

Northern and Yorkshire Division

Newsletter



Issue no 17

Summer 2010

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A word from the Editor:

Dear Members,

Welcome to our "New Look Newsletter" Summer 2010 issue. It is bigger and better than ever and has more news, information and colour than previous editions! It is interesting to reflect that the size of this newsletter (12 MB) is over half the size of the hard drive of my first computer—the interface between technology and psychiatry is expanding rapidly—if there is enough interest this area might make an interesting topic for one of our future conferences. Let me know what you think?

I'd like to extend a very big thank you to Eva Davison our Division Manager, for all the time and effort she puts into the work of the Division as well as the Newsletter—I know this is very much appreciated by members. The work of the Division has become increasingly complex and Eva always ensures that members are provided with information about new developments and initiatives and also have an opportunity to raise their concerns.

In this issue you can find out what has been happening in our Division. It includes useful bits of information and some interesting thoughts that I hope will generate discussion and debate. There is our regular section "Hello and Goodbye" - useful to know what people have been doing in the Division. The psychiatric lexicon always brings a smile to my face after (and sometimes during) a stressful day in the office—what is the word for *fear of long words?* - have a look it is quite frightening! There is a good summary of the April 2010 Conference on treating Borderline Personality Disorder especially for those of you that were unable to get to the meeting. There is also a new section "Poetry Corner" which provides some thoughtful and reflective words.

The article by James Johnson is also worth a read—it looks at the changing role and identity of the consultant psychiatrist—I think in different ways we'll all find something to think about in this article especially as it has been written from a psychotherapist's perspective.

A number of vacancies in the Division are also available for those who would like to contribute to the work of the Division—see inside.

There is much more including details of our Autumn Conferences which takes place in Darlington on 8 October. "**Mummy when I grow up I want to be a Psychiatrist**". This could prove to be a very interesting debate—please join us for what we anticipate will be a great networking day.

Don't forget that the newsletter is also an opportunity for you to express your views. If you have any examples of innovative services that may be of interest to other psychiatrists or any thoughts or ideas you would like to share with the wider Divisions please send a brief summary for inclusion in the next issue.

Enjoy the summer!

Professor Stephen Curran
Editor

MAKE A DIFFERENCE TO THE DIVISION

GET INVOLVED

**If you would like to be involved with the Executive Committee
and influence what is happening locally and centrally**

CHECK OUT THE VACANCIES AT THE END OF THE NEWSLETTER

News by E-mail

We hope that most of you will be looking at this newsletter after you clicked on to the link we provided in our recent All members e-mail.

We want our newsletter to look as colourful as possible. We are going to gradually introduce more colour and pictures—so it will be more interesting to look at.

To achieve this it helps if you can look at it online and then you can decide whether to print it off or not.

We haven't forgotten about our members who do not have access to the internet. They will still receive their copies as usually by post to their chosen postal address.

If you do have internet access but you would still like to receive your copy by post—please contact Leanne by e-mail lgrice@nyorkdiv.rcpsych.ac.uk or by phone 0113 394 4107 and she will add you to the mailing list.

Keeping in touch with members.

We have recently held an election in Division.

Election notices and ballot papers are sent to Members from the Electoral Society by post. A few members contacted us to say they hadn't received ballot papers and when we checked the members database we discovered that postal addresses had not been updated.

There are several ways to keep your details up to date. You can amend your own details by logging on to the members area on the web site (you will need a personal log in to enable you to do this). The membership office will update your details for you—send an email to Paul O'Connor poconnor@rcpsych.ac.uk or we can update your details for you—send an email to Leanne Grice lgrice@nyorkdiv.rcpsych.ac.uk.

It is important to you and to us that you keep your contact details up to date.

Northern and Yorkshire Executive Committee.

Chair's Letter

Dear Members

Welcome to the Spring newsletter which I hope you will find informative and entertaining. Before writing this I had a look back at a few previous newsletters for inspiration.

Generally I think things are going well with the Northern and Yorkshire Division. Our Executive meetings are well attended and there are more applications and recommendations to join the Executive than there are places available. See the hellos and goodbyes later in the newsletter. Our bi-annual conferences are also well attended so we must be doing something right. I am beginning to understand more about how the complex structure of the College works and how influential it can be towards improving care for our patients now and in the future.

Just to prove that I did re-read the last newsletter I will update you on what is happening with the four Rs.

Recruitment there are now psych-socs established in two of the three medical schools in our Division. Three medical students attended our spring conference with financial support from the Division. There is still much to be done to encourage UK graduates to choose psychiatry as a career choice and anything you can do, however small, to encourage this will help.

Role: The future role of the psychiatrist will be covered at our next conference (Friday 8th October 2010) which will follow the theme of psychiatry in the 21st century. Many eminent speakers will be giving their views including Professors Nick Craddock and Femi Oyeboode.

Revalidation: is set to get off the ground in 2011. Look at the draft document '*Guidance about revalidation for psychiatrists*' on the College web-site if you want to see what the College is doing. The College lead on this is Laurence Mynors-Wallis.



Review: Divisions are continuing to look at how we can strengthen our influence in Belgrave Square. We are looking at the option of expanding the size of our office in Leeds so larger meetings can be booked and we are establishing closer links with the North West Division. The Division office has a small meeting room now which any member is welcome to book or drop in to see Eva and Leanne.

We are looking into how we can involve users and carers at our executive meetings and have set aside some funding for this. I may be in a position to say more about this in the next newsletter.

Since the last newsletter we had a very successful spring conference at Darlington football ground on the subject of the treatment of borderline personality disorder. Thanks to our Academic Secretary, Stuart Watson, for getting this off the ground. We had 144 registrations, the largest number since records began in 2005 and over 10% of our total membership. You can read a full account of the Conference later in the newsletter.

You will all be aware of the College manifesto which can be used when you meet politicians. Mental health services are an easy target for cuts so we need to get political and meet politicians whenever we get the opportunity to raise the profile of our work.

Best wishes



Bob Adams
Division Chair

FELLOWSHIP NOMINATIONS: YOU STILL HAVE TIME

The Division Executive is currently accepting nominations for Fellowship.

