Annual General Meeting Minutes – 2008

Thirty Seventh Annual Meeting

The thirty seventh Annual Meeting of the College was held at Imperial College, London from 1st to 4th July 2008.

Business Meeting

The Business Meeting of the Royal College of Psychiatrists was held on Wednesday, 2nd July 2008 and was chaired by the President, Professor Sheila Hollins. It was attended by 164 members of the College.

The Minutes of the previous meeting held in Edinburgh on Wednesday 20th June 2008 and published in the Psychiatric Bulletin, December 2007, were approved and signed.
Proposed: Dr Greg Richardson Seconded: Dr Vivien Deacon

The Registrar read out the Obituary list of members who had died since the Winter Business Meeting, and a minute’s silence was observed.

Report from the President

Welcome to this year’s annual meeting and the last AGM I shall chair as President. I would like to welcome past Presidents and Honorary Fellows.

I will now summarise some of the highlights of this past year.

Management

The Chief Executive, Mrs Vanessa Cameron, has reviewed the College’s management structure and staffing. Some reorganisation has taken place to ensure that an elected officer is responsible for governance of each Department. Thus the Treasurer has oversight of the Finance and Facilities Department, the Dean: Postgraduate Education and Exams, the Registrar has two Departments: Membership as well as Communications and Policy, the Editor: Publications. A new CRTU Board will meet for the first time next month, co-chaired by the Dean and Registrar.

Constitutional Matters

The Privy Council has approved new grades of membership since their approval at last year’s AGM. UK Specialist Associates, International Associates and Student Associates have now all been approved. Details are
available on the College website and members are asked to draw this information to the attention of suitable applicants.

**Policy and Professionalism**

When I first became President I judged that we lacked in policy capacity to support the expertise of Officers and Members. Establishing a policy unit under the lead of the Registrar, Professor Sue Bailey, has been a particular joy. I believe that with specialist staff support we will be better able to influence policy developments in a more proactive way. This year the Policy Unit has become fully established and works closely with the President and Registrar. Rowena Daw, a human rights lawyer, has been appointed to lead the unit and she is supported by a policy researcher, a policy analyst and a Parliamentary officer. We have reviewed how College policy is created, and looked at the policy capacity in each country and each specialty. We have been examining our effectiveness at influencing external policy across all jurisdictions. Clearly the demand for policy support is much greater than the current resources available. The Central Policy Committee is now responsible for approving College Policy, and each country also has its own policy committee.

**Scoping Groups and Statements and Reports**

Several scoping groups completed work this year. A survey of all UK members was conducted as part of the scoping group into Risk to Others chaired by Baroness Helena Kennedy. More than 2000 members responded with their views on the use of risk assessment tools. The findings helped to shape the scoping group report 'Rethinking Risk to Others'.

Leaflets were prepared to introduce this report and two others: ‘Psychological therapies in psychiatry and primary care’ which had been chaired by Dame Fiona Caldecott, and ‘Managing urgent mental health needs in the acute trust’ co-chaired by myself and Sir George Alberti. The leaflets were mailed to all members last month, and an autumn mailing providing details of further publications is planned.

A number of other statements have been published. For example, the NCCMH has published guidelines on ADHD; and on Drug Misuse: Psychosocial interventions -amongst others. The College published a statement on Depression and the use of antidepressants (jointly with the RCGP). A substantial report on Mental Health and Work was prepared for the National Director for Work and Health.

The College prepared a statement on women’s mental health in relation to induced abortion at the request of the DH (England). Details of the process followed and the final statement is available on the College website.
**Vice Presidents**

Vice Presidents, competitively appointed after advertisement, have assisted with the following initiatives. Dr Peter Kennedy led on medical management for two years until December. An Associate Registrar, Dr Neil Deuchar, now coordinates the work programmes established by Peter. Dr Roger Banks is Vice President for Primary Care and has worked closely with the RCGP to develop a joint educational forum and to publish a number of joint leaflets and reports. Dr Denise Coia is responsible for external relations, and for reviewing the College’s preparedness for the challenges that face psychiatry in the years ahead.

