

State of Libya

Libyan Medical Specialization Board

**Portfolio for
Post-Graduate
Psychiatric Training**

Libyan Board of Psychiatry

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Acknowledgement

"One day, in retrospect, the years of struggle will strike you as the most beautiful."

Sigmund Freud

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Dr Nessreen S Abusrewil

2021

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Essential Information for Using this Portfolio

Objectives of the Portfolio:

The purpose of the logbook is to provide one source of evidence for the Libyan Board of Medical Specialties that a trainee has attained the desired level of competency required to sit for the MD (Medicine and Allied) Examination. It is the record where Residents are going to document experiences and skills they will attain during their training. Residents should use a logbook to maintain records of their experience in bedside diagnostic and therapeutic procedures and attendance at educational activities. The Supervisors will periodically review the Portfolio to assess training progress and recommend remedial action where appropriate.

Instructions to the Residents:

Personal Information:

Please fill in all your personal information required. This will help the Board to process your Portfolio by the Course Director before sitting for exams.

Registration with Libyan Board of Psychiatry:

Before starting training you have to be registered with the Registration Department of Libyan Board of Medical Specialties for Psychiatry.

Clinical Case Log:

1. You will find a list of clinical problems to be managed during your training period. Your level of competence/performance in each case will be determined by your supervisor.
2. You need to mention the provisional or final diagnosis or the problems the patient had for each patient.
3. Write the date of the admission for each patient.
4. Each case entry should be signed by your supervisor. His signature is the proof of your actual participation.

Procedures' Log:

1. The logbook contains tables for required procedures to be done during different stages of training and the level of desired competency/performance at each stage.
2. Your supervisor should sign each procedure to document the event.

Academic Activities:

1. Academic activities that must be documented in the logbook are lectures, journal clubs, morbidity and mortality review meetings, and workshops or other conferences, etc. attended.
2. It is preferable that you and your supervisor determine the scientific content of the journalclub based on your learning needs.
3. You are to record Mandatory Courses/Workshops and Conferences/ Seminar/ Symposium where you will record your CME activities whether inside or outside the training centre. Any attended activity must be signed by the workshop or conference organizer/coordinator.

Rotation Training:

Libyan Board of Psychiatry has determined specific training rotations that you must go through during the training period (see your curriculum for details). After you finish each rotation make it signed by the Supervisor and countersigned by the Course Coordinator and chairman of the department.

Leave record:

Every leave application when forwarded by the Supervisor should be entered in the leave record section of the book

Assessment of Portfolio Activities:

1. Your supervisor will assess your logbook monthly to assess training progression and provide verbal or written feedback.
2. Your supervisor will send the Assessment Report to the Course Coordinator of the training department who will subsequently send the report to the Course Coordinator of the respective Chairman of Libyan Board.

Portfolio Completion Criteria

The Portfolio should always be used in conjunction with the regulations of the Libyan board of medical specialities and Libyan board of general practice as may be amended from time to time. It should reflect on Libyan General Practice specialty training program.

Important notice:

- It is your responsibility to maintain an accurate logbook and to regularly update your records.
- Shall you meet any difficulty; you must contact your supervisor/Course Coordinator or the Course Director.
- Unsatisfactory completion of the logbook would lead to delay of training progression.
- Unsatisfactory logbook at the end of training will prevent you from entering examinations.
- It is the responsibility of the resident to keep the logbook safe and secured

Curriculum of Libyan Board of Psychiatry

Curriculum Resources

The author looked at different modules of training schemes in psychiatry currently existing in European countries and in Middle East countries for comparison and reference. Literature has been searched for any publications on the evaluations of post graduate psychiatric training programmes and findings from the main resources are presented. Published reports that have been considered include:

1. The curriculum for core psychiatric training and specialist programmes: Royal College of Psychiatrist, United Kingdom
2. The WPA guidelines on development of undergraduate and postgraduate education
3. The Arab Board psychiatric training curriculum
4. Sudan medical specialisation board curriculum for psychiatric training

The author recognises and considers his knowledge of the local services arrangement and the cultural issues of the country that need to be taken on board while developing the curriculum.

