

## Placement-specific personal development plan – Learning (Intellectual) Disability Psychiatry exemplar

This exemplar provides suggestions of the ways in which capabilities can be developed and evidenced. It can be used to inform the conversation between trainee and trainer at the start of each placement / training post, in which they should agree activities and evidence as part of setting up a personal development plan.

Post Description	Forensic ID Psychiatry – Community (80%) and Inpatient (20%)
Post Length	One year
Training Year	ST6
Career Progression Plan	
ST4	Community Intellectual Disability Psychiatry Placement
ST5	Community Intellectual Disability Psychiatry Placement
ST6	Forensic Intellectual Disability Psychiatry Placement
Professional Developmen	t Sessions
ST4	ADHD and Autism Spectrum Disorders
ST5	CAMHS LD
ST6	Clinical genetics and epilepsy

The below table outlines the High Level Outcomes (HLOs) and Key Capabilities (KCs) to be achieved under 16 key themes.

## **Specialty HLO statements**

	HLOI: Demonstrate the professional values and behaviours required of a consultant psychiatrist, with reference to Good Medical Practice, and Core Values for Psychiatrists (CR204) and other relevant faculty guidance.			
High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs):  By the end of this training year, you will be able to:	Planned activities	Evidence including WPBAs	
1.1 Professional Relationships	Work collaboratively and effectively with patients with an intellectual disability, their families, their carers of all ages, and colleagues, while managing complex risk and system dynamics.	When completing forensic assessments, involve the patient, their family and carers in the process and effectively communicate the outcome of the assessment including concerns about risk.	CbD ACE Reflective notes Patient feedback	
	Recognise, validate and actively address systemic and structural inequalities, intersectionality, and their impact on clinical outcomes for patients and their carers of all ages, and on working relationships with colleagues.			
	Consistently demonstrate, and promote in others, a person-centred holistic approach to patients with an intellectual disability, their families and their carers of all ages that is empathic, compassionate and respects their dignity, whilst remaining realistically optimistic and honest.			
	Demonstrate flexibility, leadership, use of initiative, prioritisation, and adaptability,			

	effectively managing your time and resources and using new technologies as appropriate.  Understand the fundamental role of multidisciplinary team working in intellectual disability practice and the role of the psychiatrist within this.  Apply an understanding of how culture and community influence patients with intellectual disability and their families, affecting their interaction with services.  Set and maintain professional boundaries with stakeholders, for example adult services, commissioners, support providers, legal professionals, the police and primary and		
	Advocate for your patients with intellectual disability; where necessary do so separately to the needs and wishes of other systems, for example families and carers, primary and secondary care and social care.	Reflect on the different priorities of people and services involved in the care of the patient. Consider how conflicting and divergent opinions might adversely impact patient outcomes	Supervision notes Reflective notes CP CbD
1.2 Professional Standards	Understand the impact of workload, patient, team and organisational dynamics on your own well-being.		
	Use supervision and reflection effectively, recognising your skills, limitations and your duty of candour.		

Apply strategies to take care of your wellbeing, seeking timely support and guidance, including acknowledging if you have a protected characteristic which might impact on your training, or if you are having difficulties adapting to working in the UK, and support trainees and other colleagues to do so too.	Attend the Trust Wellbeing group and the RCPsych Start Well Event. Reflect on how to manage stress and how to maintain a healthy work life balance.	Course certificate Reflective notes Supervision notes
Actively use and promote reflective practice in your team to address the emotional impact of work on yourself, the individual and the team.		
Consistently demonstrate a positive and conscientious approach to the completion of your work.		
Make clear, accurate and contemporaneous records.		
Promote psychiatry of intellectual disability as a specialty, including acting as an advocate for patients, families and carers.		
Maintain appropriate professional standards whilst working clinically, as a leader within a healthcare organisation and with other stakeholders.	There is a potential in forensic psychiatry for conflict to arise during clinical meetings, Care and Treatment reviews, Mental Health Review Tribunals and when giving evidence in court. Discuss and reflect upon how to maintain appropriate professional attitudes and	Supervision notes Reflective notes DOPS DONCS Mini PAT

		behaviour when conflict arises.	
	Maintain appropriate confidentiality in intellectual disability practice and advise other professionals within and outside the health and social care setting.		
	Identify and challenge stigma and discrimination against people with intellectual disability.		
	Promote the resources available within the specialist team to the wide health and social care system, in order to enable optimal physical health of patients.		
	Take responsibility for raising and addressing issues of patient safety and quality of care in a timely manner.		
	Maintain appropriate professional attitudes and behaviour when managing situations of ambiguity and uncertainty		
	Demonstrate an understanding of the principles of sustainability and how they underpin sustainable psychiatric practice.		
	trate advanced communication and interperso eir wider community, colleagues and other prof		ents, their families, carers of all
High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities	Evidence including WPBAs