**College Research and Training Unit**

Dr Paul Lelliot continues as Director of the CRTU and is responsible for the Education and Training Unit, now in its third year as well as the health services research unit and the new Centre for Quality Improvement (CQI). The CQI brings together a number of quality improvement networks and accreditation programmes and is the most rapidly growing part of the College’s work.

**Communications**

Monthly e-newsletters began in January 2007 and have been welcomed by members. The psychiatrists support service is now well established and receives an increasing number of requests for advice from members. Our website ranks higher than all other College websites and other mental health charities.

**Campaigns**

The Images of Psychiatry campaign – ‘No health without mental health’ is drawing to a close as a formal campaign. All of the Divisions were successful in bidding for funding and I am pleased to report that the projects are on target for completion in the autumn, or have already been completed. Many projects could be repeated or replicated in other Divisions. On the same theme, the AoMRC provided substantial funding for a project called ‘No health without mental health’ to look at mental health needs in acute medical services.

The FAIR DEAL manifesto was launched today. FAIR DEAL has been developed with the help of suggestions from all parts of the College, including the new Service User and Recovery Forum and the Carer Forum. It is hoped that all members of the College will be involved in some of the activities the College has committed to.

**International Work**
The work of the College’s International Divisions continues to develop under the guidance of the Director, Professor Rachel Jenkins, with each Division choosing to focus on different priorities. I have been able to meet officers and members of several Divisions this year sometimes by attending a conference in the appropriate region. I also chaired a symposium on mental health legislation at a WPA regional conference (and annual congress of the Society of Psychiatrists) in Shanghai in October; with the Registrar I participated in the ESCAP AGM and conference in Florence in August. In November I attended the WPA conference in Melbourne, participated in the IAPA conference and met officers of the RANZCP in preparation for signing an MOU mainly dealing with educational collaborations. In April, I was chief guest of the Sri Lankan College of Psychiatrists annual conference in Colombo.

The Dean and Registrar accompanied me to the APA conference in Washington D.C. The College Pan American Division hosted a reception for College members and VIPs, which was very well attended and proved to be an excellent networking occasion. The College stand attracted considerable interest and several delegates completed applications to become International Associates. Business meetings were held with APA officers, both in Washington and during our own annual meeting last year.

I would like to end my report by thanking all the current officers, and the College staff led so ably by Mrs Vanessa Cameron, for their hard work during the last year and throughout my period of office. I would also like to thank the Chairs of Faculties and Divisions and other officers who are demitting today for everything they have done for the College.

Retirements at Annual Meeting:

Dean: Professor Dinesh Bhugra (new: Professor Rob Howard)

Academic Faculty: Professor Robin Murray (new: Professor Nick Craddock)

Forensic Faculty: Dr John O’Grady (new: Dr Janet Parrott)

Perinatal Section: Dr Margaret Oates (new: Dr Roch Cantwell)

Neuropsychiatry Section: (New - moving up from Special Interest Group to section: Dr Jonathan Bird)

Northern & Yorkshire Division: Dr Chris Fisher (new: Dr Robert Adams)

SE Division: Dr Rosie Baker (new: tba)

Welsh Division: Dr Val Anness (new: Dr Helen Matthews)

Also, later this year: PTC Chair: Dr Ollie White (end Oct: new person not yet known)
Vice President: Dr Roger Banks (end Dec: new person not yet known)

Report from the Dean

This is my final report as Dean in what has been another eventful year.

It started with job offers coming through to some trainees while others were still busy preparing their applications for round 2 under MMC 2007. The fallout from MTAS left many good trainees not being successful in obtaining jobs. We set up Trainees fora to hear their experiences, to provide support and to discuss future strategies.

During last year’s Annual Meeting Edinburgh I began discussions on the theme of professionalism in psychiatry and collected the views of attendees on the subject of deprofessionalisation and the role of the profession in dealing with sustained attacks on medicine in general. These findings were analysed and it was very clear that the profession as a whole felt besieged. We held two further meetings on this topic in London at the end of last year and the beginning of this year. These antedated Tooke review’s proposal that doctors need to connect with society to redefine the relationship.