Details of the training programme discussed and in principle agreed the curriculum document would include areas such as:

1. Structure of training programme
2. Clinical supervisor responsibilities
3. Programme Tutor responsibilities
4. Trainee responsibilities
5. Selection process
6. Number of training placements
7. Fast track programme for the doctors currently working in psychiatry
8. Curriculum knowledge content
9. Competencies for each stage of training
10. Integrating training with other medical training programmes such as neurology
11. Assessment process

Theoretical Teaching:

Teaching modules, covering psychiatry and disciplines necessary for the understanding and the practice of psychiatry, psychotherapy, seminars, tutorials, case presentations and discussions, journal clubs, videos, research and research presentations (see table hereunder), and an enrichment program.

Basic Psychology
Social Psychology
Cognitive Psychology
Human Development
The Personality and its Problems
Research methods, Statistics, Epidemiology and Evidence-based practice ...
History taking and psychiatric examination, Mental Status, Formulation. Psychological tests & lab. investigations Diagnosis & classification
Basic Neurosciences (Neuroanatomy, Neurophysiology)
Basic Neurosciences (Neurochemistry, Genetics)
Psychiatry overview & Emergency Psychiatry
ECT
Philosophy, Ethics, Religion & Psychiatry
Case conferences, Seminars
Journal Club, Research Presentations
Psychotherapy
History of Psychiatry, Social Science & Socio-cultural Psychiatry
Neurobiology & Clinical Psychopharmacology
Child and Adolescent Psychiatry
Learning Disability
Mental Health Problems and Mental Illness
Addictions and Addictive Behaviour
Old Age Psychiatry
Consultation Liaison, Clinical Topics Interfacing Medicine & Psychiatry
Forensic Psychiatry
Sex, Marital and Couple problems
Clinical Neurology, Neuropsychiatry, EEG, Neuroimaging
Perinatal Psychiatry
Eating Disorders
Leadership and Management
Chronic care & psychiatric rehabilitation

Theoretical Teaching:

Seminars, tutorials, case presentations and discussions, journal clubs, videos, research and research presentations and an enrichment program.

Teaching modules (In-depth mental health problems, Advanced psychopharmacology, Psychotherapy, Special topics including recent developments and telemedicine). (see table here under)

- In-depth mental health problems
- Advanced psychopharmacology.....
- Special topics including recent developments and telemedicine
- Case conferences, Seminars
- Journal Club, Research Presentations
- Psychotherapy

Guidelines for the Supervisors:

1. The logbook is a day to day record of the clinical and academic work done by the Resident.
2. It is the responsibility of the supervisor to indentify and inform the Resident of the area in which he/she is lacking and provide opportunities to improve the competence.
3. Supervisors or his/her designated consultant/trainer should sign the completed events on that particular day in the appropriate column of the Logbook.

Levels of Competence/Performance:

The level of competence/performance at which a skill is performed by the trainee should be recorded in the given column of the Logbook.

For Patient Management:

- Level 1: Observed/Assisted
- Level 2: Managed under supervision
- Level 3: Managed independently

For Procedures and Investigations:

- Level 1: Observed/Assisted/Interpretation
- Level 2: Performed under supervision
- Level 3: Performed independently

Note: *All entries in the Logbook should be verifiable and the Course Director reserves the right to demand evidence in the form of hospital records in order to verify the data provided in the record sheets*

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Research project to fulfill the requirement for entrance the second part paper exam of Libyan board of Psychiatry

The Libyan board of medical specialty requires the trainee to conduct research as part of their training and assessment for the qualification for the degree awarded. The Bylaws section 90 to 95 regulates the research activity and highlights the resources available to support trainees.

نموذج إعتماء البحث العلمى لتخصص الطب النفسى

عنوان البحث:

اعتماد مشرف البحث _____

قرار - :

يقر مقرر البحوث بالمجلس أنا المتدرب _____

قد أنجز البحث العلمى المطلوب منه حسب معايير المجلس العلمى لتخصص.