2.1 Communication	Demonstrate an understanding of your own style of verbal and nonverbal communication and the impact of this on professional relationships.		
	Consistently communicate effectively with patients across the spectrum of cognitive ability, including those with neurodevelopmental disorders and relevant others, utilising a range of methods and adapting your style of communication to the patient's needs, making reasonable adjustments as appropriate.		
	Demonstrate skills in supporting those for whom English is not their first language, including the use of interpreters, and providing information in other languages.		
	Develop and maintain therapeutic relationships with your patients with intellectual disability, their families and their carers of all ages.		
	Communicate effectively with colleagues in the multidisciplinary team and promote interagency working through effective liaison with external organisations.		
	Analyse complex information and express your professional opinion coherently through both written and verbal communication.		
	Produce written reports within the limits of your expertise, which are coherent, comprehensive, timely, accurate, relevant,	Develop proficiency in the preparation of specialist forensic reports including those required by the courts,	ACE Mini ACE CbD

	and as appropriate taking into account legal principles and requirements.	the Ministry of Justice and for the purpose of Mental Health Review Tribunals.	СР
	Effectively explain to patients with intellectual disability, their families and their carers of all ages, the outcome of the assessment and the recommended care plan, considering their ideas, concerns and expectations.	Communicate effectively with patients, families and carers regarding the purpose and outcome of any forensic assessment and recommendations.	ACE Mini ACE Patient feedback
managei	HLO 2.2: Demonstrate advanced skills in the psychiatric assessment, formulation, diagnosis and person-centred holistic management of an appropriate range of presentations in a variety of clinical and non-clinical settings within Learning (Intellectual) disability psychiatry.		
High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities	Evidence including WPBAs
2.2 Clinical Skills	Demonstrate a person-centred holistic approach to the assessment and treatment of mental disorders in patients with intellectual disability considering relevant social, cultural, spiritual and religious factors.		
	Demonstrate a working knowledge of the genetic causes of intellectual disability and the associated behavioural phenotypes.	Attend genetics clinic	PDS report
	Understand the principles of life span issues that affect people with intellectual disability and their families, and how these influence the management of transitions.		
	Demonstrate an appropriate understanding of learning and behavioural stages of human		

development through the lifespan including awareness of normative as well as variations in presentations, for example with neurodevelopmental conditions and across cultures.	
Demonstrate proficiency in the assessment of capacity to consent to care and treatment in patients with intellectual disability.	
Demonstrate an understanding of the social determinants of health, including economic deprivation, inadequate nutrition, educational and environmental factors and the impact of these on the aetiology and presentation of mental disorders in patients with intellectual disability.	
Apply advanced knowledge of the pharmacodynamics, pharmacokinetics, efficacy, tolerability, interactions and adverse effects of psychotropic medication in patients with intellectual disability as appropriate when initiating, reviewing, changing or discontinuing regimes.	
Demonstrate proficiency in obtaining a detailed psychiatric history and performing a mental state examination in patients with intellectual disability in both routine and urgent settings.	
Assess patients from a range of different cultural, spiritual, and religious backgrounds, including asylum seekers and refugees, and demonstrate an understanding of how	

protected characteristics may impact on clinical presentation.		
Conduct a thorough physical examination, request relevant investigations and make referrals to other specialists where appropriate.		
Assess the general health of your patients, taking into account the impact of their physical health on their mental health needs and vice versa. This assessment should include consideration of nutritional, metabolic, endocrine and reproductive factors and disorders, and the physical and mental impact of substance use and addiction on clinical presentation.		
Demonstrate proficiency in the assessment and diagnosis of mental and neurodevelopmental disorders in patients with intellectual disability across the spectrum of cognitive ability using classification systems as appropriate.		
Demonstrate proficiency in the assessment of risk in people with intellectual disability leading to a formulation and risk management plan.	Complete a detailed risk assessment and management plan for each new referral to the forensic team allocated to your caseload.	CbD ACE Mini ACE
	Attend training in HCR 20 risk assessment and complete at least two HCR 20 assessments with the MDT.	Course certificate DOPS