The new curriculum and assessment programme went live on 1st August, 2007, having been approved by the PMETB. All new trainees now follow the new curriculum, take the new College examinations and undertake workplace based assessments. An enormous amount of work went into making ready for Workplace Based Assessment including the preparation of trainee guides and portfolios, workplace based assessment forms, guides and performance descriptors and information for Educational Supervisors. I am extremely grateful in particular to Nick Brown, Andrew Brittlebank and Amit Malik for their untiring efforts in this regard.

The MRCPsych examination has been completely redesigned to bring it in line with the new curriculum and PMETB requirements. It comprises three written papers and the Clinical examination (CASC). In view of the proposals to conduct MRCPsych exams internationally and opening these to trainees from overseas after extensive discussions, the new eligibility criteria have been agreed and are on the College web site.

The White Paper on revalidation ‘Trust Assurance and Safety – the Regulation of Health Professionals in the 21st Century’ has raised several issues for the College. Laurence Mynors-Wallis, an associate Dean, is leading on revalidation in the College and has been busy discussing the various issues with colleagues around the UK. The GMC has been considering revalidation for more than 10 years. Criticisms of the then proposals led to a review and the publication of the White Paper. Although the work is being co-ordinated by the Academy of Medical Royal Colleges, Laurence is formulating policy specifically for our specialty. Revalidation should be
considered as a single set of processes with two potential outcomes: Relicensing (for all doctors) and Recertification (for doctors on the specialist register).

The Medical Royal Colleges have been given a key role in recertification namely the setting of the clinical standards against which specialists will be measured. The College standards, as set out in a reiteration of Good Psychiatric Practice – now in its second edition will form the basis of the standards expected of a specialist psychiatrist.

In September, 2007 the Annual Postgraduate Education Conference focused on the new curriculum, the MRCPsych Examinations and workplace based assessments. The good attendance and high level of commitment to excellence in training proved, once again, that the College’s training programme continues to be very highly regarded. The 2008 conference will be held in Bournemouth at the beginning of October; this promises to be of a high standard as usual and enables us to discuss important issues with those involved in education and training of our future doctors.

The final Tooke Report was published in February. In broad terms the College welcomed the government response to the report, seeing it as an opportunity to deliver better education and training for doctors especially with changes in GP training and in core training. We welcome that work will urgently be taken forward to develop core curricula and to consider the extension of GP training. We have argued for and very much hope that psychiatry placements will be compulsory for GP trainees when their training period goes up to 5 years as recommended. The Commons Health Committee has recently produced its response to the report which may, unfortunately, delay or postpone indefinitely the implementation of some of the important educational recommendations.

The College has been having regular meetings with Deanery Heads of School of psychiatry and a number of issues have been resolved. One important issue on which we are working together is planning to find a solution to the recruitment problem. For 2008 onwards core and higher training have been uncoupled which should make it easier for those entering ST4 to find a post in the specialty of their choice.

Nick Brown and Anne Bird demit office today as Associate Deans. They are succeeded by Andrew Brittlebank and Brian Lunn. I would like to place on record by sincere thanks and appreciation for the untiring work Nick and Anne have undertaken on behalf of the College without which we would not have made the progress we have.

I would like to place on record my thanks to Vanessa Cameron, Robert Jackson, Fauzan Palekar and their staff for the unqualified support they have continued to provide to the Associate Deans and me over the last year.
There are still many challenges to come and as I hand over to my successor I remain confident the new Dean, Professor Rob Howard, will rise to them.

**Report from the Registrar**

**2008 Election Results**

Professor Dinesh Bhugra succeeds Professor Sheila Hollins as President. Professor Rob Howard succeeds Professor Dinesh Bhugra as Dean.

