No health without mental health

RC Psych Annual Review 2007
The Royal College of Psychiatrists promotes mental health by:

- setting standards and promoting excellence in mental healthcare
- improving understanding through research and education
- leading, representing, training and supporting psychiatrists
- working with patients, carers and their organisations.

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for international medical graduates. Both of these responses are available on the College website.

Chaos and disaster sometimes reveal a silver lining, and an example of this is the strengthening of the Academy of Medical Royal Colleges, of which this College is a member. I am hopeful that this will lead to a more united medical voice speaking on issues such as medical training. The Academy began in 1976 as the Conference of Medical Royal Colleges but was established as a separate charity, and took its present name in 1996. Challenges to medical professionalism in our increasingly consumerist society and political attacks on medical authority have weakened the voice of medicine. While affirming that individual Colleges speak for their own members and their own specialties, the Presidents of the medical Royal Colleges are agreed that speaking together through the Academy on generic issues will be more effective.

Under-recruitment of home-grown psychiatrists and our continued dependence on high-calibre overseas doctors, who often come from countries that can ill afford to spare them, is a concern that is central to the Images of Psychiatry campaign, for which our motto is ‘No health without mental health’ (see p. 16). Earlier this year all Divisions in the UK and Ireland were invited to apply for funding from the College to support a project on one of the campaign’s four themes: perceptions of psychiatry, school curriculum, undergraduate education and service users and carers. The responses were imaginative and varied and we were able to award project grants to every Division. Some of these projects will have been completed in time to present at the 2008 Annual Meeting in London. As I write this I am waiting to hear whether the Academy of Medical Royal Colleges has agreed to fund a project called ‘No health without mental health’, which will aim to address the training needs of doctors in all medical specialties.

Two new College initiatives bear special mention. The first is the appointment of a communications consultancy, Bell Pottinger, to advise the College on how to improve our effectiveness in the media to raise awareness about mental health, and particularly to obtain coverage for positive stories. This has involved media training for key College Officers and the development of a regional media strategy and an ethnic media strategy. We have evidence of success in improving coverage of College views during the Mental Health Bill (England and Wales) debate, as I was the most frequently quoted spokesperson in the print media on this subject. The lessons learnt will be carried forward in 2008 with the appointment of a dedicated press officer.

The second initiative was the appointment of a policy analyst and policy researcher in an embryonic policy unit to help us achieve more influence on the development of public policy with respect to mental health. Under the leadership of the Registrar, Professor Sue Bailey, the policy staff have been able to offer support to three cross-College short-life working groups that have been established to address some critical issues: emergency psychiatry, psychological therapies and risk management. Online surveys have been introduced to enable Officers to better gauge the views of our members.

In April Baroness Julia Neuberger, Professor Martin Marshall (Deputy Chief Medical Officer) and Ms Anna Walker (Chief Executive,
The Vice-Presidents have been leading on medical management (Dr Peter Kennedy) and primary care (Dr Roger Banks). There is now a thriving network of medical managers which supports the development of their roles but also provides an important source of information to the College about what is happening in services. Dr Banks has established close working relationships with the Royal College of General Practitioners; a recent joint project has been to produce guidelines on early detection and intervention for young people at risk of psychosis.

It has been a busy year for our Divisions. The Irish College of Psychiatrists continues to thrive and three successful conferences were held this year along with the Spike Milligan Public Speaking Competition and an event to mark World Mental Health Day. Dr Kate Ganter stood down after 4 years as Chairman of the Irish College and has been succeeded by Dr Consilia Walsh.

As well as its usual calendar of activities, the Scottish Division has held two joint events: a one-day conference on acute in-patient care entitled ‘Mission possible’ with the Scottish Association for Mental Health; and a very successful joint training day with the Scottish Law Society on the Mental Health (Care and Treatment) (Scotland) Act 2003. The Scottish Division continues to respond to a large number of consultation documents from its Government and other agencies, and members are involved in an increasing number of national working groups.

The Welsh Division has been very involved with the response to the proposed new Mental Health Act and the development of the Welsh Code of Practice. The National Assembly for Wales is proposing to take backbench legislation in the form of a Legislative Competency Order with regard to the new Act and the Division is hoping to be actively engaged in this process of interpretation and implementation.

With the Northern Ireland Assembly being re-established, the Northern Ireland Division has been raising the profile of mental health services and their needs by giving presentations to the Health Minister (Mr Michael McGimpsey), the Health Committee and the Cross-Party Mental Health Interest Group of Members of the Legislative Assembly.

One of the significant changes in the North of England Divisions (North West and Northern and Yorkshire) has been that the regional advisors, deputy regional advisors and regional specialty representatives now receive direct support from the Divisional Office in Leeds. As part of this support, the Divisional Office also provides an electronic system to process the assessment and approval of consultant and staff-grade and associate specialist (SAS) job descriptions. The electronic system was introduced in January 2007, based on a model which had proved successful in the Yorkshire Region. The system ran as a pilot during 2007 and consideration is being given to replicating the system in other Divisions from 2008.

The West Midlands Division continued to go from strength to strength in 2007 under the Chairmanship of Dr Afzal Javed. A successful academic meeting was held in May and the Winter Meeting in December was held in partnership with South Staffordshire and Shropshire Healthcare NHS Foundation Trust and focused on psychiatric morbidity in service veterans. The Divisional Office moved to larger premises during the summer and has recently welcomed a new member of staff.

Dr Deenesh Khoosal became the new Chair of the Trent Division in July 2007. A successful Annual Meeting was held in Nottingham in October with delegates enjoying talks on a wide range of topics, from sexual well-being to the psychiatry of intellectual disabilities. The number of entries received for the Research Presentation Prize continued to rise along with the standard. A new poster presentation competition was held at the meeting to encourage research among trainees, and this proved to be hugely popular.

The London Division has developed links with all the London directors of postgraduate medical education and in September the Chair of the London Division, Dr Michael Maier, was appointed Head of the London Specialty School of Psychiatry. The Division and the School of Psychiatry hope to work closely together to maintain excellence in training in psychiatry across London.