يعتمد _____

مقرر البحوث بالمجلس العلمى لتخصص الطب النفسى

RESEARCH PROJECT ACCOMPLISHMENT FORM

Research title:

Research project supervisor: _____

(Signature)

Candidate: _____

The research project fulfill the requirements for entrance to part II paper exam of Libyan board of Psychiatry.

Research affairs secretary of

Libyan board of Psychiatry

(Signature)

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Record Of Educational Meetings With Supervisor

The portfolio at the end of each year should demonstrate engagement with all of the activities below and a minimum of 2-hours formal tuition per month / 24-hours for the year. However, the aim should be to show engagement above the minimum standard.

Use the letters below to record the general focus of the meeting and then describe what was done. The meeting could focus on one of the following learning conversations:

A: Setting a learning agenda(at least every 6-months): Reflection on the trainee experience to date, expectations or progress and planning of learning activities and goals for the next period.

B: Intermittent evaluation: For the trainee and trainer to check progress, review the portfolio, discuss any difficulties in their relationship or the organization that impede learning or service delivery, make new plans. Feedback can also be given and received on the programme or trainee performance.

C: Clinical / communication skills: Observation review of communication, consultation or procedural skills and feedback with role-play or simulation. Other clinical skills might also be demonstrated.

D: Case based discussions: Reflect on your actual patients through the use of record review, presentation of problem patients or clinical tutorials on specific topics. Reflect on difficult consultations, emotions or ethical dilemmas that arise from your clinical practice or setting.

E: Evidence based practice: Reflect on and critically appraise current journals and original research.

F: Other: For example co-ordination of on-line learning tasks with the on-site professional experience and service priorities i.e. topic for the quality improvement cycle

Please also refer to the section in the guide on educational meetings.

Date	Group or individual meeting	Code letter from list of learning opportunities	Duration (hrs)	Description of content covered / activities / topics	Signature of Supervisor

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ASSIGNMENTS

Written assignments may be used to provide evidence of learning in any of the following areas . Please include any of the following assignments together with their assessment in your portfolio. By the end of the 4 years you should have assignments in all of the following categories. These assignments are usually integrated into the requirements of your academic program and can just be copied and included in your portfolio:

- Clinical competence (e.g. patient studies that demonstrate diagnostic reasoning, bio-psycho-social approach)
- Family-orientated Psychoeducation
- Ethical reasoning and medico-legal issues
- Clinical governance
 - Evidence-based Medicine (e.g. critical appraisal of a journal article, searching for evidence, use of guidelines)
 - Quality improvement cycle / audit
 - Significant event analysis (SEA)
 - Morbidity and mortality meeting reports
 - Monitoring and evaluation meeting reports
- Workshops are listed below that are mandatory for polishing the trainees clinical skills and knowledge over the duration of the training for the Libyan Board of Psychiatry

Workshops/clinical skills
Nasogastric Intubation/ Urethral Catheterization /Use of Glucometer/IV Cannula
Resuscitation Technique/ECG interpretation
CT/MRI/PET/SPECT/Radiological Investigations
CBT/childhood CBT/Family therapy
Electroconvulsive Therapy(ECT)
Psychometric Tests Administered And Interpretation
Counseling Sessions/Family therapy
Behavioral Therapy / Relaxation Techniques /meditation
Procedure of Issuing Psychiatric Certificate
Forensic Assessments And Reports
Substance Misuse

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LOGBOOK

The following tables list the clinical skills that should be acquired or consolidated during the 4-year postgraduate training in general practice. The list is intended to guide you and your supervisor on what core practical experience and skills training to focus on. The supervisor should evaluate your competency at least every **6-months**.

It is assumed that while learning these specific skills you will also be exposed to an appropriate spectrum of patients and will be supervised in the relevant clinical assessment, decision making and management.

The logbook does not aim to assess or capture all the competencies needed to be a psychiatrist, nor is it the only way of assessing you. Some competencies or skills will also be tested or validated via other means, e.g. orals, clinical, OSCEs, Multiple Choice Questions, assignments and written papers in formal exams.