**FACULTIES AND SECTIONS**

**Academic Faculty**
Chair: Professor Nick Craddock

**Addictions Faculty**
Hon. Secretary: Dr. Emily Finch
Dr. Francis Keaney – Job Share

**Forensic Faculty**
Chair: Dr. Janet Parrott

**General & Community Faculty**
Financial Officer: Dr. Frances Burnett

**Learning Disability Faculty**
Hon. Secretary: Dr. Harm Boer

**Old Age Faculty**
Honorary Secretary: Dr. P. Connelly

**Psychotherapy Faculty**
Hon. Secretary: Dr. Sue Mizen
Financial Officer: Dr. Kevin Healy

**DIVISIONS**

**North West Division**
Honorary Secretary: Dr. Simon Plunkett
Financial Officer: Dr. Sodi Mann
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<td>Northern &amp; Yorkshire Division</td>
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<td>Welsh Division</td>
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<td>Dr. Julia Lewis</td>
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<td>Neuropsychiatry Section</td>
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<td>Dr. Niruj Agrawal</td>
<td>Dr. Rafey Faruqui</td>
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<td>Dr. Roch Cantwell</td>
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Last year I made several promises. I promised to expand the newly formed Psychiatrists' Support Service, to launch a new forum for service users and carers, and to strengthen the College’s communications and policy unit. Despite difficult times the College generously agreed to fund these important
initiatives – and I am delighted to be able to report that we have delivered on all three promises.

Those of you who were at last year’s Annual Meeting may recall the launch of the Psychiatrists’s Support Service, a confidential telephone advice line for all members, including trainees. In the last twelve months the service has gone from strength to strength, taking over 100 calls from members and associates on issues such as bullying and harassment, career pathways, examinations, disciplinary issues and referrals to the GMC. Demand for the service has increased so rapidly that we have recently recruited nine support psychiatrists, who will assist the core committee in providing support and advice to doctors.

We have worked hard to tailor the Psychiatrists’ Support Service to meet doctors’s specific needs. As a result of the recent stalking survey conducted by our colleagues from the West London Mental Health Trust, we have enlisted the help of some College members with expertise in this area to provide support to doctors who are being stalked.

We also have plans to make the service even more accessible, by producing a series of information guides for psychiatrists who find themselves in difficult situations. These will be available online, and I will keep you updated on their launch.

January saw the inaugural meetings of two new College groups – the Service Users’ Recovery Forum (SURF) and the Carer’s Forum. When we announced our intention to establish these for a we received an incredible response from interested service users and carers from across the UK.

Each forum now boasts 25 members, and will meet four times a year. So Far, the two groups have provided invaluable input to a number of College documents, including the Rethinking Risk to Others report (published at the beginning of June) and the Fair Deal campaign launched at the Annual Meeting. They have also taken part in a special consultation day on professionalism and revalidation. My thanks go to Thomas Kennedy, Communications Manager, who has worked so hard to get these two off to such a fantastic start.

Through the hard work of Ola Junaid, the Associate Registrar for policy, and who also chairs the English Policy Committee, we have completely revamped the way we develop, deliver and disseminate internal policy documents (previously known as Council Reports), making full use of the advice of our policy leads from across the countries, divisions, faculties and sections. This year I have concentrated on working with the policy leads in Scotland, Wales and Northern Ireland, to ensure we learn from each other and support each other to have the most influence in shaping mental health and social care policy in each country.
Over the last few years, it became increasingly evident we needed a dedicated policy unit to deal with the huge volume of work and move from being reactive to being proactive. The expansion has been steady, but I am now thrilled to say the policy unit office has no empty desks. Policy is now led by Dr Rowena Daw, Research Fellow Chris Fitch and Parliamentary Officers Neil Balmer have been in post since last year, and have been joined in the last couple of months by Policy Analyst Katie Gray and Policy Assistant Claire Churchill.

We’re also delighted to have recruited a new press officer, Liz Fox, to strengthen the huge range of work undertaken by the communications team and to help promote the excellent work of the College more widely. I am very grateful to Deborah Hart, as Head of Communications and Policy, for spearheading these important changes.

As Registrar, I am pleased to now be working with the Associate Registrar for the Medical Directors network, Dr Neil Deuchar, who has already taken this work forwarded to ensure that we are at the forefront of management within providers of mental health services. Over the next twelve months I will take forward the next steps form our recent guidance on the sponsorship of College activities, and I am grateful to Roberta Wheeler for all her support. Additionally I will operationalise the recommendations from the Rethinking Risk to Others report.

This Annual Meeting we bid farewell to our President for the last three years, Professor Sheila Hollins. I believe one of Sheila’s biggest achievements has been to get Ministers to talk more openly about mental health and learning disabilities. Working with the new College Officers and President, Professor Dinesh Bhugra, I will do my utmost to carry this forward.