The Eastern Division has had a successful year and held two academic meetings which were well received and focused on issues of interest to all divisional members, such professionalism, revalidation, primary care issues and medico-legal reports.
inception and has a wealth of international experience, particularly as the Director of the World Health Organization Collaborating Centre at the Institute of Psychiatry. She is committed to furthering the College volunteer programme. The College is a member organisation of the World Psychiatric Association (WPA) and has participated in a number of WPA conferences this year. This has enabled College teams to meet Officers and members of our international Divisions, as they often take the opportunity to meet during WPA meetings that are taking place in their countries. We have tried to influence the WPA agenda and I am a consultant to a WPA Taskforce on ‘brain drain’ in psychiatry.

Other highlights of the College year follow (pp. 4–5).

I would like to finish by thanking my fellow Officers and all the College staff for their work over the past year. I would also like to thank the many, many members who support the work of this College.

Professor Sheila Hollins
President
Dr Roger Banks appointed Vice-President, with responsibility for primary care. He will take a leading role in working towards achieving the College’s strategic objective to promote best clinical practice in the treatment of mental illness at primary care level, by developing strategic and working relationships with commissioners and primary care providers.

Publication of *Use of Licensed Medicines for Unlicensed Applications in Psychiatric Practice* (CR142). This report examines the nature and extent of the use of licensed psychotropic drugs for unlicensed applications in psychiatric practice, and makes balanced recommendations for a suggested procedure when prescribing licensed medication for unlicensed applications.

Publication of *Prison Psychiatry: Adult Prisons in England and Wales* (CR141). This report concerns itself with the development of psychiatric services in adult prisons in England and Wales. It makes 26 recommendations to improve mental healthcare in prisons.

President attends the World Psychiatric Association (WPA) Section Meeting on ‘Psychiatry in developing countries’ in Lahore, Pakistan.

New scoping group chaired by Dame Fiona Caldicott, set up to look at the place of psychological therapies in clinical practice for all client groups, and the future training needs of psychiatrists.

Work continues on the Images of Psychiatry campaign (p. 16) to promote psychiatry as a modern medical discipline, to ensure that service user and carer issues are core to all training in psychiatry, and to develop a positive and accurate understanding of psychiatrists among doctors of all disciplines.

College delegation attends the WPA regional meeting organised by the Kenyan Psychiatric Association, Nairobi (p. 14).

New multidisciplinary working group, chaired by Baroness Helena Kennedy, set up to examine current concerns about risk assessment and management. The group will focus on the risks posed to others and to self.

The College formally launches its new Centre for Quality Improvement (pp. 1–2, 8). The Centre puts clinicians at the forefront of work to raise standards of mental healthcare in the UK. It manages a range of national initiatives. More than 90% of mental health services in the UK participate in one or more of these initiatives.

The College issues a press release in response to the uncertainty caused by the Medical Training Application Service (MTAS) selection processes and the negative impact on trainees (p. 1, 7).

The Central Executive Committee receives a consensus statement on asylum seekers and refugees, produced by the Transcultural Special Interest Group. The consensus takes the form of seven agreed position statements supported by background information and reflects the opinions of specialists in the field of refugee and asylum-seeker health.

Dr Andrew Brittlebank organises training in workplace-based assessments (p. 7) throughout the UK.

The Scottish Division of the College and the Law Society of Scotland initiate joint training in mental health law.

CPD Online formally launched (p. 9).

The Scottish Division co-hosts a meeting with the Scottish Association on Mental Health on acute in-patient care following their 2006 joint report *Delivering for Mental Health – Acute Inpatient Forums*. Forums are now being established in every Health Board in Scotland to make sure a number of improvements are carried out in acute wards.

College delegation attends the American Psychiatric Association Annual Meeting in San Diego, USA (p. 15).

Medical Practitioners Act 2007 enacted in Ireland. The Act includes measures concerned with the competence, registration and control of medical practitioners.

College Annual Meeting, Edinburgh (pp. 6, 10, 15). The theme is ‘Recovery’. A record 1323 delegates attend, 166 of whom are from overseas.

Dr Laurence Mynors-Wallis appointed Associate Dean responsible for the College’s role in revalidation and re-certification.

Dr Peter Byrne appointed as Associate Registrar responsible for public education and patients and carers.

Dr Ola Junaid appointed as Associate Registrar responsible for policy.

Launch of *A Common Purpose: Recovery in Future Mental Health Services* – a joint position paper from the Care Services Improvement Partnership (CSIP), Royal College of Psychiatrists and Social Care Institute for Excellence (SCIE). It is intended to make a positive and supportive contribution to the development of ideas, planning, service development and practice based on contemporary concepts of recovery.
Launch of the Psychiatrists’ Support Service for College Members and Associates. The service provides a confidential advisory telephone helpline for psychiatrists in difficulty.

_Publication of Challenging Behaviour: A Unified Approach (CR144)._ The report is the result of a joint working group of the learning disability faculties of the College and the British Psychological Society, in consultation with the Royal College of Speech and Language Therapists. The main focus is on adults who are vulnerable to restrictive interventions and abuse as a consequence of their limited capacity to make choices for themselves.

_Books Beyond Words: Supporting Victims_ launched with VOICE (a national charity supporting people with learning disabilities and other vulnerable people who have experienced crime or abuse). This book helps vulnerable victims of crime to cope with the process and pressures of reporting a crime and going to court.

_The Mental Health Bill receives Royal Assent as the Mental Health Act 2007 (p. 10). The Act applies in England and Wales._

_The Mind: A User’s Guide_ launched. This joint publication between the College and Transworld Publishers is an accessible, jargon-free reference book designed to educate and inform people who have an interest in mental health. The book appears in the Top 10 Bestsellers on Amazon.