Demonstrate proficiency in the construction of a comprehensive clinical formulation relevant to patients with intellectual disability and use this to devise a safe, effective and evidence-based management plan.	Attend and contribute to a     Care and Treatment Review.	DOPS Feedback from CTR chair
	Provide a psychiatric formulation of the key issues and give expert advice on risk assessment and management.	Reflective notes CbD
	Recommend a care plan to support the patient safely in the least restrictive setting.	DOPS CbD
Demonstrate proficiency in use of formulation to support the understanding of challenging behaviour in patients with intellectual disability, including the link between communication and behaviour.	Provide a psychiatric formulation of the key issues and give expert advice on risk assessment and management.	Reflective notes CbD
Demonstrate an understanding of the utility and limitations of clinical rating scales and psychometric testing for people with intellectual disability.		
Demonstrate skills in the assessment and management of acute mental health crises in patients with intellectual disability.		
Demonstrate specialist skills in the assessment and management of cognitive impairment in older patients with intellectual disability.	Assess and manage patients with ID and dementia	ACE/Mini-ACE CbD Supervisor report

Demonstrate an understanding of the assessment and treatment of epilepsy in patients with intellectual disability.	ID Epilepsy Clinic PDS session	PDS supervisor report
Demonstrate advanced knowledge of psychological and psychotherapeutic treatments in the management of mental and behaviour disorders in adults with intellectual disability.		
Understand the range of community and inpatient treatment options for mental and behaviour disorders in patients with intellectual disability.	<ul> <li>Visit a range of forensic inpatient services including high secure, medium secure and low secure in both the NHS and private sector when such opportunities arise.</li> </ul>	Reflective notes Supervision notes CP CbD
	<ul> <li>Reflect on the role of these services in the context of Transforming Care.</li> </ul>	
	<ul> <li>Consider what services are needed to support patients with LD who offend in the community.</li> </ul>	
Work effectively across professional interfaces by collaborating and liaising with other medical and psychiatric specialities to support provision of holistic care and treatment for your patients with intellectual disability.		
Demonstrate proficiency in prescribing safely and effectively for patients with intellectual disability in routine and urgent settings, considering the research evidence base,	<ul> <li>Review the prescribing of psychotropic medication in forensic patients who you assess including the</li> </ul>	CP CbD ACE

	prescribing guidelines, individual patient factors and the views of patients and their support networks.	rationale/evidence base, use of high dose medication, polypharmacy, the presence of adverse effects and consideration of nonpharmacological interventions.	Mini ACE
	Demonstrate an understanding of how physical treatments can be used for the treatment of mental disorders and apply this under supervision.		
	Work with others using a person-centred holistic approach to safely manage behavioural challenges and to support behavioural and environmental change.		
	Evaluate the outcome of interventions and treatments in patients with intellectual disability.		
	Work across a variety of service settings including care homes, supported living placements, day services, educational facilities and hospitals.		
	dvanced management skills within Learning (Innplexity across a wide range of clinical and non-		ituations of uncertainty, conflict
High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities	Evidence including WPBAs
	Demonstrate an understanding of unconscious processes including		

2.3 Complexity & Uncertainty	transference, countertransference, projection and the experience of splitting, and the impact of these on professional relationships.  Demonstrate proficiency in recognising and managing clinical uncertainty, ambiguity, divergent views and complex co-morbidities and associated risks relating to those with intellectual disability.  Consciously vary from established care pathways where clinically indicated and justify these decisions as needed.  Understand and work within the limits of your clinical capabilities, seeking timely support and consultation when needed.	Forensic cases are often complex with a range of possible recommendations of varying merit. Attend weekly supervision to discuss all clinical cases. Always seek advice from the clinical supervisor where there is doubt about the best course of action.	Supervision notes CbD CP Mini PAT
	Demonstrate an understanding of individual variation and the impact of social, cultural, spiritual and religious factors, including effects of deprivation, discrimination and racism.  Work with others to promote therapeutic optimism and hope in the management and care of patients with intellectual disability.		