If you would like to nominate a Colleague for Fellowship this year then please get in touch with the Division Office for the relevant forms and guidance by sending an e-mail to edavison@nyorkdiv.rcpsych.ac.uk

**END DATE FOR NOMINATIONS VIA DIVISION
FRIDAY 16 JULY**

HELLO AND GOODBYE

Since our last edition we have said goodbye and thank you to:

Dr Liz Carmody Regional Representative

We welcome back:

Dr Steve Barlow, who has rejoined us as an elected member

We welcome new members:

Dr Julian Whaley	Vice Chair
Dr Kasi Prasad	Regional Representative, Child and Adolescent Yorkshire Region
Dr Teresa O'Dwyer	Regional Representative. G&C North East Region
Dr Neeraj Berry	Deputy Regional Representative, G&C North East Region
Dr Philip Bennett	Regional Representative, Learning Disabilities, Yorkshire Region
Dr Nisha Ann Alex	Psychiatric Trainee Representative

Current Executive Committee Membership

Elected Officers:

Division Chair:	Dr Bob Adams
Vice Chair:	Dr Julian Whaley
Finance Officer:	Dr Ged Garry

Elected Members:	Dr Suresh Babu
	Dr Steve Barlow
	Prof. Stephen Curran (Education & Training Standards Representative)
	Dr Yan Kon
	Dr Andrew Lawrie
	Dr Simon Sinclair
	Dr David Ward

Appointed, Ex-Officio and Co-opted members:

Academic Secretaries:	Prof. Simon Gilbody and Dr Stuart Watson
Affiliate Representative:	Dr Ravi Khushu
CPD Representative for North East Region	Dr Bruce Owen
CPD Representative for Yorkshire	Dr Guy Brookes
Psychiatry Trainee Representatives	Dr Nisha Ann Alex
Public Education Officer:	Dr Paul Blenkiron

Regional Advisors:	Dr Andy Talbot for Yorkshire
	Dr David Philbrick for North East

Deputy Regional Advisors:	Dr Fiona McKenzie for Yorkshire
	Dr Paul Bernard for North East

Each of the Specialties are also represented on the Division Executive and a list of Regional Representatives can be obtained from the Division Office or by consulting the webpage.

News From the Division Office

Dear Members

It was really good to see so many of our members come through the doors of Darlington Football Club in April. We put a lot of time and effort into making our Conferences a success and there is no better reward for us than to know our members had a good day.

We have found Darlington Football Club to be a very accommodating venue. It offers us excellent value for money which means we can keep our delegate fees as low as possible and it is also large enough to cope with a couple of hundred delegates, but the venue management were caught a bit off guard in April.

Having, over the past three years, experienced delegate attendances average 75, everyone was quite overwhelmed by the 144 who ended up attending. We also had a waiting list of over 20 hopefuls who came to us very last minute who we just could not accommodate on the day. The large numbers created a bit of congestion at lunch time, but other than that the day went off without any real hitches.

Of course, this has raised our expectations enormously. Our next Conference is scheduled for 8 October and we are looking forward to another very good turn out. There is a registration form at the back of the newsletter. Please don't leave registration until the last minute. We hate having to turn members away, but we do need to let the venue know final numbers and dietary requirements two full weeks before the event takes place. If you want to come, but need to sort out study leave and cover then still register and let us know your circumstances and we will hold onto your payment until such time as you can definitely confirm your attendance.

Just a couple of other reminders for you:

Fellowship Nominations: Any nominations coming through Division need to be with me (on-mail) by Friday 16 July at the very latest. I can't accept any after that date because I need to make the relevant checks before sending them on to London to meet the central deadline.

Clinical Excellence Awards: The timetable for 2010/11 is at the back of the newsletter. Applications must be sent to London in the first instance—if you want to apply—please don't delay as the deadline is very strictly adhered to and no late applications will be accepted.

With best wishes.

Eva and Leanne

**HELP US TO KEEP IN TOUCH WITH YOU
PLEASE KEEP YOUR CONTACT DETAILS UP TO DATE**

From the Psychiatric Lexicon

By Dr Paul Blenkiron

Now that a draft of the proposed DSM-V is out for consultation, I wonder if any of the following terms have been given due prominence...

Drapetomania – an intense desire to run away from home

Idioglossia – unintelligible speech

Micronoetic – with minimal intellectual content

Rhytiscopia – a neurotic preoccupation with facial wrinkles

I was recently asked to help the London Science Museum put together an exhibit on phobias. Here are some of the more esoteric examples they are considering showcasing:

Ergophobia – fear of work

Pentheraphobia – fear of mother-in-laws

Hippopotomonstrosesquippedaliophobia – fear of long words

Nomophobia – fear of being out of mobile phone contact . The Post Office's helpful guide to this apparently common condition urges sufferers to 'Liberate yourself from the shackles of your mobile phoneby switching it off' (ftp://ftp.royalmail.com/Downloads/public/ctf/po/nomophobia_memory_guide.pdf)

References

The Superior Person's Second Book of Words by Peter Bowler, Bloomsbury Publishing, London, 2002.

The Oxford English, Webster's and Chamber's Dictionaries.

About the Author: Dr Paul Blenkiron is a Consultant Psychiatrist in York. He is a member of the Central College Public Education Committee and is the Division Public Education Officer for Northern and Yorkshire Division

CONFERENCE REVIEWS

Treating Borderline Personality Disorder: 16 April 2010

A Consultant's View

By Dr Steve Barlow.



Dr Bob Adams welcomes delegates to the Spring Conference

The challenges faced by patients with borderline personality disorder have long held a fascination. However, like most psychiatrists, I have tended to avoid working with this group of patients for the majority of my career. This approach-avoidance pattern mirrors the psychopathology of the patient group, and was summed up neatly at the start of the proceedings by Chair Bob Adams with the phrase "I hate you—don't leave me".

I admire those who work in this area and it would seem that these sentiments are shared broadly across the profession, as the latest Divisional Academic Conference drew the largest audience in living memory to Darlington Football Club (for our Division Conference, I hasten to add—although after the season they have had it may not be long before our hosts are looking upon our attendances with some envy). Those of us who were able to find seats were treated to a feast from a stellar line up of major national and regional experts in the field.

Before the main course, the hors d'ouvres were served by four of our local senior trainees; Sarah Pearce, Prathiba Rao, Pratish Thakkar and Santhana Gunasekaram who were chosen to present some of their research work.

Congratulations must go to Dr Pearce in particular, who presented a highly technical piece of research into the mechanism of hallucinations in patients with Lewy-Body Dementia. All trainees who presented posters must also be commended.

Dr Tim Kendall, Director of the National Collaborating Centre for Mental Health, presented the evidence supporting the latest NICE Guidelines on the management of patients with Borderline Personality Disorder. The key messages seemed to be that there is a small evidence base; drugs have little or no effect on the management of the core disorder; and that what seems to work best is regular psychological treatment that fosters autonomy in the context of consistent, structured community care delivered by Community Mental Health Teams. Professional roles need to be well defined and short term crisis plans should be explicit. The best results seem to have been obtained by complex psychotherapy programmes (e.g. Mentalisation based therapy; DBT) in a partial hospitalisation setting. Specialist services should advise, train, supervise, see the most complex cases and form a national research network. As seems to have been the case for as long as I can remember, more research in this area is required.



Professor Peter Tyrer provides a stimulating and entertaining presentation

Chris Vardy, the PD Lead for the North East Region Commissioning Team, outlined the magnitude of the problem. In a population of 2.5 million, there will be about 100,000 patients with Borderline Personality Disorder. It is inevitable that the largest burden for treating this patient group will rest with generic services.