_The College’s new Committee on Human Rights collaborates on the report from the Government’s Joint Committee on Human Rights – _The Human Rights of Older People in Healthcare_. The Committee recommend that the Government, other public bodies and voluntary organisations should publicly champion an understanding of how human rights principles can underpin transformation of health and social care services._

_Publication of Sexual Boundary Issues in Psychiatric Settings (CR145). This document considers issues of capacity and consent. It refers to relevant legislation, and includes a number of recommendations for best practice._

_Two new Help is at Hand leaflets launched on: ‘Postnatal depression’ and ‘Physical illness and mental health’. President attends the European Society for Child and Adolescent Psychiatry (ESCAP) International Conference, Florence._

_First online survey of College members undertaken, focusing on the assessment of risk to others. The survey will inform the review of risk assessment and management practice._

_Annual Postgraduate Education Conference, Edinburgh, discussing the new curriculum, new MRCPsych examination and workplace-based assessments (pp. 6–7)._ Two RCPsych publications receive a Highly Commended award in the BMA Medical Books Awards 2007: _Enabling Recovery_ (edited by Glenn Roberts, Sarah Davenport, Frank Holloway & Theresa Tatton), and the third edition of _Research Methods in Psychiatry_ (edited by Chris Freeman & Peter Tyrer).

_The Help is at Hand leaflet on self-harm receives a Highly Commended award in the BMA Medical Books Awards 2007._

_The Help is at Hand leaflet on ‘Personality disorder’. President attends the WPA Regional Conference and Annual Congress of the Chinese Society of Psychiatry, Shanghai (p. 15)._ One-day conference for new trainees in psychiatry, offering the opportunity to hear about psychiatric specialties and have informal discussions with the President and Dean.

_Online survey of members of the medical directors’ network on commercial sponsorship and psychiatric practice launched._

_Launch of new Help is at Hand leaflet on ‘Personality disorder’. Professor Dinesh Bhugra elected unopposed as the next College President._

_‘The Mental Capacity Act in action – protecting the vulnerable’: College conference examining some of the significant ways in which the Act will directly affect psychiatric practice in a range of settings._

_All-Ireland Institute of Psychiatry meeting, Dublin._ President attends the Royal Australian and New Zealand College of Psychiatrists/World Psychiatric Association international congress ‘Working together for mental health: partnerships for policies and practice’ in Melbourne, Australia.

_6th National Conference on Adolescent Eating Disorders, London._

_Publication of Vulnerable patients, Safe Doctors (CR146). This is a revision of CR101 Vulnerable Patients, Vulnerable Doctors – Good Practice in our Clinical Relationships._
POSTGRADUATE EDUCATION AND TRAINING

The curriculum and workplace-based assessments (WPBAs) are the subject of a separate part of this Review (see opposite). Clearly these are major issues to which we have devoted much of our time over the past year and they will continue to be hugely important for the foreseeable future.

There have been three major publications and countless consultations in the past year. The Government published a White Paper Trust, Assurance and Safety – the Regulation of Health Professionals in the 21st Century in response to the Chief Medical Officer for England’s report Good Doctors, Safer Patients. The White Paper gives the College the responsibility to set standards for specialists in psychiatry and to assess against those standards for the purpose of recertification with the General Medical Council. This is a huge responsibility and our work in this area is being led by Laurence Mynors-Wallis, an Associate Dean. Laurence will be consulting with the membership in the next few months on how we might assess specialists.

Professor Sir John Tooke led an enquiry into Modernising Medical Careers following the unfortunate events of the spring/summer 2007 and produced his report Aspiring to Excellence. Without wishing to dwell on the negatives of the recruitment processes we can now look forward to more focused recruitment in the future. Recruitment for 2008 will be very similar to round 2 in 2007 but, looking further ahead, there appears to be an opportunity to influence specialty recruitment from 2009.

The Department of Health published its Guide to Postgraduate Specialty Training in the UK. This is known as the Gold Guide and is the official handbook for everyone involved in the training of specialty trainees.

We had a very successful education conference in Edinburgh in September. We were able to discuss with tutors and others involved in the training of psychiatrists all aspects of the new training system. We were pleased to have a number of influential people in the world of postgraduate education with us, among them the Medical Director of NHS Education, Scotland, the Director of Quality from the Postgraduate Medical Education and Training Board and two Postgraduate Deans including the Lead Postgraduate Dean for Psychiatry.

We remain concerned about the approval and quality assurance mechanisms for training. Under former arrangements the College, through its approval of posts and programmes, had ensured that trainees undertake clinical activities appropriate to their training level and needs. The PMETB has taken over this statutory responsibility and the profession has been repeatedly assured that the quality assurance process for postgraduate training will be modernised and made more robust. This might be a noble aspiration for the future but, in the interim, training opportunities for the new specialist trainees are being threatened by some trusts who, in the absence of a robust regulatory mechanism to replace the College visitation process, are changing the nature of some posts and asking trainees to undertake clinical activities inappropriate to their level of training. We are continuing discussions with the PMETB in an effort to obtain a satisfactory solution.

The new College examination and assessment programme will combine WPBAs with formal examinations to deliver a robust assessment structure with flexibility and transparency while at the same time ensuring that the high standards of the MRCPsych are maintained. We have removed the clear distinction between MRCPsych Part I and Part II, instead opting for a more modular approach realised through a series of written papers and a clinical examination. There are three knowledge-based papers (Paper 1, Paper 2, Paper 3) and a clinical examination in the form of the objective structured clinical examination (OSCE). Each component requires candidates to have achieved certain competencies at specified levels in their WPBAs.

The College held a 2-day, closed seminar on professionalism for the Central Executive Committee in October 2007. This will be followed by an open day on 21 January 2008. These aim to address the impact on the profession of the various government initiatives, including the new Mental Health Act (England & Wales), New Ways of Working and Modernising Medical Careers. There are potential inherent threats to psychiatrists’ professionalism from these seemingly progressive initiatives and we, as a profession, must have a clear view on the future of psychiatric care and training in this country. This will facilitate a clear, positive engagement with the government regarding the view of the entire profession on current and future developments – a view that the government should not disregard if these developments are a genuine effort to modernise mental healthcare in the NHS.

We would like to thank all the Associate Deans and the staff in the Postgraduate Education and Examinations Departments for their unqualified support throughout the year.