I greatly look forward to supporting Dinesh with his pledges for a re-evaluation of professionalism within psychiatry, and for the development of existing links with the international community. I am particularly excited about improving the College’s voice in Europe. I already have some personal involvement in European issues, as I am secretary of tow European child organisations – the European Society of Child and Adolescent Psychiatry and the section of child and adolescent psychiatry at the UMES (the European Union of Medical Specialists).

I will be working with the new Dean, Professor Rob Howard, to ensure we strengthen and increase the impact of the work of regional advisors, regional representatives and College assessors, in these times of rapid workforce changes.

The role of Registrar is extremely rewarding and at times it is challenging. We have made great strides over the last year but none of this could have been achieved without the tireless work of our Associate Registrars. My thanks, therefore, go to Dr Peter Byrne for public education, Dr Neil Deuchar
for medical management, Dr Ola Junaid for policy, and Dr Pete Snowden for psychiatrists’s support. Also my continued thanks to you, the members who are the College, for entrusting me to carry out this role.

So: No Health without Mental Health, No Health without Social Inclusion and a FAIR DEAL for all.

**Report of the Treasurer and the approval of the summarised Annual Accounts for 2007**

It is an honour to report to the Annual General Meeting.

Membership of the College has continued to grow and stood at a total of 13,303 at the end of the financial year 2007. Fellows, members, service users, carers, staff and friends are the greatest assets of the College.

The College’s capital assets are valued at £2.042M.

The international liquidity crisis has not had an adverse effect on the College. The College has liquid assets to the value of £4.459M. Of the liquid assets £2.014M is designated in the “New Building Fund”.

At the end of the year unrestricted funds had a surplus of £95K, while restricted funds had a deficit of £182k, mainly due to expenditure being incurred that year, whilst funds have been received in previous years.

Data presented in accordance with the Charities Commission Statement of Recommended Practice has been summarised as in charts 1 and 2.
The Charities Commission recommends that the College accounts are presented in a way that reflects the College’s objectives. The College’s charitable aims are to promote mental health by:

- Setting standards and promoting excellence in mental health care
- Improving understanding through research and education
- Leading, representing, training and supporting psychiatrists
- Working with patients, carers and their organisations

The same data presented in charts 1 and 2 may be presented in more detail with respect to specific College departments as in charts 3 and 4.

For comparison, Charts 3 and 5 present incoming resources by department for the years 2007 and 2006 respectively.
Table 1 shows College activities with significant reduction in income in 2007 compared to 2006:

- Examinations: -£135K
- Publications: -£135K
- Annual Meeting - Reduction in “pharma” sponsorship: -£102K
- Reduction of DoH grants for Postgraduate Services: -£80K

Table 2 shows College activities with significant increase in income in 2007 compared to 2006:

- Membership subscriptions: +£442K
- Bank Interest: +£94K
- Development Fund: +£50K

Income generated by Faculties, Divisions and Special Interest Groups (FSDSIGs) remained essentially unchanged at £726K (after Development Fund contribution) despite reduced contribution from commercial sponsors (down to £131K compared to £150K in 2006).

The College Research Unit restricted and designated surplus funds show an increased income of £3,266K (2,942K in 2006) and increased direct expenditure of £3,173K (2,877 in 2006).

FSDSIGs and the College Research Unit have continued to be dependent on central College staff and resources.

Also for comparison, Charts 4 and 6 present expenditure by department for the years 2007 and 2006 respectively.
Table 3 shows some College activities with significant increase in expenditure in 2007 compared to 2006:

- Staff Salaries: -£608K
- Bell Pottinger Communications Consultancy: -£160K
- Expansion of Divisional offices: -£130K
- Increase in Trustee/Officers expenses: -£62K
- Establishment of Psychiatrists Support Service: -£45K
- “Away days” for Central Executive Committee: -£21K

Other examples of successful activities that increased expenditure has allowed the College to achieve include:

- Increased central support to Faculties
- The conversion of the Neuropsychiatry Special Interest Group to a Section
- The establishment of the Service User Recovery Forum and the Carer Forum.

There were no major reductions in expenditure.

