

# Beneath the Surface: Hidden Curriculum Course for Consultation-Liaison Psychiatry Fellowship



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## Background

In Consultation-Liaison Psychiatry (CLP), clinicians navigate complex patient and team dynamics, which formal didactics often overlook. To address this gap, we introduced the "Hidden Curriculum" – a year-long, bimonthly course covering crucial but intangible topics for CLP fellows. The hidden curriculum, a concept first introduced by Philip Jackson, refers to the implicit lessons, values, and behaviors conveyed alongside formal training, shaping professional identity.

## Methods

We created a Hidden Curriculum Syllabus to enhance "soft" skills in CLP. The first iteration involved five 60-minute interactive discussions with CL and geriatric psychiatry fellows. Fellows received 1-2 classic CLP articles for self-directed learning prior to each session.

### Objectives:

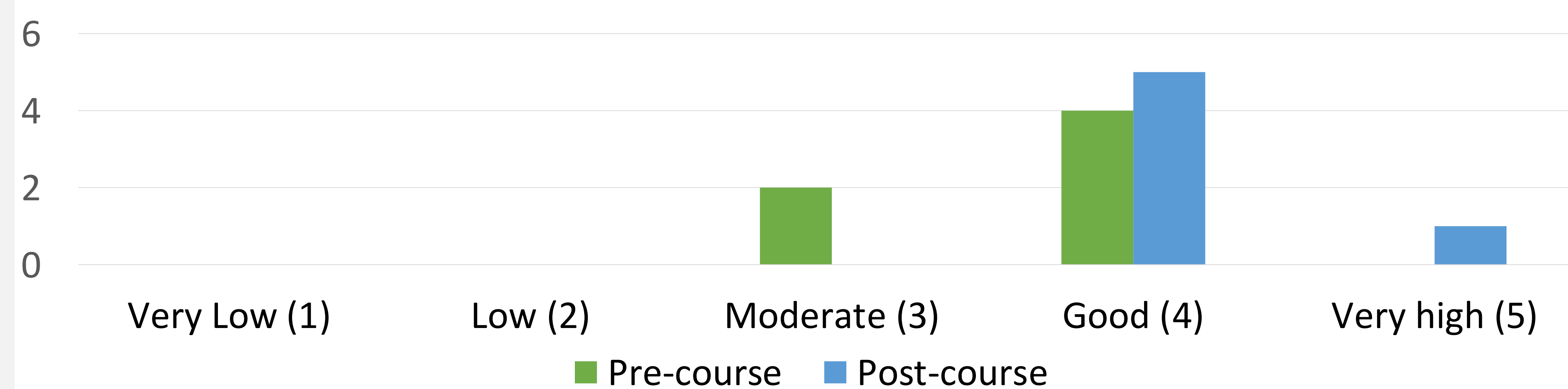
- strengthening communication
- conflict resolution
- limit-setting
- emotional regulation
- developing strategies for clinical challenges

A post-curriculum evaluation, including a wrap-up discussion and anonymous questionnaire, assessed participants' knowledge, comfort, relevance, and suggestions for future improvements.

10 fellows participated (60% response rate)

## Anonymous Questionnaire Results

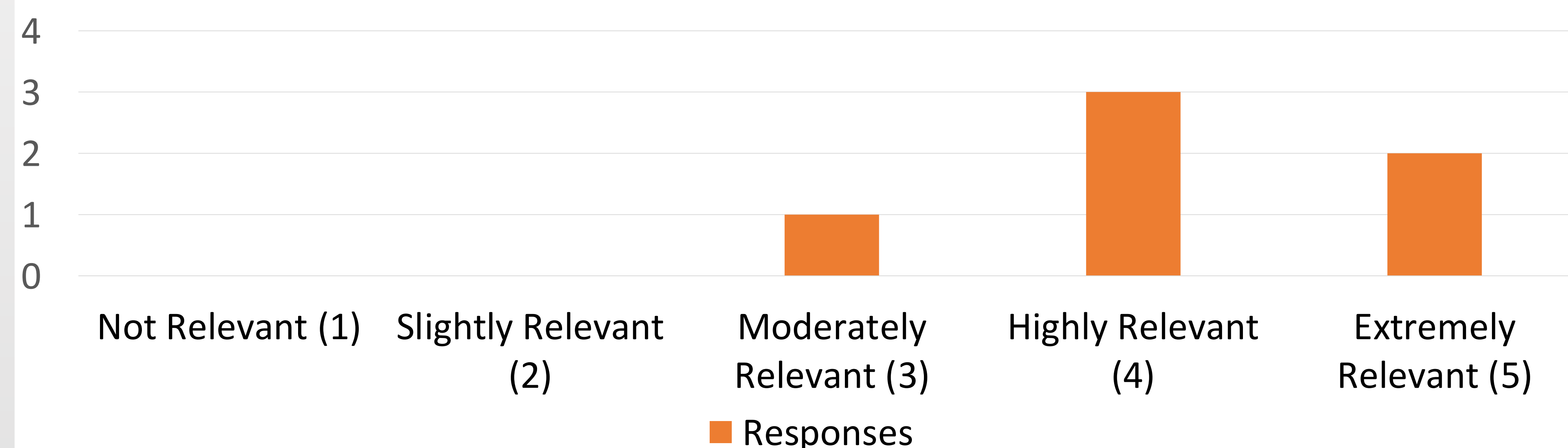
Pre- and Post-Course Confidence Levels: How would you rate your knowledge of the key topics covered in the Hidden Curriculum before and after this course?