Professor Dinesh Bhugra, Dean
Robert Jackson, Head of Postgraduate Education
modernising medical careers

The first year of Modernising Medical Careers (MMC) implementation has been challenging all around for trainees, trainers and the College. The complete failure of the flawed Medical Training Application Service (MTAS) to adequately select doctors into specialty training has not only affected the careers, mental health and lives of junior doctors in the short term, but also potentially dented their confidence in the National Health Service in the long term. The financial and emotional costs for these applicants and their families is yet to be fully appreciated. Amid all the chaos of specialty selection through MTAS, the College has taken huge steps in modernising postgraduate psychiatric training.

The first version of the specialist training curriculum in psychiatry was approved by the Postgraduate Medical Education and Training Board. This curriculum consists of generic and specialty components and was developed in consultation with a huge cross-section of stakeholders, including the trainees. While this competency-based curriculum is a significant development, it is very much a work in progress and meetings have already started with the specialties to revise the curriculum to make it more focused and user-friendly.

Crucial components of the curriculum are the new workplace-based assessments (WPBAs). After extensive pilots across 16 sites which involved more than 600 trainees, WPBAs are now being undertaken by all specialty registrars. These assessments will contribute to the ongoing educational development of trainees and will also contribute to the eligibility criteria for the MRCPsych examination. While WPBAs have validity for basic specialist trainees (ST1–3), further work needs to be done regarding those for higher specialist trainees (ST4–6). Trainees were extensively involved in the development and their participation will be crucial to the success of this competency-based assessment system.

To support trainees and assessors in undertaking these assessments, an online system for delivering WPBA has been developed by the College in collaboration with Healthcare Assessment and Training (HcAT), a non-profit-making subsidiary of Sheffield Children’s Hospital. HcAT are one of the UK’s leading suppliers of validated and quality-assured tools for assessing doctors’ performance. They have been delivering foundation WPBA tools online for the past 2 years and will help the College deliver the psychiatry assessment tools that have been developed and extensively piloted by the College.

Advantages of an online system for WPBA include those listed below.

- It allows permanent secure storage of assessments.
- Multi-source feedback data are collated by HcAT and feedback provided to the educational supervisor to save them having to collate the data manually.
- Summary reports of completed assessments will be produced at the end of the year to inform the annual review of competence progression.
- The system can also produce reports for tutors, programme directors, directors of medical education and heads of school to aid the local quality management of training programmes.
- Trainees will receive email reminders when assessments are due.

The system was piloted across four sites and is currently in the live pilot stage until January 2008. It is hoped that all trainees will have registered with the system by then.

While the new curriculum, WPBAs and the online delivery system represent significant positive developments in postgraduate psychiatric training in the UK, all these components of competency-based training are very much work in progress and trainees will aim to engage constructively with the ongoing development process. Besides these areas where further developmental work will take place over the next few years, the College will hopefully take a lead on the future of specialty selection in psychiatry and develop a selection methodology that is valid, reliable and has the confidence of all the stakeholders.

Amit Malik
Chair, Psychiatric Trainees’ Committee
The College Research and Training Unit comprises four centres which, between them, cover the spectrum of activities that a national body can undertake to support the development of better mental health services. The National Collaborating Centre for Mental Health (NCCMH) sets standards through its guidelines for clinical practice in England and Wales; the College Education and Training Centre (CETC) helps to equip the workforce with the skills required to put the guidelines into practice (see p. 11); the College Centre for Quality Improvement (CCQI) works with services in the UK, Ireland and, increasingly, with other countries to develop services that can deliver high-quality care; and the College Centre for Applied Research (CCAR) works to describe the challenges facing services, including the obstacles to improvement. The Unit’s activities make a strong contribution to the wider work of the College and, in particular, to its first-stated objective of ‘setting standards and promoting excellence in mental healthcare’.

Here we briefly describe some of the highlights of the year.

NATIONAL COLLABORATING CENTRE FOR MENTAL HEALTH

The NCCMH is a partnership between the Royal College of Psychiatrists and the British Psychological Society (BPS). Commissioned by the National Institute for Health and Clinical Excellence (NICE) to develop clinical guidelines in mental health, it is led by two directors – Dr Tim Kendall (Royal College of Psychiatrists) and Mr Steve Pilling (BPS).

The NCCMH has completed 12 guidelines, including most recently drug misuse: psychosocial interventions (Chair: Professor John Strang) and drug misuse: opioid detoxification (Chair: Dr Clare Gerada), which were launched in July 2007. The guidelines currently under development include attention-deficit hyperactivity disorder (Chair: Professor Eric Taylor), borderline personality disorder (Chair: Professor Peter Tyrer), antisocial personality disorder (Chair: Professor Connor Duggan), schizophrenia update (Chair: Professor Elizabeth Kuipers), depression update (Chair: Dr Ian Anderson) and depression in people with chronic physical health problems (Chair: Professor Sir David Goldberg).

The NCCMH was rebranded at the start of 2007 and published books about dementia (Chair: Dr Andrew Fairburn and Co-Chair: Professor Nick Gould) and antenatal and postnatal mental health (Chair: Dr Dave Tomson) in the new style. The new branding was also used most effectively in the two conferences to support these guidelines. In July 2007, the NCCMH re-launched the dementia guideline as part of the National Audit Office’s conference, ‘Improving services and support for people with dementia’. In September the NCCMH worked with the Royal College of Psychiatrists’ Education and Training Centre to present ‘Maternity and mental health: making a difference’, which focused on the barriers and solutions to the implementation of the antenatal guideline.

In support of the completed guidelines the NCCMH has produced a variety of publications, including articles in peer-reviewed journals and the professional and popular press (print, radio and television). The Centre also works in collaboration with a variety of organisations (for example, the Alzheimer’s Society and the National Treatment Agency for Substance Misuse) to produce leaflets for service users, carers and healthcare professionals.

COLLEGE CENTRE FOR APPLIED RESEARCH

The CCAR is close to completing a major programme of research about the role and effectiveness of in-patient child and adolescent mental health services. The CCAR has three substantial grants from the NHS Service Delivery and Organisation Research and Development Programme. These include funding to develop and validate an instrument for measuring the well-being of carers of people with mental health problems or dementia, and the support that these carers receive from services, and a major grant to evaluate the NHS Mental Health Improvement Partnership programme. The newly established post of College Research Fellow provides dedicated support to the President and senior staff, for example through conducting online surveys of College members.

