interviewing) in mental health across the lifespan.
- Use advanced problem-solving skills to apply collaborative, individual oriented therapy and be able to critically evaluate outcomes.
- Demonstrate enhanced clinical judgement when applying individual psychotherapeutic interventions considering socio-economic, political, gender, spiritual and cultural contexts of practice in mental health.
- Critically review mental health services and be able to support people in undertaking e-therapy.

WEEKLY SCHEDULE

Week 1	Overview of Recovery-Oriented Individual Psychotherapy
Week 2	Cognitive Behavioural Therapy: Key Principles and Case Formulation
Week 3	Cognitive Behavioural Therapy: Cognitive Interventions
Week 4	Cognitive Behavioural Therapy: Relaxation Training
Week 5	Cognitive Behavioural Therapy: Behavioural Interventions
Week 6	Mindfulness Based Cognitive Behavioural Therapy and Emotion Regulation
Week 7	Motivational Interviewing – I
Week 8	Motivational Interviewing – II
Week 9	Managing Transference, Process and the Therapeutic Alliance
Week 10	Evidence Supported Practice and Monitoring Outcomes in Individual Therapies
Week 11	E-therapy and Web-based Therapy
Week 12	Strengths-based Approaches
Week 13	Cultural and Spiritual Diversity
Week 14	Gender and Sexuality Issues
Week 15	Integrative Therapy Case Scenarios

Research and Project Planning

Research and Project Planning provides students with the skills and an understanding of how to integrate their knowledge and experiences into a capstone project that generates new knowledge and/or insights for the improvement of mental health care. This unit brings together students from the Psychiatric Medicine and the Master of Applied Mental Health Studies, maximising opportunities for interdisciplinary insight and collaboration, both during study and in practice settings. Guided by the second semester Mental Health Capstone unit learning outcomes, students will formulate a detailed proposal for either a research or non-research capstone project, to a standard that meets submission requirements for ethics committee review.

LEARNING OUTCOMES:

Upon completion of the unit, students will be able to:

- Demonstrate ability to critically review and synthesise the research and other relevant literature in response to the proposed project.
- Formulate a proposal relevant to mental health which explains the rationale for the project and its design, considers ethical implications, and outlines plans for implementation, data analysis and dissemination of findings.
- Demonstrate ability to communicate in a compelling and authoritative way regarding the proposed project, its theoretical significance, and its application in the workplace.

TEACHING SCHEDULE

Topic 1	The Capstone project
Topic 2	Ethics Plus I: Ethical principles and the ethics application process
Topic 3	Ethics Plus II: Intellectual property and OH&S
Topic 4	Identifying and developing a research topic
Topic 5	Searching and evaluating the literature
Topic 6	Design considerations I: Quantitative methods
Topic 7	Design considerations II: Qualitative methods
Topic 8	Questionnaires and surveys
Topic 9	Focus groups
Topic 10	Interviews
Topic 11	Secondary data
Topic 12	Data organisation and analysis
Topic 13	Written reports
Topic 14	Oral presentations
Topic 15	Posters

Comorbidity and Complexity

Using the CanMEDS domains of Health Advocate and Scholar, students will develop advanced knowledge and skills in applying the principles of recovery-oriented care when working with people with three types of comorbidities that may be associated with mental illness: substance disorders, forensic issues and intellectual disability.

The co-occurrence of one or more disorders presents challenges for people with mental illness, their supporters and communities as well as for health practitioners in mental health care management. This is further complicated through issues addressed earlier, where the consumer's context added compounding social, cultural or other factors that need to be taken into account in the determination and implementation of care.

A recovery-orientation presents the challenge of ensuring that its key principles are aspired to and met, even within highly restrictive environments. Students will familiarise themselves with consumer perspectives of experiencing 'comorbidity' and develop skills in health advocacy to support people with complex mental health needs. Social justice, inclusion and citizenship campaigns for the rights of people with disabilities interface with the recovery movement and students will consider these issues in the light of barriers to the application of collaborative recovery-oriented mental health care.

LEARNING OUTCOMES:

Upon completion of the unit, students will be able to:

- Critically appraise the application of clinical and 'lived experience' leadership in identifying and enacting opportunities to improve collaboration.
- Critically appraise the role and ethics of the doctor working with people with mental illness with comorbidity in regards to medicolegal reports.
- Debate and critique the effects of the presence of comorbidities upon violence risk assessment and management within recovery-oriented mental health care.
- Deconstruct management approaches in working with people with comorbidity including appropriateness of use of supervision and reflection upon the effects of the student's own cultural values and stigma.
- Describe the pharmacology of the common drugs of abuse and dependence, the epidemiology and aetiology, physical and psychological sequelae and treatment interventions for substance abuse and dependence.
- Critically analyse implications of Aboriginal people's social and emotional wellbeing for mental health leadership and improvement.
- Justify and present a plan to improve access to prevention, promotion and/or early intervention activities for individuals with comorbidity, their families and carers, with evidence and epidemiological justification of the approach.