THE WORK BOOK (LOGBOOK)

The scope of the work book is to provide documentary evidence of the experience gained by the trainee in the understanding, investigating and managing of a range of psychiatric problems.

The trainee is expected to write detailed notes on the conditions as indicated hereunder, that he/she was involved in the management of. The notes are to include the presenting complaint, the relevant histories, examination, investigations, formulation, management, any problems encountered and how they were approached.

Biological, psychological aspects of the illness/condition/patient are to be given due Importance.

The number of cases indicated refer to the number that the trainee has to gain experience in over the four year course. The number of cases for the Part One of the course is to be arranged individually by the trainee with the Director of Training who takes into consideration the trainee's wishes for professional development and the trainee's clinical placements.

The Director of Training or his delegate/s mark the work done once yearly. The work may be marked as 'Good', Very Good, Excellent, or Below Standard. In the latter case, the Director of Training may ask Trainee to present the case again.

The educational supervisor is expected to monitor and guide trainee in the management of the work book.

Illness/Condition	Minimum No Of Cases	Notes
Schizophrenia	10	
Brief Psychotic Episode	5	
Substance Misuse Psychosis	10	
Delusional disorders	10	At least one case of: Erotomantic, Grandiose, Jealous, Persecutory, Somatic, Mixed.
Mood Disorders:		
Depressions	15	
Bipolar Disorders	15	
Anxiety Disorders:		
GAD	15	

Panic Disorder	5	
Obsessive Compulsive Disorder	10	
Acute stress reaction	5	
Post Traumatic Stress Disorder	5	
Somatoform Disorders:		
Somatisation Disorder	5	
Conversion Disorder	5	
Illness Anxiety Disorder	5	
Somatoform Pain Disorder	1	
Body Dysmorphic Disorder	1	
Factitious Disorder	1	

Sleep Disorders:		
Insomnias	10	
Eating Disorders (ED):	15	At least 2 cases of Bulimia Nervosa, 2 cases of Anorexia Nervosa, and one case of each of the following: Binge Eating Disorder Compulsive Overeating Night Eating Syndrome ED in endocrine disease ED in pregnancy ED in neurological conditions ED in personality disorders ED in in homosexuality ED in in body dysmorphic disorder
Organic Psychiatric Disorders		
Neurocognitive Disorders	10	To include-Alzheimer's disease, Vascular dementia, Dementia with Lewy bodies, Frontotemporal dementia, Huntington's disease, Normal pressure hydrocephalus, Prion disease.

Confusional State	5	
Medical disorders with psychiatric manifestations	20	At least 8 cases of epilepsy . At least one of the following: Cerebral tumour, Cerebral abscess, Head Injuries and Brain damage, Multiple sclerosis, Parkinson's disease, Systemic lupus erythematosus, HIV Dementia, Cushing's disease, Addison's disease, Hyperthyroidism, Hypothyroidism, Hypercalcaemia.
Personality disorders (PD)	5	At least one of the following: Paranoid PD, Schizoid PD, Dissocial PD, Emotionally unstable PD, Histrionic PD,, Anxious (avoidant) PD, Dependent PD.
The Violent/Aggressive patient	5	To include both verbal and physical aggression
The Suicidal patient	10	To include both sexes and suicidality in youth, adulthood and old age.
Substance Misuse Dependence / Non-dependence	10	To include both drug and alcohol problems.
Sexual and Intimacy Problems	5	To include at least one of the following: Low sexual desire disorder, sexual aversion disorder, erectile dysfunction, premature ejaculation, anorgasmia, Sexual pain disorders, paraphilia.
Peri-Partum Problems	5	To include at least two of each of following: Psychiatric problems during pregnancy, Post partum disorders.
Children & Adolescents	10	To include ADD, ADHD, Oppositional Defiant Disorder, Conduct Disorder.
Miscellaneous:		At least one of the following: Neuroleptic Malignant Syndrome, Psychiatric problems in a patient with neurological disease, Psychiatric problems in a patient with endocrinological disease.