Paul Lelliott
Director,
College Research and Training Unit

Anna Walker, and Dame Julia Neuberger. The bedrock of the CCQI is its national quality improvement networks, which bring together large numbers of mental health services across the UK and Ireland, and increasingly from other countries, to work collectively on improving the quality of services. The CCQI manages accreditation systems for service elements as diverse as electroconvulsive therapy clinics, acute psychiatric wards and therapeutic communities in prisons. It has quality improvement networks for community and in-patient child and adolescent mental health services, a range of therapeutic communities, forensic mental health services and services for people who self-harm. It also manages the Prescribing Observatory for Mental Health (POMH-UK). It has plans in various stages of development to extend its work to old-age admission wards, perinatal mental health services, memory clinics, learning disability units, liaison mental health services and rehabilitation wards. The CCQI also manages the National Audit of Violence and in 2007 designed national audits for psychological therapies, dementia services and eating disorders for the Healthcare Commission.

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Paul Lelliott
Director,
College Research and Training Unit
This has been another busy year on the publications side. The new edition of *Fish’s Clinical Psychopathology* (edited by Patricia Casey & Brendan Kelly) proved to be our fastest selling title ever, going to a reprint within just a few months. Another record was achieved with our largest ever book: the second edition of *Seminars in General Adult Psychiatry* runs to 834 pages. Completely revised from the first edition, this title will be a major asset for trainees. Rounding off the popular Seminars series, *Seminars in the Psychotherapies* was published in March.

The non-clinical demands on consultants continue to grow and change, and the third edition of *Management for Psychiatrists* provides an up-to-date guide to this area. Other new titles include *Clinical Topics in Addiction* and *Workplace-Based Assessments in Psychiatry*. A new Books Beyond Words title, *Supporting Victims*, joins this important and highly regarded series for people with learning disabilities.

*The Mind: A User’s Guide*, a mental health handbook for the general public, was published in collaboration with Transworld, a major trade publisher. After appearing on the Richard & Judy show it shot straight into the Amazon bestseller list. Sales have been extremely strong and we are looking at future possibilities for collaboration.

Two of our publications received the distinction of being ‘highly commended’ in the BMA Medical Book Awards: *Enabling Recovery* and the third edition of *Research Methods in Psychiatry*.

The journals continue to thrive and the British Journal of Psychiatry’s impact factor rose yet again, to 5.436. Joe Bouch took on the editorship of *Advances in Psychiatric Treatment* and Patricia Casey has recently been appointed Editor of the *Psychiatric Bulletin*. The format of *International Psychiatry* was updated and it continues to grow in stature and influence.

CPD Online (www.psychiatrycpd.co.uk) was launched fully in April, with both the learning modules and podcasts proving popular. The number of subscribers is growing rapidly and we are continuing to add content to the site on a regular basis.

The College website is an essential resource for both members and the general public, with new features and information added regularly. Its role in the success of the College’s public education programme is indicated by the fact that it appears first in a number of Google searches, for example on the terms ‘antidepressant’ and ‘manic depression’ (see p. 18).
The Westminster Parliamentary Liaison Committee changed its name this year to reflect the fact that, in line with College devolution, it works exclusively with the Westminster Parliament. It reports to both the College’s English and Central Policy Coordination Committees and is chaired by Dr Ian Hall.

MENTAL HEALTH ACT

This year saw the final stages of the long-running debate over reform of mental health legislation, culminating in the passage through Parliament of the Mental Health Act 2007. The Act amends both the Mental Health Act 1983 and the Mental Capacity Act 2005. The College played a very active role helping parliamentarians by writing briefings, drafting amendments and having a member appointed as a special advisor in the House of Lords. All the work was in conjunction with the Mental Health Alliance. Whatever the pros and cons of the Act, some positive changes influenced by the College’s interventions include: the general principles, the definition of appropriate medical treatment, age-appropriate services for children and young people, advocacy and additional safeguards in relation to renewal of detention and the provision of electroconvulsive therapy. We have now turned our attention to the draft Code of Practice and regulations to try to encourage further improvements in the care of patients and their families.

GAMBLING

Dr Emanuel Moran has led the College’s work in lobbying Parliament about the issue of problem gambling. The College submitted evidence to a Parliamentary Committee which was investigating the Government’s decision to build a super-casino in Manchester. This evidence was widely quoted in the Parliamentary debates which led to the Government’s defeat on the issue. Dr Moran has also written to the Culture Secretary, on behalf of the College, to warn about the dangers of lifting restrictions on gambling advertising.

ANNUAL MEETING

We have been keen to support College members in developing skills for influencing the political agenda for the benefit of people with mental health problems. We held a workshop at the College’s Annual Meeting in Edinburgh focusing on how to lobby Parliament, including contributions from a Member of the Scottish Parliament. Many members raised local issues that they felt the College might want to take action on.

In view of the positive feedback, we plan to hold further workshops in future years.

ALL-PARTY GROUPS

The College continues to provide the secretariat to the All-Party Parliamentary Group (APPG) on Mental Health, made up of MPs and Peers interested in mental health issues. The Group held meetings this year on mental health in prison (jointly with the All-Party Penal Affairs Group), the Mental Health Bill and professional boundaries in mental health. College representatives are also active in other APPGs including Learning Disability, Autism, and Children.

HEALTH COMMITTEE INQUIRIES

The College has submitted evidence to two Health Select Committee inquiries. Professor Roy McClelland, Chair of the Confidentiality Advisory Committee, led the College’s response to an inquiry into the Electronic Patient Record and its use. The Health Committee also held an inquiry into the National Institute for Health and Clinical Excellence, which the College responded to. Dr Dave Anderson, Chair of the Faculty of the Psychiatry of Old Age, was invited to give oral evidence.