HI O 7 It Apply 20	Manage divergent views about patient care leading to appropriate clinical interventions.	<ul> <li>Provide expert advice to         Community Learning         Disability Teams on the         formulation and         management of patients with         learning disabilities who         offend or at risk of offending.</li> <li>Manage divergent views and         use effective communication         skills to reach consensus.</li> </ul>	DONCS ACE Mini ACE CbD Reflective notes Supervision notes
within L	dvanced knowledge of relevant legislative frame earning (Intellectual) disability psychiatry. Key Capabilities (KCs):	Planned activities	Evidence including WPBAs
Outcomes (HLOs) and Themes	By the end of this training year, you will be able to:		
3.1 Knowledge of legal and organisational frameworks in your UK jurisdiction	Apply the current legislation governing the care and treatment of people with intellectual disability and mental disorders in a variety of settings, including the use of emergency powers and compulsory treatment.	Conduct a prison psychiatric assessment and provide expert advice on use of MHA legislation in the context of transferring the patient from prison to hospital.	Cbd ACE
	Apply the principles of least restrictive practice and human rights, when considering the application of legal powers across different settings.		
	Demonstrate an understanding of complex ethical issues relevant to the care of people with intellectual disability.		

	Give testimony at appropriately convened settings to review the legal status of a patient.	Provide oral evidence at a     Mental Health Review     Tribunal for a restricted     patient under the supervision     of the Responsible Clinician.	DOPS
	Meet the requirements to apply for relevant statutory approval where appropriate.	Complete Section12/     Approved Clinician training in preparation for becoming a consultant	Course completion certificate
HLO 3.2: Work eff	fectively within the structure and organisation	of the NHS, and the wider health ar	nd social care landscape.
High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities	Evidence including WPBAs
3.2 Working within NHS and organisational structures	Demonstrate understanding of the national health priorities for people with intellectual disability in your UK jurisdiction, including the rationale behind annual health checks and associated health plans.		
	trate leadership and advocacy in mental and pl (Intellectual) disability psychiatry and the wide		s prevention for patients within
High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities	Evidence including WPBAs
4.1 Health promotion and	Apply an understanding of the range of health inequalities faced by people with		

illness prevention in community settings	intellectual disability and the multiple factors that contribute to premature mortality.  Demonstrate an understanding of public health as it applies to people with intellectual disability, including mortality and morbidity data and how this relates to health disparity.		
	Work with primary care, secondary care and statutory services as required to support your patients with intellectual disability in having their health needs met.	Ensure all clinical assessments include a thorough review of physical health problems and liaise appropriately with primary and secondary health care settings when needed.	ACE Mini ACE CbD
	Promote a healthy lifestyle in patients with intellectual disability and an understanding of the interrelationship between the body and the mind including the management of sleep, mental and physical disorders.	Use clinical encounters as an opportunity to discuss health promotion and prevention such as smoking cessation, managing substance misuse or addressing cardiovascular risk factors such as obesity.	ACE Mini ACE CbD
	Develop an understanding of the local data and how this compares with regional/national data.		
	Demonstrate knowledge of the screening required in your patients with a genetic cause of their intellectual disability with appropriate onward referral/advice.		
	Demonstrate an understanding of the physical health conditions associated with the most significant causes of morbidity and mortality in people with intellectual disability	Attend a training course on how to conduct a mortality review. Complete one mortality review and present	Course certificate Completed mortality report DONCS

	and engage with the local mortality review process for people with intellectual disability.	the completed report at the mortality review meeting	
	Demonstrate advanced understanding of the concept of diagnostic overshadowing and how this affects people with intellectual disability and the care they receive, including challenging when this occurs in both primary and secondary care.		
	Demonstrate advocacy for your patients and support other health professionals to make reasonable adjustments.		
	trate effective teamworking and leadership ski nd social care systems that support people witl		boratively within the complex
Himb Laval	Vay Canabilities (VCs):		Estable and to a bradients AVDD As
High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs):  By the end of this training year, you will be able to:	Planned activities	Evidence including WPBAs
Outcomes (HLOs) and	By the end of this training year, you will be	Planned activities	Evidence including WPBAS
Outcomes (HLOs) and Themes	By the end of this training year, you will be able to:  Recognise the strengths and weaknesses within a team and demonstrate how to work with these, using emotional intelligence and maintaining an awareness of one's own	Planned activities	Evidence including WPBAS