Membership Fees
A number of global financial and NHS funding and organisational changes make the forthcoming year potentially a difficult year for many, including psychiatrists. I am particularly grateful to Drs Frank Holloway, Josanne Holloway and Rao Nimmagadda who represent faculties, divisions and members respectively at the Finance Management Committee and help both this and the Central Executive Committee to work effectively towards ensuring that financial decisions reasonably reflect both the charitable aims and ambitions of the College and the working realities of subscribing members and fellows.

Despite a below inflation increase of membership fees of 1.5% for 2008, a number of new developments requiring further additional expenditure have been agreed for the present financial year 2008 (Table 4)

1. Start up costs and full operation costs for more than a year for a new online assessment system for trainees. This is currently known as HcAT
2. Establishment of a new Policy Unit with 4 new staff
3. Recruitment of a Press Officer
4. The “FAIR DEAL” Campaign
5. The recruitment of a third Website Developer
6. A College initiative on information for funding, quality and outcomes measurements in mental health

Other activities with potential financial significance include work on identifying future premises and seeking fundraising opportunities for the College as the current lease in Belgrave Square, London, expires in 2034 and the forthcoming “value for money” review of the College Education and Training Centre

In the light of the above there is a significant risk that the end of year accounts for 2008 may show a deficit in unrestricted funds. In response to this risk the Chief Executive, with strong support from her staff, has lead a review of expenditure and the Central Executive Committee has agreed a financial recovery plan (Table 5).

The financial recovery plan includes revision of travel allowances for staff, trustees and college members, revision of catering and other expenditure in Belgrave Square, reduction in expenditure on capital costs, reductions in finance and examination departments staff numbers.

In view of the enormous work that has gone into the new examination and the funding of start-up and first year operating costs on HcAT the Central Executive Committee has agreed the introduction of a 15% contribution to development fund from examination income. Further prospects for additional income generation include renting out of the College flat.
The Central Executive Committee has also agreed an above inflation increase of membership fees of 6% for 2009, though the combined increase for the two years 2007-2008 remains significantly below inflation.

The approval of the Annual Accounts for 2007 was proposed by Dr Rao Nimmagadda and seconded by Dr Rupendra Brahma.

**To consider the proposed fees and subscription rates**

The proposed fees and subscription rates with effect from 1st January 2009 were approved.

Proposed: Professor John Gunn  Seconded: Dr Ian Hall

**The reappointment of Auditors**

The reappointment of Buzzacott as Auditors of the College to hold office until the next Annual General Meeting was approved.

Proposed: Dr Michele Hampson  Seconded: Professor Nick Bouras

**Changes to the Supplemental Charter**

The following resolution, proposed by Professor Sue Bailey and seconded by Professor George Ikkos was discussed and carried unanimously.

“That the Bye-laws of the College be amended, revoked and added in accordance with the memorandum thereof containing such amendments, revocations and additions sent to the Members with the notice of this Meeting provided that such amendments, revocations or additions shall not take effect until the same shall have been approved by the Privy Council and provided further that the Central Executive Committee of the College shall have authority to approve any further amendments required thereto by the Privy Council.”

**To discuss conference fees for overseas members**

Dr Rupendra Brahma raised as a matter for discussion the issue of conference fees for overseas members. Thanking the meeting for consideration of the issue, Dr Brahma invited exploration of ways of reducing conference fees for retired overseas members in a manner commensurate with the reductions in annual subscription and registration fees. Dr Pearl
Hettiaratchy spoke in support of any means of enabling members from the Indian Sub Continent to attend Annual Meetings of the College.

The President thanked Dr Brahma and it was noted that constitutionally the issue should be referred to the Central Executive Committee of the College. The Finance Management Committee and the Programmes and Meetings Committee would provide input to the discussion at the Central Executive Committee.

**Presentation of Honorary Fellows for 2008 at the presentation ceremony**

**The Rt Hon. Baroness Murphy of Aldgate**

By any standards Elaine Murphy has had an outstanding career. Never afraid of controversy her contributions have been innovative and inspirational to a generation of young doctors. As a prominent media campaigner for people with dementia and their carers she did much to draw attention to their hardship.

When appointed the first Chair of Geriatric Psychiatry in the UK she was the first woman and youngest person appointed to a Chair at Guys & St Thomas’ Hospital.