PARTY CONFERENCES

The College attended the Liberal Democrat, Labour and Conservative party conferences this year in Brighton, Bournemouth and Blackpool respectively. These conferences give the College the opportunity to meet with key parliamentarians and other mental health organisations, attend and speak in debates on topical policy issues, and, more generally, gain an insight into the direction in which the political parties are developing their policy.

Through the College’s policy process, we decided on the key issues on which we would lobby at the conferences and produced a newsletter outlining our key themes. The issues we focused on were mental health and employment, mental health in the criminal justice system and military mental health. We did this primarily through one-to-one meetings with parliamentarians, fringe meeting debates and round table discussions. We also discussed legislative work, including further work on the Mental Health Act Code of Practice and the proposed Health and Social Care Bill.

SCOTLAND

2007 brought Scotland a new Government promising a number of improvements, including making the country healthier. The Scottish Division has embarked on a programme of engagement with Parliament, including our continued support for the Cross-Party Group on Mental Health and, for the first time, attendance at Scottish Party Political Conferences.

NORTHERN IRELAND

The Bamford Review of Mental Health and Learning Disability Services and the need to tackle the increased suicide rate continued to dominate the mental health agenda in Northern Ireland. The review called for annual spending on mental health to be doubled over a 10- to 20-year period. However, while Health Minister Michael McGimpsey has said he is committed to implementing Bamford, it seems unlikely that he will be able to fund initiatives. The suicide rate has also risen sharply, with clusters of suicides pushing annual figures up.

The Royal College of Psychiatrists is taking a proactive stance in pushing for increased funding for mental health services, meeting with Mr McGimpsey and Members of the Legislative Assembly to lobby for better services. The College has also given evidence to the Northern Ireland Assembly Health Committee’s Suicide Inquiry and has presented the case for continuing to fund dementia drugs to the Health Committee.

WALES

During 2007, the Welsh Division has developed its relationship with Welsh Assembly Government and is involved in ongoing dialogue with officials about the work and service requirements of each faculty of psychiatry in Wales. The Division has had significant input to Welsh Assembly Government consultations and reviews of service developments across Wales.

FORTHCOMING PRIORITIES

For 2008, we will initially be concentrating on the Mental Health Act revised Code of Practice, and the Health and Social Care Bill debates. Although our work is informed by Faculty representation on the Committee and the College policy processes, it is also very helpful to receive direct contact from members. This can be especially useful if members have particular views on legislation, or have links with parliamentarians.

Neil Balmer
Public Affairs Officer

Dr Ian Hall
Chair, Westminster Parliamentary Liaison Committee
STEADY GROWTH
The College Education and Training Centre (CETC), having been operational for 2 years, is steadily expanding its topics, geographical spread and accessibility. It works creatively to offer high-quality learning experiences closely matched to financial viability. Members are fully aware that training budgets in the UK have been cut to the core and doctors have experienced lower than ever study leave allocations. Mindful of this, the CETC is constantly looking to deliver affordable training solutions.

Providing high-quality learning opportunities for psychiatrists and other related health and social care professionals, service users and carers

BRINGING OUR TRAINING TO YOU… ‘AT YOUR PLACE’
From our London and Leeds offices, the CETC has brought its services to the major cities in the UK. In addition, the CETC now offers many of its training courses ‘at your place’ (i.e. on site), designed to save you time and money.

NEW PLANS AND DEVELOPMENTS
Medical management and leadership
The CETC has started to plan its leadership training programme for psychiatrists. This is based on the new Medical Leadership Competency Framework jointly produced by the NHS Institute of Innovation and Improvement and the Academy of Medical Colleges.

‘Good management and leadership should be regarded as essential a part of professionalism as are clinical skills.’ (Dame Gillian Morgan, Chief Executive of NHS Confederation, June 2007)

Mental Health Act 2007
The CETC is working closely with the Care Services Improvement Partnership (CSIP) to develop training standards for the new roles and responsibilities. It will help develop national standards for approved clinician and Section 12 training to help ensure quality and consistency. An extensive training programme will be delivered in 2008.

Deprivation of liberty safeguards
The introduction of the Mental Capacity Act 2005 and the Mental Health Act 2007 have brought about the new Deprivation of Liberty Safeguards. The CETC is working with the CSIP and the College’s Publications department to offer both training courses and online CPD modules.

College accredited training module (CATM) in educational supervision
Dr Joe Bouch, former Director of CPD and Consultant Advisor to the CETC, has been perfecting the training materials for the Educational Supervision Module. However, owing to the Medical Training Application Service difficulties which absorbed and monopolised local resources, the planned 2007 UK roll-out was delayed for a year.

Learning disabilities events
Working with the Faculty of the Psychiatry of Learning Disabilities and Vice-President Dr Roger Banks, the CETC is delivering a series of events on topics such as Asperger syndrome, challenging behaviour, old age and learning disabilities, and commissioning.

One-to-one coaching
Dr David Roy, former Medical Director of South London and Maudsley NHS Foundation Trust, is heading up the CETC’s coaching service. He is leading a group of experienced coaches who will work intensively, independently and confidentially with consultant psychiatrists to support change, improve effectiveness and enhance career development.

New Ways of Working for Everyone
Through a variety of management, personal and professional learning opportunities, the CETC is supporting psychiatrists to embrace change, lead and work in multi-professional teams and develop new roles. In partnership with the National Institute for Mental Health in England, the CETC is delivering the New Ways of Working collaborative learning sets throughout England. They are financially supported by strategic health authorities. The learning sets are involving approximately 50 NHS mental health trusts and include sessions with commissioners, service users and carers.

Event management in healthcare
The CETC works collaboratively with other organisations to deliver high-quality, cost-effective events. If you would like us to work with you, please contact us. To find out more about our education and training developments, events and activities please contact us or see our web pages at www.rcpsych.ac.uk/cetc

Lynne M Christopher, Head of Training Education and Training Centre Royal College of Psychiatrists Standon House 21 Mansell Street London E1 8AA Tel: 020 7977 6652/57 Fax: 021 7481 4842

Regional Development Office Royal College of Psychiatrists 1st Floor, 1 City Square Leeds LS1 2ES Tel: 0113 3663248 Fax: 0113 3663051
The recent White Paper, Trust, Assurance and Safety – The Regulation of Health Professionals in the 21st Century, proposes that multi-source feedback (MSF) should be one of the information sources that underpins revalidation. It is therefore likely that participation in MSF will be a requirement for all doctors within the next few years.