A dose of optimism was delivered by Professor Anthony Bateman in an entertaining presentation about his trial into the use of "Mentalisation Based Treatment". The key features of this broadly psychodynamic approach were a positive therapeutic alliance, the integration of psychotherapy into routine clinical management and the skills of the therapist. His explanation as to why brief admission and special observations should be avoided in times of crisis, in terms of damage caused by intensifying the patients "pathological attachment system", was particularly useful. His take home message was "When it starts to go wrong, retreat". He also demonstrated that reasonable outcomes could be obtained by non-specialist, routine, structured clinical management. Perhaps we need to think again in General Adult Psychiatry about the fragmentation of services into specialist teams and consider reinventing generic community mental health teams who can maintain long term relationships with their patients. Personality disordered patients, as do others, need consistent relationships with committed clinicians in order to develop and recover. Passing them between various teams, particularly at a time of crisis, merely aggravates the underlying psychopathology.

Professor Peter Tyrer provided a preview of the likely changes that are to come in classification of personality disorders within ICD-11. He critiqued the complex Schneiderian typological approach, and pointed the way towards a

simpler system based on four basic personality dimensions, with grades of severity linked to the existing general definition of personality disorder. He reminded us that the major dimensions of emotional stability (borderline), neurosis (avoidant), detachment (schizoid) and antagonism (dissocial) were similar to Galen’s humoral definitions of character (choleric, melancholic, phlegmatic and sanguine): a reminder that there is truly nothing new under the sun, and that the Ancients knew just as much about human character as we do today. No student of Classical literature would disagree.

The meeting concluded with a presentation by Ravi Lingham from Claremont House, of a group treatment model for borderline patients, illustrating some of the clinical realities of working at the coal face.

All in all, I have to say that this was the most informative, stimulating and enjoyable meeting I have attended in the Division and congratulations must be offered to Dr Stuart Watson, our Academic Secretary, for attracting such a high quality line-up.

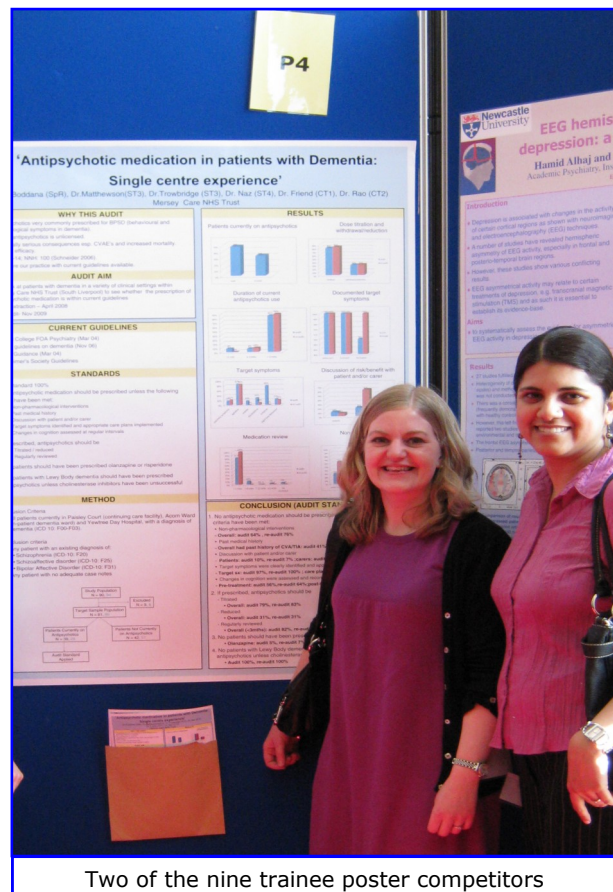
About the Author: Dr Steve Barlow is a Consultant Forensic Psychiatrist based in Newcastle and an Elected Member of Northern and Yorkshire Division Executive.

A Trainee’s View:

By: Dr Soumaya Nassa el din

I had the opportunity of attending the Northern and Yorkshire Autumn Conference in 2009 and I found it to be very informative and interesting. This, along with having borderline personality disorder in my Personal Development Plan, encouraged me to attend the Spring Conference in April of this year.

Borderline Personality Disorder is a very vast and interesting subject. I have difficulties dealing with patients with personality disorders and this Conference helped me understand that I am not alone. I found it surprising and to an extent relieving to find out that even consultants with long years of experience still find this subject very challenging.



Two of the nine trainee poster competitors

The Conference attracted many doctors as well as medical students, and I realised on the day why Eva e-mailed us a few days earlier asking for confirmation due to a long waiting list.

The day started with the trainee presentations, which varied covering psychiatry of the elderly, adult and forensic psychiatry. The speakers were of a high standard and I felt happy not being part of the panel that had to assess them. We had the chance to understand how to prepare a guideline and the evidence behind it; how to generate a clinical question depending upon the primary rather than the secondary outcome. I can say that I understand the BPD NICE Guideline a bit better after the summary given by Dr Tim Kendall and was able to have a first look at the future ICD-11 presented by Professor Peter Tyrer. The speakers emphasised the importance of filling the gaps in training, respecting the patient's autonomy and helping the patients to be part of the decision making (joint responsibility). Not forgetting that the day contained a good deal of humour (sugar-free MBT, the atomic shuttle and many more) which at times helped me keep focused on the presentations especially in the afternoon. I believe the conference will improve my clinical practice because it helped me understand patients with a personality disorder from a different perspective. I think I will be better in formulating a functional crisis intervention with clear points when required.

But above all, the lesson which I took from the conference was *primum non nocere* "first do no harm", an old everlasting law. So if the medication/therapy is not working, just stop and do not increase the distress and the fear.

About the Author: Dr Soumaya Nasser el din is a Core Trainee based in York.

ARE YOU A TRAINEE?

We hold a trainee competition every year.

We award a prize for the best oral and poster presentation.

Our next competition will take place on 25 March 2011

Contact Leanne for more information lgrice@nyorkdiv.rcpsych.ac.uk

CONFERENCES ORGANISED BY NORTHERN AND YORKSHIRE DIVISION

The number of delegates attending our Conferences has increased over the past few years. This is good news for the Division, but this increase in numbers means that it is even more important that we are able to make the day run as smoothly as possible. There is a lot our members can do to help with this.

We don't like to turn members away and we would prefer not to hold you on a waiting list—so the sooner you register the better.

The staff at the venue need to know two weeks in advance how many delegates we are expecting. This enables them to set out the correct number of seats in the floor plan and to prepare the refreshments and lunch. This does not mean we will not allow last minute delegates, but we

would prefer that you let us know beforehand and not simply turn up on the day. Please make a note of the end date for registrations, send in your registration form with your remittance in good time to secure your place.



Preparing the room for the delegates arriving.

Cancellations

We can only offer full refunds if cancellations are received one full month before the date of the event. If you are unable to attend personally, please ask one of your colleagues to attend in your place. In some circumstances we are able to provide a full credit note to enable you to attend a future conference. If you need to discuss a possible refund or credit note please contact Eva or Leanne. A copy of our refund policy can be obtained from the Division Office.