During a distinguished academic career, when she was founding editor of what was to become the leading international journal of geriatric psychiatry, she was a Personal Advisor to the Chief Medical Officer and UK Advisor to WHO European Region on older people and mental health. Later she became Vice Chair of the Mental Health Act Commission. She has held several positions in NHS management including Chair of the NE London Strategic Health Authority.

In 2004 she was appointed life peer and has continued to fight causes of health and social care including the Mental Capacity Bill and Mental Health - Bill. She is secretary to the All Party Parliamentary Groups on dementia and mental health.

It is time the College recognised her enormous contributions in so many spheres of public and professional life that have been devoted to improving the care of people with mental illness.

**Dr Adam Roger Mark Freeman**

In addition to 27 years as a general adult psychiatrist Roger has made a significant contribution in three areas.
Firstly was his local and regional advisory and managerial work. Four years as Chair of the North West Psychiatric Regional Advisory Committee and five years as a Divisional Director of Mental Health within his acute and Mental Health Trusts are not unusual appointments. Thirteen years as Clinical Director of Mental Health services in Hillingdon, despite numerous reorganisations, shows not only considerable commitment but demonstrates the value placed on his work.

Secondly is Roger’s commitment to the College. He was secretary and then Chair to the Parliamentary Liaison Committee for twenty one years and a member of Public Policy Committee for 23 years. It can be seen that his mere eight years as a member of Council and four years as Chair of the Chiltern and Thames Valley Division of the College are barely worth mentioning. Since January 2007 he is one of the two members appointed as Scrutineer of Elections.

Thirdly, and most importantly, is the extraordinary time and commitment he has made to trying to ensure that the needs of our patients and colleagues are understood by parliamentarians. His tireless and unstinting work in relation to specific pieces of legislation has been invaluable (for example his work for the College and the Mental Health Alliance in relation to the Mental Health Bill). More fundamentally, Roger established the modus operandi of the College’s interface with Parliament, through involvement with the All Party Parliamentary groups, attendance at Party Conferences and other contacts. It is no exaggeration to say that he became the “face of the College” to MPs and Peers. It is important for us to recognise that our achievements in relation to legislative and other parliamentary matters are as a direct result of the relationships he had made and College practices he had put into place, which underpinned all our work with Parliament. To give an idea of the scale of the work this is an example of the Bills dealt with over a two year period 2002 – 2004: Assisted Dying for the Terminally Ill Bill [HL] 2004, Children Bill [HL] 2004, Community Care (Delayed Discharges etc) Bill 2003, Criminal Justice Bill 2003, Disability Discrimination Bill [HL] 2004, Domestic Violence, Crime & Victims Bill [HL] 2004, Draft Mental Health Bill 2002, Draft Mental Incapacity Bill 2003, Gambling Bill 2004, Gender Recognition Bill 2004, Human Tissue Bill 2004, Mental Capacity Bill 2004, Sexual Offences Bill [HL] 2003.

Steven Sharfstein MD

Dr. Steven S. Sharfstein is president and chief executive officer of Sheppard Pratt Health System, where he has worked for nearly 20 years. He is also clinical professor and vice chair of psychiatry at the University of Maryland. A practicing clinician for more than 30 years, he is best known for his research and writing on the economics of psychiatric practice and public mental health policy.
For more than 13 years, Dr. Sharfstein has held a variety of positions at the National Institute of Mental Health (NIMH) – including director of Mental Health Service Programs – as well as positions in consultation/liaison psychiatry and research in behavioural medicine on the campus of the National Institute of Health (NIH). He has written on a wide variety of clinical and economic topics and has published more than 140 professional papers, 40 book chapters, and ten books, including (as coauthor) Madness and Government: Who Cares for the Mentally Ill?, a history of the federal community mental health centres program. A graduate of Dartmouth College and the Albert Einstein College of Medicine, Dr. Sharfstein trained in psychiatry at the Massachusetts Mental Health Centre in Boston from 1969 to 1972. He also received a masters in public administration from the Kennedy School of Government in 1973 and a certificate from the Advanced Management Program at the Harvard Business School in 1991. He was secretary of the American Psychiatric Association from 1991 to 1995 and vice president from 2002 to 2004. He also held a staff leadership position at the APA for several years. He is currently APA’s president-elect and assumes the position of president of the APA Board of Trustees in May 2005 at the association’s annual meeting.