The College is leading the way by having already introduced a 360-degree assessment service for consultants. The questionnaires were developed by the University of Glamorgan, Gwent Healthcare NHS Trust and the Centre for Health Leadership, Wales. They were then extensively tested and piloted by the Royal College of Psychiatrists’ Centre for Quality Improvement (CCQI). In the 2 years since the ACP 360 service was launched more than 750 consultant psychiatrists have enrolled.

**WHY MULTI-SOURCE FEEDBACK?**

Multi-source feedback is a model of assessment which aims to present more rounded feedback to an individual about their work performance than does the traditional ‘top-down’ approach, in which it is gathered only from an individual’s line manager.

The method has been used extensively in industry for several decades and is becoming more common in the health sector both in the UK and abroad. The benefits of MSF in health settings are that, first, it takes into account the views of a range of people affected by the person’s behaviour in the workplace. This includes work colleagues who are peers, subordinates and managers, workers from other disciplines and, crucially, patients. Second, MSF gathers information on aspects of a consultant’s practice that other tools cannot measure. In the case of ACP 360, these ‘difficult to measure’ domains map onto two of the General Medical Council’s core domains of good medical practice: relationships with colleagues and relating to patients.

It should be stressed that MSF is just one component of a rounded appraisal. It contributes important information about performance in these domains that allows the participant to reflect upon and develop these aspects of their practice.

**PSYCHOMETRIC PROPERTIES OF ACP 360**

ACP 360 compares favourably with MSF systems used by other medical specialties. Analysis of the returns from the first 347 participants in ACP 360 (which involved 4422 colleague raters and 6657 patient raters) showed that the questionnaires have high internal consistency and that the nine domains are meaningful. These domains are:

- communication
- availability
- emotional intelligence
- decision-making
- relationships with patients
- relationships with relatives and carers
- relationships with consultant peers
- relationships with junior doctors
- relationships with their team and external agencies.

Ratings from 13 colleagues and 25 patients are needed to ensure that the findings are reliable. This means that ACP 360 is suitable for use by psychiatrists who work in large, multiprofessional teams and who have heavy case-loads.

Another important finding was that although the ratings made by colleagues and by service users correlate with one another, neither correlates with the self-rating. This suggests that ACP 360 can flag up issues of which a consultant is unaware. Consistent with this, a substantial number of participants in an evaluation of ACP 360 reported that their results had caused them to change the way in which they interact with their patients and colleagues.

Other findings from this evaluation include:

- 75% found the results of the report useful
- 85% found the report easy to understand
- 90% agreed that the instructions were easy to follow
- 90% would use the report at their next appraisal.

**HOW ACP 360 HAS CHANGED OVER 2 YEARS**

We have worked hard to streamline the process of ACP 360 to make it easier for consultants to participate. We have also developed the format of the report over the 2 years since the launch.

To reduce the time burden on consultants, the CCQI has absorbed much of the administrative work. All questionnaires are now returned to the College and we have reduced the paperwork by moving self- and colleague assessments online. Communication with colleague assessors is also now managed by the CCQI. In addition to this, we are constantly adding new resources to the ACP 360 website, www.rcpsych.ac.uk/acp360, to enable participants to manage their assessment with the least fuss and achieve a rich level of feedback that can be used to develop their practice.

The format of the report has changed to ensure that the results are clear and easy to interpret, and thus can inform the participant’s personal development plan. The benchmark data are updated periodically.

**DELIVERY OF MULTI-SOURCE FEEDBACK**

The results of MSF are enhanced if the participating consultant has access to advice and the process is part of a supportive system of appraisal. Dr Helen Matthews, Medical Director of Hampshire Partnership Trust, who is ACP 360’s clinical advisor and who has considerable experience in delivering appraisals and developing and implementing appraisal processes, is available to give confidential advice to participants. Dr Matthews is also developing an online help facility for both appraisers and appraisees.

The ACP 360 team works closely with the College Education and Training Centre, which offers a range of high-quality personal development courses specifically geared to improving performance in the domains covered by the assessment questionnaires. As more consultants and trusts sign up to ACP 360 we hope to extend this partnership so that participants can be confident that support is offered for those who wish to improve on areas of their practice flagged for development in their report.
as more consultants complete their assessments. To the right, we can see clearly how a consultant’s self-rating and those given to them by colleagues (the red dots) fall within the benchmark data for that domain, with the 10th and 90th percentiles clearly marked.

OTHER SPECIALTIES AND GRADES
ACP 360 was designed and tested for use by consultants who work with people of working age with mental illness. We can now offer a version for consultants who work with children and adolescents and we are adapting the tools for use by other specialties. We also hope to make ACP 360 available to all psychiatrists other than trainees.

FUTURE
The enthusiastic take-up of ACP 360 by consultants shows that psychiatrists perceive the value of obtaining structured feedback from colleagues and patients as part of their professional development regardless of whether it becomes a requirement for revalidation. The questionnaires will be revised and updated and we plan to add a section to allow feedback from appraisers in the form of free text. We will also incorporate any requirement from the General Medical Council for MSF to support relicensing. Our hope and intention is that ACP 360 will be the one-stop shop for MSF for psychiatrists.

Awards, new faces and international appeal are just some of the highlights of 2007 for the Public Education Department.

Two specialist registrars, Drs Mona Freeman and James Stoddart, joined the Public Education Editorial Board, chaired by Dr Philip Timms, to help develop new factsheets and leaflets. Dr Martin Briscoe has established a group of 12 volunteers who help with translating our materials. In the past 2 years they have completed 112 translations in 11 languages. These have included Help is at Hand and Partners in Care leaflets as well as factsheets.

Recognition was awarded to several of our Help is at Hand leaflets. Self-harm was ‘highly commended’ at the BMA Patient Information Awards, with three others being ‘commended’. The Quality and usefulness of our materials has also been seen through an increase of around 16% in leaflet sales in 2007, with almost 50,000 sold, 7000 more than in 2006. There are currently 16 titles in print, which are available through the College as well as trusts, primary care teams, GP surgeries and elsewhere.