IMPORTANT EVENTS FOR YOUR DIARY

Fellowships: Closing date for nominations = 16 July 2010

Clinical Excellence Awards: Closing date for applications = 26 July 2010

Autumn Conferences:

North West 29 September 2010—Manchester
Northern and Yorkshire 8 October 2010—Darlington

Spring Conferences:

Northern and Yorkshire 25 March 2011—Darlington

Further information: Leanne Grice
T: 0113 394 4107: lgrice@nyorkdiv.rcpsych.ac.uk

Poetry Corner

This is a new venture for the newsletter, poems with relevance to psychiatry. Not well known poems but poems written by poets from our area whether health care professionals or not. A national poetry competition started this year called the Hippocrates prize www.hippocrates-poetry.org which inspired me to start this venture. If you have any poems or short pieces of creative writing that you think may be suitable for the next newsletter, please send them in for consideration. Poems maximum 40 lines. Prose maximum 250 words.



For this newsletter I have chosen two poems, the first by a York GP about a psychiatric illness beginning with A, '*The thief in the night*'. The second poem is by a poet based in Yorkshire. The subject of this poem is something rather more disturbing, '*Snake*'.

Thief in the Night

Mum was robbed again last night
this time the thief took everything.

Half a decade of coming and going,
a frequent light fingered visitor

and one she never recognised.
At first we laughed away her loss

a lifelong friend's name,
when did we say we'd meet?

The relentless heist continued.
greedier with every visit,

memories of that first job,
my sister, my dad, for God's sake.

Skills hard learned and easily lost,
her warp and weft unravelled.

Then just an anxious smile,
and a tightly squeezed hand.

Even these were stolen.
I was robbed last night.

Chris Hirst

Snake

Just a glimpse of my bare heel or toe,
 the slightest movement of my sheet
 would alert a knotted writhe of snakes
 lurking in the cave beneath my bed.
 Heavy with poison,
 they'd be slung between the springs,
 coiled around the metal frame
 or simply thick in number, camouflaged
 among the carpet pattern's twists and turns,
 their bifurcated tongues
 wavering between needle-teeth and fangs.
 They'd strike at the sight of a pale insole
 or ankle, better still, a plumper calf.
 When my night screams
 brought the man married to my mother
 he'd cover my mouth
 then reticulate his other hand
 between my grooves and hollows.
 His tongue, strung with saliva,
 would engulf and swallow me
 as he delivered his shot of venom.

After the ringing in my ears had stopped
 I'd fly into a treetop nest and sway there.
*Coach whip, copper head, bull snake,
 python, diamond back, smooth snake,
 cobra, mamba, sidewinder, hoop snake,
 house snake, ophidia, serpentes, my mantra.*

I've gained their confidence. *Come up,*
 I'll say, and then, in their jewelled tuxedos,
 watch them stretch across my pillows,
 slither below my duvet. Each time
 I am surprised how warm they are,
 how sleek their polished scales.
 Who'd have guessed I'd have them
 eating from my hand? I can
 even stroke and squeeze them
 while they nudge for more, their dewy eye
 not fooling me. I've spent years
 learning to unhook my jaw, perfect
 the toxicity of my digestive juices
 so not a single drop's superfluous.
 See how much breath I hold
 in this single, elongated lung.
 See how I've sloughed my childskin.

Pat Borthwick

*Snake won the Petra Kenney Anglo Canadian Poetry Competition and is published in
 Admiral FitzRoy's Barometer (Templar 2008)*

LEEDS UNIVERSITY PSYCHIATRY SOCIETY

PsychSoc:

PsychSoc is short for the Leeds University Psychiatric Society. PsychSoc is affiliated with the Leeds University Union. Membership is free of charge and is open to all students.

The PsychSoc is closely linked with the Royal College of Psychiatrists. Student Associateship is already available with the Royal College, more information about this can be found on the website.

Contact the PsychSoc:

If you would like more information about the Society, to join for free, or to become a sponsor, please don't hesitate to the Society.

E-mail: info@psychsoc.com

Website: www.psychsoc.com

Assessors for the College on Advisory Appointment Committees

Have you have been a Consultant for more than three years?
Would you be interested in representing the College as an Assessor on Advisory Appointment Committees (AACs)?

Assessors are crucial to ensure good practice is maintained at all AACs and to provide a constructive assessment of applicants' expertise for the post. We urgently need representatives in all psychiatric specialties and in all regions.

For full details on the role and how to become an Assessor, please contact Charlotte Cox at the Department of Professional Standards, The Royal College of Psychiatrists, 17 Belgrave Square, London SW1X 8PG. Alternatively, please see the College website by following the link <http://www.rcpsych.ac.uk/training/collegeassessor.aspx>.

OLD WAYS OF WORKING:

By Dr James Johnston.

The changing role and identity of the Consultant Psychiatrist is a subject which evokes mixed feelings among psychiatrists, with some embracing New Ways of Working, others experiencing 'extinction anxieties' which are familiar for medical psychotherapists who are forever fretting about their identity and future survival.

One aspect of the changing role of the Consultant Psychiatrist, unfamiliar for some, is to offer consultancy and supervision to other workers for patients they may never meet; again, familiar terrain to medical psychotherapists. One way of addressing change is to embrace it and mourn what has gone before. Another response might be to cling to the anachronistic charm and security of a bygone era.

The tension between new and old ways of working is one that is part and parcel of training, working and developing as a psychotherapist. New therapies rediscover and reinvent the old, putting new wine in old skins, often with the same outcome as its biblical forbear, splitting. The anachronism of the reactionary meets the anarchy of the revolutionary, except in a more middle class manner.

Because we share a psychiatric identity with our psychiatrist colleagues but have a longstanding identity crisis, we medical psychotherapists have a track record in bearing the uncertainties surrounding our identity and the experience of uncertainty surrounding our future. I think we have a lot to offer our psychiatrist colleagues about the experience of adaptation and evolution in the interests of a survival borne from ceaseless reinvention while striving not to lose the baby down the plughole. Medical psychotherapists are skilled in indirect clinical work with junior and senior colleagues and this is a useful Trojan Horse for another reinvention: containers of the Consultant New Role anxieties

This was my Trojan Horse: after ten years running a consultation service for 'people who get under our skin' for psychiatrists and in-patient, crisis and community teams, I felt there was a fertile therapeutic soil in Leeds for inviting Consultant Psychiatrists to join a Balint group as part of their continuing professional development and I asked a fellow Consultant Psychiatrist in Psychotherapy, Dr Gearóid Fitzgerald to facilitate the Consultant Balint Group with me. Gearóid is the Leeds medical psychotherapy tutor responsible for the junior doctor Balint group and for co-ordinating supervision of the psychodynamic psychotherapy long and short cases. This link between trainees and their trainers seemed crucial to us in considering psychotherapeutic development across the career life span.

The Balint group began in Leeds in September 2008. It is a slow open group and meets fortnightly on a Tuesday morning for an hour. There is no overall time limit, which is part of a recognition that it will take some years to develop a mature Balint group.

Eight consultant psychiatrists joined the group in its first year and seven of these have remained in its second year with another consultant joining. There is a requirement that the consultant makes a commitment to remain with the group for at least a year. The consultants are from a range of specialties, six general adult psychiatrists (one in R&R), one in learning disability and one in liaison.