TEACHING SCHEDULE

Topic 1	Leadership in recovery-oriented care
Topic 2	Improving Aboriginal social and emotional wellbeing
Topic 3	Limiting the harm from alcohol abuse
Topic 4	Neuropharmacology and stimulants
Topic 5	People with mental illness and drug misuse
Topic 6	Assessing risk and management of harm to others
Topic 7	Reducing over-the-counter and prescribed medication abuse
Topic 8	Working with people with opiate dependence
Topic 9	Professionalism in forensic related mental health - assessment and reporting
Topic 10	Working to improve the mental health of people with intellectual disability
Topic 11	Working to improve the mental health of people with intellectual disability
Topic 12	Working with people with intellectual disability
Topic 13	Forensic mental health systems and legislation
Topic 14	Working with 'difficult people'
Topic 15	Disorders and problems more common in forensic populations
Topic 16	Sleep disorders - social, psychiatric or medical?
Topic 17	Working with people with problems with gambling
Topic 18	Preventing nicotine misuse in people with mental illness

Psychotherapy and Recovery

Communication and psychotherapeutic skills are valued as core skills for medical practitioners in delivering effective mental health care. However, with the increasing focus upon recovery, scientific findings in the neurosciences and the plethora of democratised mental health interventions offered via the internet, students will be asked to think critically about the place of psychotherapy within their own work settings and how psychotherapy maintains relevance in contemporary mental health care.

Using the CanMEDS domains of Communicator and Collaborator, students will increase their knowledge and understanding of the theoretical constructs and scientific underpinnings of psychological therapies that they will continue to use throughout their medical practice. In reviewing psychotherapy in light of recovery-oriented mental health practice, students will be asked to consider if assumptions built into some psychotherapies or their application create barriers to preclude the equitable participation of all people. Students will address the theoretical perspectives and applications of psychodynamic and structured psychotherapies including Cognitive Behavioural Therapy, Interpersonal Therapy, Dialectical Behaviour Therapy and others and learn key psychotherapeutic skills. Topics include building psychodynamic awareness and skills, e-therapies, the application of neurosciences to understanding psychotherapy and interprofessional communications. Students will use a review of their learning to identify and communicate a plan for professional development that supports psychotherapeutic practice appropriate to their projected work settings and roles.

LEARNING OUTCOMES:

In this unit of study, using a knowledge of psychological distress, mental illness and psychotherapies, and with application of identified medical competencies to the students workplace and role, students will be able to:

- Critically review, evaluate and present evidence regarding success factors and barriers to successful psychotherapy and critique the implications for the student's practice.
- Critique key principles and theoretical basis of a wide range of psychodynamic and structured psychotherapeutic modalities, including the neurobiological aspects of psychotherapy.
- Critique the use of documentation and other communication between professionals to maintain a coordinated management plan in the presence of psychotherapy.
- Conduct a comprehensive psychiatric assessment with an emphasis on psychotherapeutic understanding.
- Construct a psychotherapeutic formulation incorporating relevant theoretical constructs to inform a management plan, and examine the processes of therapeutic alliance and collaboration using these constructs in a case in which psychological methods are used.
- Prepare and justify, with integration of the other learning outcomes of this unit, a professional development plan for supporting ongoing adherence to relevant professional and ethical standards of practice in psychotherapy.

TEACHING SCHEDULE

Topic 1	Psychotherapy - What's the Evidence?
Topic 2	Psychotherapy - Roles, Ethics and Collaboration in Recovery-Oriented Practice
Topic 3	Psychodynamic Therapies 1
Topic 4	Psychodynamic Therapies 2
Topic 5	Presenting Psychotherapy Cases
Topic 6	Structured Therapies
Topic 7	e-Therapies and Supportive Therapies
Topic 8	Mindfulness and Positive Psychology
Topic 9	Systemic Therapies

Neurosciences and Recovery: From the Cellular to the Social

Students will utilise the CanMEDS lens of the Medical Expert and Communicator to examine contemporary thinking and research within the neurosciences, focusing on neuroanatomy, neurophysiology and concepts of brain plasticity.