Section 2:Investigations and Procedures:

Number of Investigations/Procedures and level competence/performance to be attained during the Training Program:

Investigations/Procedures	Level of competency	Minimum to be performed
Nasogastric Intubation/ Urethral Catheterization /Use of Glucometer/IV Cannula	3	5
Resuscitation Technique	3	3
CT/MRI/PET/SPECT	1	10
Radiological Investigations	1	5
Electroconvulsive Therapy	3	10
Psychometric Tests Administered And Interpreted	1	5
Counseling Sessions	1	5
Behavioral Therapy / Relaxation Techniques / Other Non pharmacological Intervention	2	5
Procedure of Issuing Psychiatric Certificate	2	5
Forensic Assessments And Reports	2	5
ECG	1	5

- **Nasogastric Intubation/urethral catheterization/IV cannula/glucometer**

no	date	Age/gender	interpretation	Level of performance	Supervisor sign

- **Radiological Investigations/CT/MRI/PET/SPECT**

no	date	Age/gender	interpretation	Level of performance	Supervisor sign

- **Electroconvulsive Therapy ECT**

no	date	Age/gender	interpretation	Level of performance	Supervisor sign

- **Resuscitation Technique**

no	date	Age/gender	interpretation	Level of performance	Supervisor sign

- **Psychometric Tests Administered and Interpretation**

no	date	Age/gender	interpretation	Level of performance	Supervisor sign

- **CBT / Relaxation Techniques /Counselling sessions/Family therapy**

no	date	Age/gender	interpretation	Level of performance	Supervisor sign

- **Procedure of Issuing Psychiatric Certificate**

no	date	Age/gender	interpretation	Level of performance	Supervisor sign

- **Forensic Assessments and Reports**

no	date	Age/gender	interpretation	Level of performance	Supervisor sign

Section 4- Academic Activities:

Event	Minimum requirements
Lectures	70%
Tutorials/small group teaching attended	70%
Grand round/Clinical meeting presentations	10
Conferences/Seminars/Symposium/Workshops	5
Journal club presentations/case presentations	10
Mandatory Courses/Workshops Attended	As per curriculum
Papers/Posters presented in conferences/seminars/symposium	optional
Papers/Abstracts published in Libyan Board approved Journals	optional

- **Mandatory Courses/Workshops Attended**

(As per Curriculum requirement)

<i>Course/Workshop</i>	<i>Date</i>	<i>Venue</i>	<i>Supervisor sign</i>

- **Conferences/Seminars/Symposium/Workshops**

<i>Name of Event</i>	<i>Date</i>	<i>Venue</i>	<i>Supervisor sign</i>

- **Papers/Posters presented in conferences/seminars/symposium**

<i>Title</i>	<i>Conference</i>	<i>Venue</i>	<i>Supervisor sign</i>

- **Papers/Abstracts published in Libyan Board approved Journals**

<i>Title</i>	<i>Name of Publishing Journal</i>	<i>Full Reference</i>	<i>Supervisor sign</i>

THE CASE CONFERENCE

The format of the case conference should be adapted according to the nature of the patient that is being presented. In general it can be structured into two distinct sections; the presentation of a case and the subsequent discussion.

The presentation must be as interactive as possible.

Suggested format:

History

- Mental state examination
- Possible interview of patient or alternatively a short video tape of a patient
- Investigations – biological, social and psychological
- Aetiology
- Differential diagnosis
- Management - biological, social and psychological
- Presentations of evidence base for diagnosis/management i.e. review of relevant interesting issues

The Evaluation

Grade A: Excellent

Grade B: Good

Grade C: Satisfactory

Grade D: Below standard

Date	Name of Presenter (Trainee)	Name of Presentation	Supervisors sign

	Grade	Notes
Organization of the Presentation		
Clarity of Presentation		
Establishing and maintaining contact with audience		
MSE		
History taking		
Investigations		
Discussion of Aetiology		
Discussion of Differential Diagnosis		
Discussion of management		
Overall Grade		

Any strengths

.....

Any weaknesses

.....

Any suggestions

.....