The process in every group is to ask whether any of the doctors feel moved to discuss someone: there is no pre-planned rota. The idea is to ascertain who amongst the doctors has the most pressing need to present and while sometimes two doctors have asked, there is usually a rapid agreement without bloodshed. In the early groups the ceiling and carpet suddenly became very interesting as we waited until a doctor volunteered but this hasn't been the case in the past year as the group has developed its rhythm and safety. The presenting doctor talks about a patient without notes and voices the emotional dilemma in the relationship with either the patient or their carers, colleagues or a combination. There is an emphasis on the doctor's emotional experience, which involves some form of conflict. There would then be three or four questions of fact of the doctor and then the presenting doctor would not say any more, remaining silent and allowing the group to speculate about the doctor's dilemma and their impressions of it. While discussing the presenting case the other doctors do not engage directly with the presenting doctor but reflect on the dilemma without offering advice or guidance on management. The doctor who has presented rejoins the discussion around 10 minutes from the end of the group and is offered an opportunity to say what had struck them in the discussion that they had listened to. The aim of the discussion in the group is not to find solutions for the doctor's dilemma but to free up the doctor so that the next time they meet the patient they may feel less burdened by the previous difficulties that they have encountered and to allow something different to potentially emerge with the patient.

All of the doctors joining the group sign a contract or an agreement which outlines the purpose of the group and this agreement is used for their continuing personal development process and in job planning. Some of the Consultants have recently written in response to an invitation to describe their experience of being in the Balint group.

One of the Consultants wrote as follows:

"The Balint group has given me a space/time out facility that I haven't previously experienced as a consultant even though in my specialty we have a very supportive peer group, we meet regularly, formally and informally. I find it hard to articulate what I have gained, other than to call it a 'freeing up' – that sense of liberation that is helpful with direct clinical care but also more personally for issues such as keeping well.

I think consultants are better able to make use of such a group than trainees – perhaps because they need it more. However that view may also reflect my experience as a trainee which was limited in this area. Basically I feel that the group brings us back to the basics of "doctoring" and the therapeutic relationship. I think the consultants can end up feeling detached from that

relationship at times or confused about their role. Whilst I can see benefits in the current fashion of training as a medical expert/collaborator/manager/health advocate/scholar etc, I think there is a danger of losing an aspect of the doctor /patient relationship in there and the importance of us just being human. I feel the group helps me most on an emotional/gut level rather than an intellectual/cognitive level"

The consultant psychiatrists in this group are at different stages in their careers, some at the very start, some in the middle. Some towards the end. Some of the more recently appointed psychiatrists have also described the benefit of listening to more senior colleagues and the relief they feel that they can see that their senior colleagues continue to struggle with issues in the relationship with their patients and its not simply a matter of inexperience that one has difficult feelings about some of our patients.

A consultant wrote:

" I have found it immensely reassuring to discover that some of my consultant colleagues have similar dilemmas, anxieties and insecurities as I do in their day to day contact with patients. On most if not all the occasions I have brought a patient to the group this has greatly helped to lessen my angst—by helping me to understand the dynamics of the encounter and shape my future therapeutic contact with the patient. I only wish that I had had access to a Balint Group in my training years".

One of the themes that we have discerned in the group is to do with the hidden work consultants psychiatrists hold or bear on behalf of their teams. The group offers a space to allow this invisible work with emotionally challenging patients to become visible. The group is beginning to provide a trusted space for what is difficult about difficult patients, the difficult feelings they evoke, to be considered.

Another of the consultants echoes the importance of the group offering an affirmation of this emotional work:

"I have found it extremely helpful to bring cases to the group and to listen to others' view of the doctor/ patient relationship. I think this process has allowed me to work more therapeutically with the patients I have presented and more widely with others on my caseload who engender similar feelings. I have found the input of two highly skilled psychotherapists who are also psychiatrists enormously supportive. The group has developed over the last year and I feel closer to my colleagues who are in the group and have a sense of mutual trust and support from them which is very helpful as working in the Community can feel isolating at times.

My appreciation of the significance of the doctor/patient relationship has been enhanced and I feel that I have developed better understanding of the psychodynamic factors at play in our everyday work. I have also found it a validating experience as the long-term relationships that we have in the community have been respected in this group where as in other settings this does not appear to be so. The pressure to move people on is great and there

seems little room to consider the value of longer term work and so I have found this aspect of the group very helpful. As the group develops I hope to feel more able to share my thoughts and insights with others and improve my confidence in assessing situations from a psychodynamic perspective. I am now considering cases that I could bring to the group and working out what the particular dilemmas are with these patients. I hope that even if I do not end up presenting them to the group the process of thinking about them in this way will allow me to move the relationship on in a positive way with benefits for the patients and for myself as a practitioner”.

The Two of us as facilitators have to work hard to remind each other to return to the emotional experience of the doctors in the group and it is tempting to use psychoanalytic formulation as a way of teaching or competing or otherwise avoiding the difficult feelings in the room. We have different styles which the doctors find emotionally complementary and our alternate leading of the groups helps give us each space to be more of a participant who can relax a little in the group.

This traditional Balint method, a tried and tested old way of working seems to be having a contribution to the “older” clinicians which is helping them to develop a new way of working in their development and may help to enhance the therapeutic culture to support the integration of psychodynamic ideas in day to day psychiatry for junior clinicians too.

Balint groups for junior doctors in the “early development curriculum” as a consultant wrote above are arguably well placed at the start of the psychiatrists journey if they are conceived as originally designed, to foster self reflection about the doctor-patient relationship. However, I would see the groups the starting trainees join as primarily supportive peer groups where the task of self reflection is secondary to survival and passing the exam.

Experience in Leeds of post membership Balint groups with ST4-6 trainees show they can make a more mature use of the self reflective purpose of the group and this capacity to use the group is understandably developed still further as consultants. The development differences in the career stage of the psychiatrist is one factor in their capacity to make emotional use of the group, but another is the difference between the personalities of the doctors in terms of their emotional fluency. I have researched Balint groups comprising of GPs and psychiatrists together and discovered that they use the group in an emotionally different way. This difference seems to be linked to stage in career, professional culture and the depth of disturbance the doctor is exposed to as well as the doctor’s characteristic emotional distance from their patient (that is their empathic valency to tend to be closely identified or counter-identified with the patient’s experience).

I would advocate Balint groups for all stages of the therapeutic development for all psychiatrists, in the non-mandatory post membership ‘curriculum’ called CPD of those who choose to seek a later therapeutic experience which is purely for the purpose of enhancing their personal understanding and development to improve their patient care. This is a model of ‘cradle to grave’ Balint groups as it were.

Emotional literacy can be developed but it can also be lost, particularly when subjected to the cumulative psychic assaults that are quotidian in mental health work. Emotional literacy involves continuing self reflection and this can be eroded by the demands of functioning in a system which calls more for action than for thought. There is an incessant institutional imperative to act to maintain safety and reduce risk and in this context reflection can seem at best a luxury and at worst a form of neglect of the primary task, a kind of peripheral purposeless pondering. A safe and supportive space in which to foster continuing curiosity with our colleagues about our own minds and the minds of our patients can enhance the possibility of ensuring the survival of the self reflective capacity that underpins good psychiatric practice.

I forgot to mention, we also provide tea, decent coffee and nice biscuits.