Moving beyond brain structures and function, this topic will broaden students' understandings by addressing the findings and clinical application of neuroscientific research as relevant to contemporary psychiatric and mental health practice, and consider this within the range of settings in which students work. Students will reflect upon the connection between neuroscience and recovery-oriented practice and look at how to translate the 'hard sciences' into clinical practice in a way that is meaningful, future-focused and respectful in collaborative practice when working with people with lived experience of mental illness and carers. In bringing together the neurosciences within the context of recovery, students will be asked to debate inherent tensions and consider questions such as: how do research findings within the neurosciences translate to students' areas of practice? How can practitioners and consumers effectively and respectfully communicate and discuss neuroscientific findings? How can neuroscientific findings be successfully incorporated into collaboratively based care within a recovery paradigm?

LEARNING OUTCOMES:

In this unit of study, using a culturally-informed, recovery-oriented approach, knowledge of neurosciences, mental illness and their treatments, and with application of identified medical competencies to the students workplace and role, students will:

- Critically review and evaluate the application of contemporary research, psychiatric research and treatment guidelines, to patient outcomes in specific case setting(s).
- Critique the impact of debates about the relative evidence for neuroscience and social factors as the origins of mental illness upon practice and engagement of people with mental illness into a therapeutic relationship in a selected service setting.
- Focusing on one area of neuroscientific research undertake a critical appraisal of the changes in concepts and related psychiatric practices within that area over the last decade.
- Describe and analyse a neuroscientific basis of 'treatment refractiveness', and its implications for both development of novel treatment approaches and recovery-oriented practice.
- Critically review, deconstruct the comprehensiveness and appropriateness of psychiatric assessments and management plans for patients of any ages, to improve the application of research and evidence-based biological and psychosocial approaches.
- Critically reflect upon their breadth of competencies to support people with mental illness and the implications for lifelong learning.
- Apply, review and evaluate the transferability of psychiatric, mental health and other health research findings across practice settings and disciplines.
- Use highly developed written and/or verbal communication skills to communicate the significance of neuroscientific research to practice to professional and community audiences.

TEACHING SCHEDULE

Topic 1	What Matters in Neurosciences and Recovery?
Topic 2	Culture, Society and the Neurosciences
Topic 3	Advanced Exploration of Treatment Refractoriness
Topic 4	Advanced Neurostimulation
Topic 5	Advanced Child Neuroscience
Topic 6	Advanced Older Person's Neuroscience
Topic 7	Neuroscience of Psychotherapy
Topic 8	Neuroscience of Resilience
Topic 9	Mock Essay Exam

MASTERS
 SEMESTER 2

Mental Health Capstone

Students may choose to complete this unit or Neurosciences and Recovery: From the Cellular to the Social. The Mental Health Capstone builds on the skills, knowledge and understanding developed in the Research and Project Planning unit. Students critically evaluate and consolidate their knowledge through use of a researcher development framework. The unit uses seminars and small group sessions to explore what research skills are needed for quality improvement, clinical research and/or other research activities. Students choose to complete a project or prepare for a project, the task is chosen according to student career and opportunity.

Students can choose to prepare for a project or complete an improvement, or other activity appropriate to student career and opportunity.

The Mental Health Capstone is the final unit of study for students enrolled in the Master of Applied Mental Health Studies and the Master of Psychiatric Medicine.

LEARNING OUTCOMES:

Upon completion of the unit, students will be able to:

- Develop an understanding of the research needs and knowledge needed in order to plan and progress a project that integrates, synthesises and communicates student learning.
- Critically reflect upon the breadth of competencies required to support people with mental illness in pursuing recovery and the implications for lifelong learning.
- Consistently and judiciously use information technology; communicate via a compelling and authoritative written and verbal style.
- Analyse implications of Aboriginal social and emotional wellbeing for mental health improvements.
- Demonstrate an advanced and integrated understanding of complex mental health issues through the analysis and developing understanding of research to improve mental health care.

TEACHING SCHEDULE

Topic 1	Cultural Competency: Aboriginal and Torres Strait Islander, and Culturally and Linguistically Diverse communities
Topic 2	Introduction to Research Projects
Topic 3	Supporting Research - Researcher Skill Development
Topic 4	Working with Quantitative Data
Topic 5	Independent Study Week
Topic 6	Working with data
Topic 7	Research Translation
Topic 8	Project Updates
Topic 9	Independent Study Week
Topic 10	Reflection in Research
Topic 11	Independent Study Week
Topic 12	Researcher Development - assessment of progress
Topic 13	Research and Project Dissemination
Topic 14	Independent Study Week
Topic 15	Presentation of Final Report

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