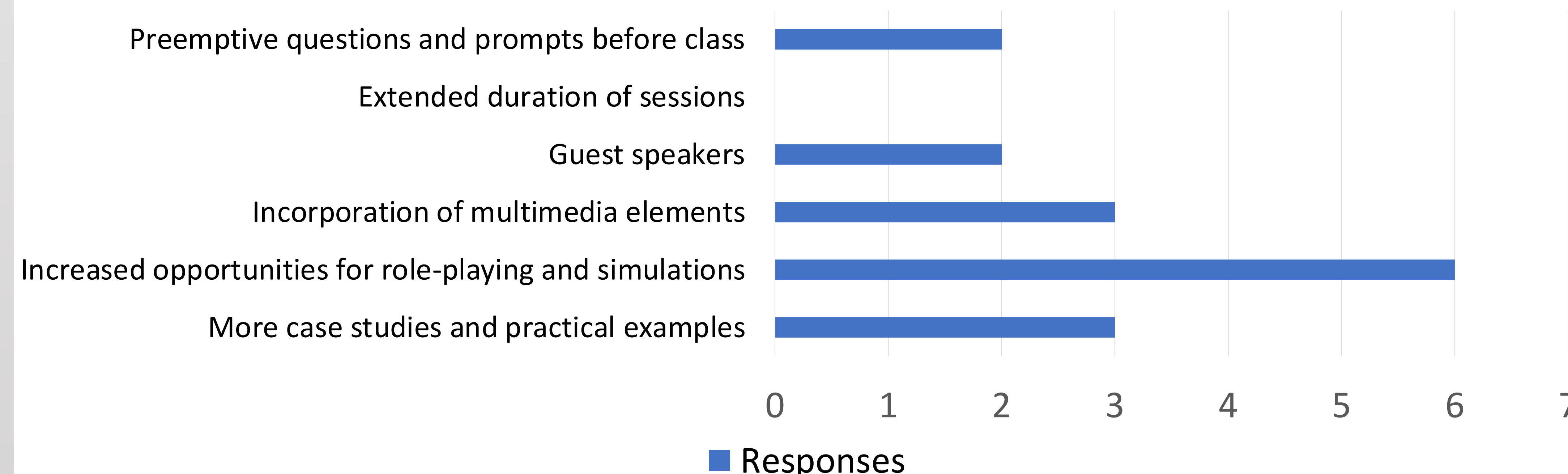
On a scale of 1-5, how comfortable are you with applying the skills and knowledge from the Hidden Curriculum course in your daily practice?



How relevant were the topics covered in the Hidden Curriculum to your daily practice?



Do you have any suggestions for improving the format or delivery of the sessions? (Select all that apply)



Confidence levels increased post-course, with the majority of participants reporting a "good" or higher understanding of key topics. Most respondents (80%) felt comfortable applying the course skills in daily practice. Additionally, 83% rated the topics as highly or extremely relevant to their everyday work. The most popular suggestions for improving session delivery were increased opportunities for role-playing and simulations.

## Curriculum Outline

Session 1: Coping with illness. Supportive psychotherapy. What it means to be "therapeutic" – and providers' role in this.  
Session 2: Ownership and Responsibility. Limit setting in inpatient medical settings.  
Session 3: Difficult countertransference experiences. The Hateful Patient.  
Session 4: Deception. Therapeutic discharges.  
Session 5: Breaking bad news.  
Final Session: Wrap up discussion. Learner-guided discussions.

## Discussion

The Hidden Curriculum introduces a transformative approach in CLP by addressing intangible aspects of practice. These sessions provide a structured platform for fellows to explore complex interpersonal dynamics, fostering confidence and compassion in challenging encounters. The interactive format promotes peer learning and supports professional growth.

## Future Directions

Expand curriculum to include more opportunities for role-playing and simulations, practical examples, preemptive questions/prompts prior to class, and guest speakers.

### References

1. Hafferty, F. W., et al. (2015). The role of the hidden curriculum in "on doctoring" courses. *AMA Journal of Ethics*, 17(2), 129–137.
2. Epstein, R. M., et al. (2002). Defining and assessing professional competence. *JAMA*, 287(2), 226–235.
3. Glicken, A. D., et al. (2007). Addressing the hidden curriculum: understanding educator professionalism. *Medical Teacher*, 29(1), 54–57.