About the author: Dr James Johnston is the Medical Psychotherapy Lead in Leeds Partnership NHS Foundation Trust. He is an elected member of the Psychotherapy Faculty, CPD Lead and the Regional Representative for Psychotherapy in Yorkshire Region.

The Psychiatrists' Support Service

The Psychiatrists' Support Service (PSS) is a confidential telephone advice line for members of the Royal College of Psychiatrists who find themselves in difficult and often times distressing situations.

For further information about the new information guides and the service in general, please contact:

The Psychiatrists' Support Service Manager

Telephone: 020 7245 0412

email: psychiatristssupportservice@rcpsych.ac.uk

APPLYING FOR VACANCIES

CONFIRMATION OF GOOD STANDING

Members and Fellows who are elected or appointed to honorary College positions make a valuable contribution to the work of the College

Prior to standing for an election or when applying for an appointed post, members must be able to prove that they are of Good Standing.

All candidates must confirm that they:

- Are registered with the GMC
- Receive annual appraisals in their main place of work
- Are up to date with their membership fees
- Meet College CPD Requirements
- Have discussed the role with their employer (usually their MD) and that they are content to allow the time needed to carry out the role effectively and efficiently
- Are able to fulfil the requirements of the post

- **Appointed Posts:**

Appointments are made by either the Division Executive Committee or, in the case of Regional Representatives, in consultation with the relevant Faculty Executive Committee. Some are subject to local interview, some need final ratification by the Education Training and Standards Committee. If you are interested in an appointed post, in the first instance contact a member of staff in the Division Office who will be able to provide a job description, more information about how to apply and the criteria for applying.

Closing dates for applications vary depending upon the post advertised. End dates for applications and dates for interviews, if applicable will be provided by the Division Office.

- **Elected Posts:**

Elections are usually held every two years depending on the number of elected posts available. Notice of elections are posted out at the beginning of the year. If you are interested in any of the posts please contact the Division Office for a job description.

VACANCIES IN DIVISION

We have almost 1,400 members in Northern and Yorkshire Division and we want to encourage our members to engage with the Division Executive and help make a difference.

If you are interested in taking an active part in Division life, one of our current vacant posts may interest you.

All posts are supported by the Division Office.

We have the following vacancies:

- **Deputy Regional Advisor for North East Region:**

Due to the current post holder coming to the end of their tenure, this post will become vacant from June 2010 and applications are now invited.

- **Forensic Representative for Yorkshire Region:**

Due to the retirement of the current post holder, this post will become vacant in September 2010. Applications are now invited to ensure a full handover.

- **Liaison Regional Representatives North East and Yorkshire Region (2 vacancies):**

Due to the current post holders coming to the end of their tenures, applications are now invited for both these posts .

Applicants for these posts are likely to have been a consultant within the NHS or academic sectors for at least 3 years. These posts suit enthusiastic, experienced consultants who have the confidence of their colleagues and who wish to become involved in and contribute to College Activities. But, most importantly, these posts are valuable to the Division in the interface between College, the NHS, the local Deanery and School of Psychiatry. The more rich the cross section of specialty experience the Division Executive has available, the more effectively and efficiently it can operate, enabling it to become stronger and valued by College as a whole. In the case of Regional Representatives they also provide the essential link into the Faculties nationally. Recently we have started to introduce formal deputies to help regional representatives spread the workload.

Other Vacancies coming up later in 2010/2011:

- **Education Training and Standards Representative:**

This is an elected post which will become vacant in 2011. Nominations will be accepted from January 2011

- **Newsletter Editor:**

This post will become vacant in early 2011 when the current post holder demits office, but we are interested to hear from anyone who may be interested in taking on this role.

More information and job descriptions for all the above roles are available from the Division office lgrice@nyorkdiv.rcpsych.ac.uk

FRIENDS OF THE COLLEGE ARCHIVES (FOCA)

The Friends of the College Archives was established to support the College in the preservation, promotion and use of its archival heritage as well as to promote interest in the history of the College and of British and Irish Psychiatry.

Membership:

- Open to members and others with the support of a member on payment of a subscription of £25 per annum.
- Donors to the Adopt a Book scheme will be offered free inaugural (first year) membership.

Proposed Activities:

- At least one meeting per year at the College, usually in connection with a display or presentation
- A history session at the Annual Meeting history session
- Annual visiting/outing to a site of historical interest such as an old asylum
- Engagement of history projects relating to psychiatry
- Three times a year newsletters by post—contributions welcome.

(If you would like a copy of the recent newsletter by email please contact the Division Office)

How to Join:

To join please contact the Archivist. Royal College of Psychiatrists,
17 Belgrave Square, London SW1X 8PG Telephone : 0207 235 2351 EXT 169

DO YOU NEED A SMALL MEETING ROOM?

The Division Office has a small meeting room which holds up to 8 people around a table and up to 12 in a less formal setting. The Division do not charge for the room, but a small cost is made for tea and coffee. The room is already being used by small local groups and it can also be used by individuals who just need a quiet room. If you would like to hire the room please contact Leanne for availability. lgrice@nyorkdiv.rcpsych.ac.uk

Adopt-a-Book

An opportunity to contribute towards the history of psychiatry and the College

The Adopt-a-Book scheme of the Royal College of Psychiatrists was launched at the 2007 Annual Conference in Edinburgh.

The scheme is aimed at raising funds for the conservation and repair of the College's antiquarian book collection. The collection consists of rare books with some dating as far back as the 15th century. Most of the books were donated to the Medico-Psychological Association, a predecessor body of the College in 1895 as gifts or bequests towards the development of the library. Donations mainly came from the libraries of Doctors Daniel Hack Tuke, J Lord, C Lockhart Robertson and J Whitwell. The collection also contains books written by notable authors such as John Charles Bucknill, Henry Maudsley, John Connolly, Sigmund Freud, and includes the first editions in both English and German of the complete works of Emil Kraepelin, as well as a collection of 18th century psychiatric dissertations on mental illnesses. It is an important source of information on the history of psychiatry, mental illness and learning disability.



The appeal for donations is directed at members and fellows of the College, and anyone who is interested in restoring and conserving the collection to a condition suitable for its use by researchers and historians, and in its preservation as part of our national heritage.

Since its launch in July, the scheme has received considerable support, mainly from members of the College. As a result several adopted books have now been repaired.

We would like to thank all those who have generously donated to the scheme so far, and look forward to your continued support.

To obtain a full list of books to be adopted and a donation form, please go to <http://www.rcpsych.ac.uk/college/archives/adoptabook.aspx>

or contact:

Francis Maunze
The Archivist
Royal College of Psychiatrists

Tel: 020 7235 2351

E-mail: fmaunze@rcpsych.ac.uk

**NORTH WEST DIVISION AUTUMN CONFERENCE
WEDNESDAY 29 SEPTEMBER 2010**

**THE MENTAL CAPACITY ACT AND THE SUICIDAL PATIENT
BALANCING THE RIGHTS AND DUTIES**

**Kerrie Woolterton was allowed to take her own life -
Were doctors wrong to let her die?**

Talks in the morning on general themes will be complemented by a symposium in the afternoon. Leading lawyers and clinicians from liaison psychiatry and medicine will discuss the themes and respond to delegate's questions.