		Reflect on how the team responds to new referrals and the process for allocating referrals within the team	Mini PAT
5.2 Leadership	Understand the importance of leadership and the role of a consultant psychiatrist in intellectual disability, in the context of team and multiagency working.		
	Develop and apply your own advanced leadership skills in a variety of clinical and non-clinical settings.		
	Demonstrate inclusive leadership style and awareness of the impact of hierarchy and power within relationships with patients and colleagues.		
	Demonstrate an understanding of how your own advanced leadership skills and behaviours impact on others and adapt your approach where appropriate to meet the needs of the team.		
	Lead, support and supervise others in both clinical and non-clinical settings.		
	Understand the principles of mentoring and its role in career development and apply this knowledge in your practice.	Attend the trust training on coaching and mentoring and apply skills in supporting a junior medical colleague	Course certificate Reflective notes
	Demonstrate an understanding of the principles underpinning the management and delivery of services for people with intellectual disability.		

	Manage and lead on improving and adapting the service in which you work, including managing referrals and delegating work appropriately.		
HLO 6: Identify, mental o	promote and lead activity to improve the safet disorder.	y and quality of patient care and cl	inical outcomes of a person with
High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities	Evidence including WPBAs
6.1 Patient safety	Understand and apply the principles of clinical governance, taking into account the impact of human factors and team dynamics, to assure patient safety and quality of clinical care.		
	Apply understanding of the serious incident review process taking appropriate action where required.	Jointly complete a serious untoward incident investigation, prepare the SUI report, and present the conclusions at the Trust risk forum.	SUI report (no patient identifiable information) Supervisor notes DONCS Reflective notes
	Demonstrate knowledge of risk management issues for services for people with intellectual disability, including risks to patients, families, carers of all ages, staff and members of the public.		
	Understand the role of environmental risk assessment in intellectual disability settings and apply the principles of this to the settings in which you work.		

	Demonstrate knowledge of the relevant policies and procedures for patient safety in your organisation and how to escalate concerns if these arise.	•	Attend Root Cause Analysis training and apply learning in the SUI investigation.	Course certificate Reflective notes
6.2 Quality improvement	Demonstrate knowledge of a range of quality improvement methodologies for developing creative solutions to improve services and apply this knowledge through participation and leadership of activity in your service.	•	Complete a Quality Improvement project focused on developing a standardised forensic assessment report proforma for use by the MDT in the Community Forensic Team.  Present this work at the trust wide QI network meeting.	QI final report Presentation slides for QI meeting Feedback from stakeholders Reflective notes DONCS
	Demonstrate knowledge of mechanisms for obtaining feedback from patients, the public, staff and other interested groups, and utilise the feedback obtained to implement/manage change.			
	Understand the role of the 'expert by experience' in improving patient care and support patients with intellectual disability and their families and carers of all ages to undertake this role.			
	Understand the role of the 'expert by experience' in improving patient care and support patients with intellectual disability and their families and carers of all ages to undertake this role.			
	Demonstrate a clear understanding of local complaints procedures and participate in handling complaints made about services.			

	Participate in and lead on clinical governance activities, risk management and audit in order to improve the quality of the service.  Apply audit principles, relevant clinical guidelines and integrated care pathways to your own work and team practice.	Complete the NICE checklist on QS142 – Learning Disability: Identifying and managing mental health problems and present this to team clinical governance meeting.	Completed report DONCS Feedback from service manager.
Learning Demons	the provision of psychiatric assessment and tre g (intellectual) disability psychiatry. strate advocacy, leadership and collaborative we and their wider community.		
High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities	Evidence including WPBAs
7.1 Safeguarding	Recognise any health concerns, emotional and economic pressures impacting on carers of all ages, which contribute to vulnerability and safeguarding concerns in your patients with intellectual disability.		
	Work within legislative frameworks and local processes to anticipate and report safeguarding concerns, providing leadership when necessary.		