Signature of Module Coordinator

JOURNAL CLUB ASSESSMENT FORM

Aims of the Journal Club:

1. To foster comfort and familiarity with critical reading of the psychiatric literature. to learn techniques of appraising review papers, meta-analyses, scientific papers and the scientific method.

2. To discuss elements of research methodology (study design, statistical analysis, etc.) so that research findings can be better understood and put in clinical perspective.

3. To keep abreast of recent findings in the literature.

The presenter (trainee) should cover the bare bones of the paper – the introduction and the relevance of the paper, the method, the results and the discussion. He/she is also to focus on the good points of the paper, the limitations and biases, and suggestions for improvement – how could the research have been more effective?

The Evaluation

Grade A: Excellent

Grade B: Good

Grade C: Satisfactory

Grade D: Below standard

Date	Name of Presenter (Trainee)	Name of Presentation/Article/Study	Supervisor sign

Choice of Article/Study (how relevant, how interesting etc)	A	B	C	D
Trainee presented material in a clear and coherent fashion.	A	B	C	D
Trainee presented a coherent summary of study	A	B	C	D
Trainee demonstrated an understanding of the methodology of the study.	A	B	C	D
Trainee was able to assess the validity of the results.	A	B	C	D
Trainee was able to assess the applicability of the results to patient care.	A	B	C	D
Trainee was able to Establish and to maintain good contact with audience	A	B	C	D
Overall Grade	A	B	C	D

Comments:

Signature of Supervisor

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Summary Record Of Requirements To Enter Exams

Each candidate must perform at least the minimum requirements in order to attend each exam ,if not this will lead to a delay in their training .

Part 1:

Part 1 is a written exam only to assess the basic knowledge of the candidate.

No	Events/Tasks	Minimum	Performed
1	Inpatient management	50	
2	Outpatient management	100	
3	Emergency management	20	

Event	Minimum requirements	No % Done
Lectures	70%	
Tutorials/small group teaching attended	70%	
Grand round/Clinical meeting presentations	10	
Conferences/Seminars/Symposium/Workshops	5	
Journal club presentations/case presentations	10	
Mandatory Courses/Workshops Attended	As per curriculum	
Papers/Posters presented in conferences/ seminars/symposium	optional	
Papers/Abstracts published in Libyan Board approved Journals	optional	

Part 2:

Part 2 consists of both a written and a practical exam.

(Research is mandatory to enter part 2 exam)

No	Events/Tasks	Minimum	Performed
1	Inpatient management	50	
2	Outpatient management	100	
3	Emergency management	20	

Event	Minimum requirements	No % Done
Lectures	70%	
Tutorials/small group teaching attended	70%	
Grand round/Clinical meeting presentations	10	
Conferences/Seminars/Symposium/Workshops	5	
Journal club presentations/case presentations	10	
Mandatory Courses/Workshops Attended	As per curriculum	
Papers/Posters presented in conferences/seminars/symposium	optional	
Papers/Abstracts published in Libyan Board approved Journals	optional	

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End Of First Part Year's Assessment Of Portfolio

Year 1

The portfolio is: Poor Barely adequate Average Good Excellent

Organization: Good Could be better Disorganized

Content: Good evidence of learning? Poor evidence of Learning?

Recommendations: _____

Signed: _____

Training affairs secretary name: _____

Date: _____

Year 2

The portfolio is: Poor Barely adequate Average Good Excellent

Organization: Good Could be better Disorganized

Content: Good evidence of learning? Poor evidence of Learning?

Recommendations: _____

Signed: _____

Training affairs secretary name: _____

Date: _____

End Of Second Part Year's Assessment Of Portfolio

Year 3

The portfolio is: Poor Barely adequate Average Good Excellent

Organization: Good Could be better Disorganized

Content: Good evidence of learning? Poor evidence of Learning?

Recommendations: _____

Signed: _____

Training affairs secretary name: _____

Date: _____

Year 4

The portfolio is: Poor Barely adequate Average Good Excellent

Organization: Good Could be better Disorganized

Content: Good evidence of learning? Poor evidence of Learning?

Recommendations: _____

Signed: _____

Training affairs secretary name: _____

Date: _____