The meeting will address clinical, legal and ethical challenges raised by the tragic death of Kerrie Woolterton. She arrived in casualty with an "advance directive" refusing life saving treatment as was duly allowed to die. The wider implications need to be assessed by the profession for the future relationship between doctors and patients.

VENUE:

Kings House, Sidney Street Manchester M1 7HB

COST:

All Delegates = £120.00

Concession for Trainees and retired = £60.00

Special concessions for medical students = contact Division office for details

Please complete the registration form and return it as soon as possible to secure a place

**THE MENTAL CAPACITY ACT AND THE SUICIDAL PATIENT
BALANCING THE RIGHTS AND DUTIES**

Hosted by North West Division

Please complete all sections of this form

1. Personal Information: GMC NO: RCPsych NO:

Full Name including title:

Organisation:

Work Address:

Post Code: *Email:

Phone: * This box is mandatory - we send out joining instructions by email

Special Requirements/Diets/Disabled access etc

2. Registration Fees: £120.00 Member (Consultants, non-Consultant Grades): £60.00 Member (Trainees, Retired):
£120.00 Non-Member:
Please state professional Status:

3. Method of Payment: I enclose a cheque made payable to "The Royal College of Psychiatrists" with my name and address on the back

4. Confirmation of Registration/Cancellations/Substitutions

Places are limited for this conference and can only be reserved when payment is received with this form. If your organisation would normally pay, please ask them to pay by remittance. If they are unable to do this, you should pay by personal cheque and claim the cost back. We do not invoice.

All Registrations will be confirmed, receipts and directions to the venue will be sent out 7 working days before the event. Should you be unable to attend, refund cancellations **MUST** be received in writing **1 clear month** before the event date. **No refund** for cancellations will be made after this date. Should you be unable to attend a substitute delegate will be welcomed but you must let us know.


Please return completed form and cheque **NO LATER THAN WEDNESDAY 15 SEPTEMBER** to:

Leanne Grice
Division Administrator
The Royal College of Psychiatrists, North West and Northern & Yorkshire Divisions
Aspect Court, 47 Park Square East, LEEDS, LS1 2NL

lgrice@northwestdiv.rcpsych.ac.uk

Phone: 0113 394 4107

Fax: 0113 394 4108

 **DATA PROTECTION:** The RCPsych Data Protection Statement can be viewed at <http://www.rcpsych.ac.uk/dataprotection>

Northern and Yorkshire Division

"Psychiatry in the 21st Century: where are we going and where do we want to be?"

Autumn Conference: 8 October 2010

Psychiatry is at a critical point in its evolution as a profession and as a scientific discipline. We are starting from a good place, since politicians and policy makers increasingly acknowledge the needs of those with mental ill health. However, changes in services happen very quickly and not always with the input of our profession. Recruitment to the speciality remains a challenge.

Some have argued that we need to re-embrace the medical model, and reaffirm the role of the psychiatrist in mental health services. This has provoked substantial debate of the past two years. Whatever direction the profession takes, it will die very quickly unless we can encourage medical students and young doctors to make psychiatry their career of choice.

Our autumn conference will take stock of psychiatry in the 21st Century. Delegates will get the opportunity to hear from a range of speakers and join in a debate in the afternoon.

Speakers:

Dr Neil Deuchar, Medical Director West Midlands SHA	The Future Role of the Psychiatrist
Professor Nick Craddock, Chair Academic Faculty, RCPsych:	Re-affirming the Place of Medicine in Psychiatry
Dr Claire Oakley, Psychiatric Trainee Committee RCPsych:	Psychiatry: The New Generation
Neil Balmer, Public Affairs Manager RCPsych:	How to win friends and influence people: Dealing with politicians
Professor Tony Pelosi, Consultant Psychiatrist	Whither community mental health teams

DEBATE:

"Mummy when I grow up I want to be a Psychiatrist"

This house believes psychiatry is still a wise choice of career

For the Motion: Dr Josanne Holloway, Consultant Forensic Psychiatrist,
Greater Manchester West

Against the Motion: Prof Femi Oyebode, Professor and Honorary Consultant,
University of Birmingham

Venue: Darlington FC, Neasham Road, Darlington DL2 1DL

Cost: All Delegates = £120.00 with Concession for Trainees and retired = £60.00

Special concessions for medical students = contact Division office for details

Please complete registration form and return and soon as possible to secure a place

**Autumn Conference: 8 October 2010
Darlington FC, Neasham Road
Darlington, DL2 1DL**

**PSYCHIATRY IN THE 21ST CENTURY:
WHERE ARE WE GOING AND WHERE DO WE WANT TO BE?**

Hosted by Northern and Yorkshire Division



Please complete all sections of this form

1. Personal Information:

GMC NO:

RCPsych NO:

First Name including title:

Organisation:

Work Address:

Post Code:

*Email:

Phone:

*** This box is mandatory - we send out
joining instructions by email**

Special Requirements/Diets/Disabled access etc

2. Registration Fees:

£120.00 Member

(Consultants, non-Consultant Grades):

£60.00 Member

(Trainees, Retired):

£120.00 Non-Member

3. Method of Payment:

I enclose a cheque made payable to "The Royal College of Psychiatrists"
with my name and address on the back

4. Confirmation of Registration/Cancellations/Substitutions

Places are limited for this conference and can only be reserved when remittance is received with this form. If your organisation would normally pay, please ask them to pay by remittance. If they are unable to do this, you should pay by personal cheque and claim the cost back.

All Registrations will be confirmed, receipts and directions to the venue will be sent out 7 days before the event. Should you be unable to attend, refund cancellations **MUST** be received in writing **1 clear month** before the event date. **No refund** for cancellations will be made after this date. Should you be unable to attend a substitute delegate will be welcomed.

Print Form

Please return completed form and cheque **NO LATER THAN FRIDAY 24 SEPTEMBER** to:

Leanne Grice

Division Administrator


The Royal College of Psychiatrists, Northern & Yorkshire and North West Divisions

Aspect Court, 47 Park Square East, LEEDS, LS1 2NL

lgrice@nyorkdiv.rcpsych.ac.uk

Phone: 0113 394 4107

Fax: 0113 394 4108

 **DATA PROTECTION:** The RCPsych Data Protection Statement can be viewed at <http://www.rcpsych.ac.uk/dataprotection>

Northern and Yorkshire Division
PSYCHOSIS:AN UPDATE
Spring Conference: 25 March 2011

The next Northern and Yorkshire Spring Conference will be held on 25 March at Darlington Football Club.

This Conference is devoted to an update on psychosis.

Session One:
The psychological understanding of psychosis and the therapeutic options available.

Chaired by Professor Douglas Turkington. We have two excellent speakers for this session, Dr Rob Dudley of Newcastle University and the Sunderland EIP team and Professor Max Birchwood from Birmingham who will update our understanding of cognitive approaches to psychosis.

Session Two:
Consideration of drug treatments.