Understand the role and responsibilities of psychiatric services in safeguarding people with intellectual disability and their support networks.	•	Attend the Trust Safeguarding Adults and Children mandatory training course and apply the knowledge in clinical practice.	Course certificate Reflective notes
Demonstrate an understanding around the use of safe, approved restrictive interventions in psychiatric services and the guidance surrounding this and work with others to minimise the use of these in clinical practice.			
Recognise signs of abuse and trauma in people with intellectual disability, their families, carers of all ages and the wider community.			
Demonstrate applied knowledge of risk management, including risks to patients with intellectual disability, carers of all ages, staff and members of the public.			
Assess risk, capacity to consent and the need for detention in complex cases with intellectual disability.	•	Develop skills in the assessment and management of risk in patients with ID who offend, including the use of standardised instruments such as the HCR 20.	ACE Course certificate Supervision notes
	•	Learn about the range of disposals available to the courts when sentencing people with ID who offend.	CbD Supervision notes Reflective notes

	Demonstrate an understanding of the issues around confidentiality in intellectual disability practice.  Include the views and voice of the person with intellectual disability when working within safeguarding processes, mindful of capacity.		
HLO 8.1: Promote settings.	and lead on the provision of effective education	and training in clinical, academic	and relevant multi-disciplinary
High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities	Evidence including WPBAs
8.1 Education & Training	Provide education and training to medical, multi-disciplinary and multi-agency colleagues including effective planning, delivery techniques and feedback using technology as appropriate.	Deliver a teaching session to a local community ID team on the assessment and management of risk in ID patients who offend.	AOT Feedback from teaching Reflective notes
		Lead on the development of a SIM training day in ID psychiatry for core trainees using actors with ID and members of the multidisciplinary team.	Timetable for the day AOT Feedback from training Reflective notes
	Demonstrate knowledge of the process of continuing professional development and its role in maintaining practice and supporting revalidation.	<ul> <li>Attend a course on medical appraisal/revalidation and discuss appraisal and revalidation during clinical supervision.</li> </ul>	Course certificate Supervision notes Reflective notes

	Apply the principles of co-production in teaching and training with people with intellectual disability and their families/carers.  trate effective supervision and mentoring skills and their families.	as essential aspects of education t	o promote safe and effective		
High Level Outcomes (HLOs) and Themes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities	Evidence including WPBAs		
8.2 Supervision	Apply knowledge of the principles of clinical and psychiatric supervision, providing safe and effective clinical supervision in both emergency and non-emergency situations, in a timely manner.	Arrange a forensic ID psychiatry taster day for a core trainee who wants to gain experience of forensic ID psychiatry.	Feedback from trainee Reflective notes Timetable for taster day.		
		Provide clinical supervision to junior trainees when on call.	Mini PAT		
	Actively participate in clinical, psychiatric and educational supervision.	Attend the clinical supervisors training course in preparation for consultant practice.	Course certificate Reflective notes		
		Attend and participate in weekly clinical supervision.	Supervision records		
	HLO 9: Apply an up-to-date knowledge of research methodology, critical appraisal and best practice guidance to clinical practice, following ethical and good governance principles.				
High Level Outcomes	Key Capabilities (KCs): By the end of this training year, you will be able to:	Planned activities	Evidence including WPBAs		

(HLOs) and Themes			
9.1 Undertaking research and critical appraisal	Critically evaluate data, papers, reviews, and meta-analyses and implement findings in daily clinical practice.	<ul> <li>Present a critical appraisal of a research paper in forensic ID psychiatry at the monthly academic programme.</li> </ul>	JCP AOT
	Translate research into local clinical practice and disseminate critical appraisal findings to wider communities.		
	Apply knowledge of up-to-date appropriate statistical methods.		
	Demonstrate proficiency in the use of objective evidence-based clinical assessment instruments.	Attend a training course on the HCR – 20 risk assessment and use this instrument in conducting forensic risk assessments in clinical practice.	Course certificate Mini ACE Reflective notes
	Work within ethical frameworks when carrying out or appraising research.		
	Apply the principles of Research Study Protocols where available.		
	Demonstrate practical contribution to an ethically approved research study.		