**Professor Jonathan Paul Shepherd**

With increasing availability of alcohol, its consumption is reaching crisis proportions in the UK, especially among young people. Jonathan Shepherd is remarkable for having made a difference in improving safety in this field already, and also for inspiring and sustaining energy and enthusiasm in others for the continuing struggle both for primary prevention and for prevention of harm from the violence that often accompanies excessive alcohol use. As a maxillofacial surgeon working with serious injuries, he recognised opportunities not only to heal physical wounds but also to ease some of the mental trauma associated with a violent episode. He set in train a range of strategies to reduce risk of further harm where possible, and its extent where not. His work is evidence based, much of the evidence accrued through his own tremendous capacity for converting accurate observation into hypothesis and then funded, relevant research. He follows through with accurate and practical messages conveyed with formidable clarity to all levels of local and national government. His work has already had significant impact on public safety through environmental improvements such as changes in the type of glass used in public houses and closure of certain roads during peak drinking hours. More individually targeted interventions have stemmed from his strong and productive relationships with psychiatrists. He has implemented strategies for early engagement in counselling about substance use and/or timely engagement in therapy for traumatic stress, as appropriate – seizing the opportunity offered during recovery from surgery to start such therapeutic work in many cases who would otherwise by-pass such help. He has also worked closely with victims’ organisations, and was national vice chairman of the charity Victim Support.
2001-2004. A great multi-disciplinary worker, he has long advocated closer academic working with police, and has been instrumental in establishing the first university based police school, in Cardiff, in 2006.

Jonathan Shepherd’s publications reflect the diversity and quality of his academic work, and the extent of his interdisciplinary collaborations, within and outside the health service. Too many to list individually, they number over 160 peer reviewed data based papers alone, and in addition, many editorials, reviews, chapters and countless influential letters, in high impact surgical, dental, general medical, psychiatric, addictions, public health, criminological, police and victimology journals and books, as well as the wider press, including the Times and the Times Higher Education Supplement. He was instrumental in setting up a national database of injury management in accident and emergency departments, yielding a more accurate picture of the epidemiology of serious community violence than any other system.

Professor Shepherd has already been widely honoured in the UK and overseas, the listings below reflecting only the major awards and titles. He continues to be in much demand by national government bodies and by international bodies such as the World Health Organisation. His national and international contributions to personal and community safety have not distracted him from more conventional clinical academic achievements, which have also been substantial. He is Professor of Oral and Maxillofacial Surgery, Director of the Violence Research Group and Vice Dean of the Dental School in Cardiff University.

**Dr Anthony Stephen Zigmond**

Rarely can the fortunes of one area of psychiatric practice have rested so completely and so securely on the shoulders of one man as mental health legislation has on those of Tony Zigmond. From the moment the government decided to reform the current Mental Health Act and to introduce a Mental Capacity Act, Tony has worked tirelessly to ensure that their proposals should be fair to patients and practically feasible for their carers. As Vice-President of the College from 2003-2005 and Honorary Vice-President thereafter, Tony has been the voice of the College within the Mental Health Alliance, within all aspects of the media, and within the Houses of Parliament itself. He has given countless unofficial “tutorials” to members, given formal evidence to many Joint and Select Committees, and been cited in their reports and subsequent debates more often than anyone except Ministers themselves. It is no exaggeration to say that the best bits of legislation could not have been achieved, and the worst bits avoided, without the skill and sensitivity of Tony and the relation he struck up with parliamentarians who so came to rely upon him.

In the process, Tony withstood what was sometimes bitter personal attack to raise the profile of the College and to earn it immense respect within Parliament, public and other professional and voluntary groups. Most importantly of all, anyone with a mental illness that might be subject to mental health legislation owes him an enormous debt of gratitude. Tony
himself is modest about his achievement, preferring to put others forward while he continues to work as a busy Consultant in Leeds, as a Mental Health Act Commissioner for over a decade, and as a trainer everywhere, helping to implement the practice of which he has been such an eloquent and passionate architect.