Professor Shôn Lewis from Manchester and Dr Paul Mackin, Senior Lecturer in Newcastle will help us to make informed decisions about prescribing and, respectively, will update us on the evidence from the large, recently naturalistic treatment of trials and the impact of mental illness and psychotropic medication of physical health.

The day finishes with Professor Robin Murray who can update us on the latest understanding of the relationship between cannabis and psychosis.

Trainee Competition:

We will also be hosting a trainee competition at the event, with prizes for the best oral and poster presentations (for more details about entering turn to page 32). The standards of these presentations is expected to be very high. Last spring, four oral submissions were selected from 53 submissions.

In spring 2010 the event was great and sold out. In Spring 2011 we again have the top boys speaking and chairing and we will cap the number of places to maintain the opportunity for inclusion and participation.

DON'T BE DISAPPOINTED—SECURE YOUR PLACE
BOOK EARLY—BOOK NOW!

Please complete registration form and return and soon as possible to secure a place

Spring Conference: 25 March 2011
Darlington FC, Neasham Road
Darlington, DL2 1DL

PSYCHOSIS: AN UPDATE

Hosted by Northern and Yorkshire Division



Please complete all sections of this form

1. Personal Information: GMC NO: RCPsych NO:

First Name including title:

Organisation:

Work Address:

Post Code: *Email:

Phone: * This box is mandatory - we send out joining instructions by email

Special Requirements/Diets/Disabled access etc

2. Registration Fees: £120.00 Member (Consultants, non-Consultant Grades): £60.00 Member (Trainees, Retired):
£120.00 Non-Member

3. Method of Payment: I enclose a cheque made payable to "The Royal College of Psychiatrists" with my name and address on the back

4. Confirmation of Registration/Cancellations/Substitutions

Places are limited for this conference and can only be reserved when remittance is received with this form. If your organisation would normally pay, please ask them to pay by remittance. If they are unable to do this, you should pay by personal cheque and claim the cost back.

All Registrations will be confirmed, receipts and directions to the venue will be sent out 7 days before the event. Should you be unable to attend, refund cancellations **MUST** be received in writing **1 clear month** before the event date. **No refund** for cancellations will be made after this date. Should you be unable to attend a substitute delegate will be welcomed.

Please return completed form and cheque **NO LATER THAN FRIDAY 11 MARCH** to:

Leanne Grice
Division Administrator
The Royal College of Psychiatrists, Northern & Yorkshire and North West Divisions
Aspect Court, 47 Park Square East, LEEDS, LS1 2NL

lgrice@nyorkdiv.rcpsych.ac.uk Phone: 0113 394 4107 Fax: 0113 394 4108

DATA PROTECTION: The RCPsych Data Protection Statement can be viewed at <http://www.rcpsych.ac.uk/dataprotection>

TRAINEE PRESENTATIONS 2011**Spring Conference: 25 March 2011****Darlington FC, Neasham Road Darlington DL2 1DL****Psychosis- An Update**

Trainees, there is an opportunity to submit your research and audit work for consideration of presentation at the Spring Conference of the Northern and Yorkshire Division of the Royal College of Psychiatrists. This is a competitive process and the prestige of having your work selected is increasingly being recognised. The meeting is about psychosis but your research or audit can be on any topic. We will select ten submissions for presentation in poster format and you will have the opportunity to exhibit your poster and discuss your work at lunch time. Four trainees will also be asked to present orally. Prizes will be awarded for the best poster and oral presentation.

You are encouraged to submit your work. We are happy for this to be presented at the design stage- "This is a study that I plan to do" or when completed and for this to be work that you have done alone or as part of an established group. Equally we are happy for you to be imparting knowledge- "this is what I have found, therefore you should..." or seeking knowledge "these are my results- what do you make of them?"

The Spring meeting should be informative and interesting, ideally we would like to have you there as a presenter, but we would like you to come even if you don't have any research for this meeting.

There are some excellent speakers at the meeting. The aim is to improve our practice by enhancing our knowledge and understanding of patients with psychosis.

This trainee competition is open to all trainees who are working in
Northern & Yorkshire Division

Please contact Leanne Grice lgrice@nyorkdiv.rcpsych.ac.uk for an application form and guidance.

**Deadline for submission of abstracts is
noon on Friday 17 December 2010**

**CLINICAL EXCELLENCE AWARDS
FACULTY AND DIVISION**

TIMETABLE AND PROCEDURES FOR 2010

Closing date for applications: **5.00pm on Monday 26th July**

Faculty rankings submitted by: **5.00pm on Monday 13th September**

Division rankings submitted by: **5.00pm on Monday 18th October**

Citations submitted by: **5.00pm on Monday 15th November**

ALL APPLICATIONS NEED TO BE SENT TO SUE DUNCAN

E-mail: sduncan@rcpsych.ac.uk Tel: 020 7235 2351

More information can be found on the College Website:
<http://www.rcpsych.ac.uk/members/yourmembership/awards2011.aspx>

HELP WITH COMPLETING CVQs

If you have been successful in gaining an award in the past and would be happy to help a member complete their CVQ—please get in touch.

We will need to know your e-mail address and what level (s) you were successful in attaining. We will then put you in touch with members who have requested help.

E-mail details to Eva edavison@nyorkdiv.rcpsych.ac.uk

13–16 September 2010
ST. JOHN'S COLLEGE,
DURHAM UNIVERSITY

Spirituality, & Theology Mental Health

MYTH, AUTHORITY & HEALING POWER

£295 RESIDENTIAL
£160 NON-RESIDENTIAL

FOR MORE INFORMATION, OR TO BOOK, PLEASE CONTACT

Dr. Anastasia Scrutton
t.p.scrutton@durham.ac.uk

www.durham.ac.uk/spirituality.health

PLENARY SPEAKERS:

- ✦ Patricia Casey
- ✦ Christopher Cook
- ✦ John Cottingham
- ✦ Douglas Davies
- ✦ Keith Meador
- ✦ Loren Stuckenbruck
- ✦ Fraser Watts
- ✦ Mark Wynn

Project for

SPIRITUALITY & HEALTH
at Durham University



Sponsored by the Project for Spirituality, Theology and Health: a collaborative venture between the Department of Theology and Religion and the School of Medicine and Health at Durham University.
In association with the Centre for Death and Life Studies

HOW TO CONTACT US:

If you would like to contribute an article, advertise an event or write a letter you like to share with the membership please contact Eva or Leanne in the Division Office

**Newsletter Articles; Division Vacancies and Job Descriptions;
Executive Committee Business: local Policies and Procedures**

Eva Davison
Division Manager

edavison@nyorkdiv.rcpsych.ac.uk

0113 394 4106

General Admin; NHS Job Descriptions; Events and Trainee Competitions

Leanne Grice
Division Administrator

lgrice@nyorkdiv.rcpsych.ac.uk

0113 394 4107

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Professor Stephen Curran
Executive Committee Member
ETSC Representative

Steve.curran@swyt.nhs.uk

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Disclaimer: the opinions expressed in this newsletter are those of individual authors and do not necessarily represent the views of the Royal College of Psychiatrists