WEBSITE
The website continues to prove popular, with three-quarters of users being directed via a search engine, and we remain in good standing in Google rankings for topics such as CBT, post-traumatic stress, bereavement and depression. Personal bookmarks are used by 10% to gain access to the site and the rest come via links on other sites. People looking for the College directly also locate us via a search engine. Although the majority of visitors are still from the UK, we also reach out to the international audience. For the month of October alone we had hits reported from over 188 countries (98% of the 192 countries recognised by the United Nations).

The College is still one of the preferred sources in the UK for mental health information despite a drop in international rankings (thought to be from the increased growth of information available online). Over 70% of visitors to the website are first-timers.

CHILDREN AND FAMILY
The Child and Family Public Education Board, chaired by Dr Margaret Bamforth, continues to develop and produce materials aimed at reducing the stigma of mental illness and promoting well-being and positive mental health in children and young people. A child and adolescent website is being developed along these lines.

It also aims to raise awareness, in the general population and among healthcare professionals, of the needs of children and their families by listening and responding to their views about the kind of services they want. It is hoped that this will be done in partnership with the Young Minds children’s panel.
THE CHANGE OF GUARD
The Board of International Affairs has entered its 7th year, having had a successful first phase under the chairmanship of Professor Hamid Ghodse. It seems apt to pay tribute here to Hamid’s unwavering dedication to supporting College members wherever they happen to be and his relentless determination to ensure the Board’s success in its many initiatives. It is largely thanks to his efforts that the College is now well on its way to becoming the truly international organisation it so rightly deserves to be.

In July Professor Rachel Jenkins, who has served since the Board was established in 2001, took over as Director of International Affairs and eight new members were appointed to succeed those whose term of office expired: Dr Benjamin Baig, Professor Nicandros Bouras, Dr Harvey Gordon, Dr Peter Hughes, Dr Kamran Saedi, Dr Ajit Shah, Dr Kandiah Sivakumar and Dr Michael van Seuningen. The Board has appointed two Deputy Directors of International Affairs – Dr Deji Oyebode and Dr Kandiah Sivakumar – to assist Professor Jenkins. Please join us in congratulating them and wishing them success in their new roles.

The Board has undertaken a number of successful initiatives to enhance the College’s relationship with its members abroad and to raise its profile internationally. Our international Divisions actively participate in the College’s annual meeting through academic sessions and business meetings. The African Division launched an e-newsletter this year to enhance communication within its membership. Six new International Associates joined the College this year, bringing the total to 21 since this new grade of College membership was introduced in 2005.

THE COLLEGE VOLUNTEER PROGRAMME
At the beginning of its new term, the Board reassessed its priorities with a view to advising the College on the direction of its international policy. We recognise that improving global mental health is in the UK’s interest and we believe that the College has a major role to play. The recent reports from the Department for International Development, Chief Medical Officer and Lord Crisp all clearly set out the UK interest in engaging with low- and middle-income countries and supporting their health sector development. The UK has particular responsibilities as it employs a significant number of trained health professionals from these areas, many of whom are College members. With appropriate support the College volunteer programme, designed to match UK members’ expertise with areas of needs identified by overseas members, can become an excellent resource in helping to achieve this objective.

Our experience in postgraduate education, historical links and current involvement with many countries will be helpful in strengthening the support we can give to host countries in relation to the provision of training and education appropriate to local needs. We are also keen to ensure that any links we establish will not lead to exploitation of the workforce in low- and middle-income countries to remedy service deficiencies in the UK.

BENEFITS
Many College members and other health professionals in the NHS are involved in programmes to support developing countries, but often experience difficulties in getting time-release from their jobs. It is important to recognise practical benefits for hospitals and primary care services in allowing people to work overseas, especially reinvigoration, acquiring new clinical skills and providing an enhanced understanding of the communities from which immigrants come. An overseas volunteer experience will also benefit clinicians in contributing to their personal professional growth and in promoting the development of creative and innovative cost-effective models of care.

In the current context of ever-increasing global migrations it is difficult to underestimate the advantages of exposure to cultural diversity and the challenges of poorly resourced services. The courage and determination of people working in adversity can have a profound impact on those around them. Experience shows that such encounters greatly contribute to creating long-lasting professional links between individuals and institutions and to shaping a well-rounded mental health professional.

VOLUNTEERING FOR TRAINEES
In the past year we have extended the range of our volunteer programme and arranged a successful 3-month pilot placement in Ghana in collaboration with the South West London and St George’s NHS Mental Health Trust and Challenges Worldwide (CWW), an international development charity and award-winning social enterprise. This innovative scheme allows trainees in their 5th or 6th year of training to complete an accredited period of out-of-programme experience in Africa. We have developed an effective model for overseas assignments, which promotes consistency and sustainability in the host country, and provides financial support, training accreditation and personal development for the UK trainee.

The pilot in Ghana, undertaken by Dr Norman Poole, a specialist registrar on the South West London and St George’s scheme, confirmed that with planning and support a short-term model which manages a series of 3-month placements assisting the development of services over time would enable real improvements to be made. Dr Poole’s personality, attitude and commitment were also key to the success of the pilot and highlighted the importance of a good selection process which has to look at volunteers’ personal as well as professional abilities. It also showed that careful preparation for each placement was vital to the success of the whole programme.

Further details of this initiative can be found on the College and CWW websites.

INTERNATIONAL PRESENCE
One of the three main priorities identified at a recent Board of International Affairs strategy development day was international conference attendance at key events and joint meetings with College counterparts within the international Divisions. This presents an obvious opportunity to promote College activities.

Space constraints prevent us from listing all the conferences the College participated in during 2007 but there are three that deserve a special mention. The World Psychiatric Association (WPA) held a regional conference in Nairobi, Kenya, from 21 to 24 March 2007. The theme of the conference was ‘Mental health in development’. The main message conveyed to us by our African colleagues was a clear need for a continuous channel of communication between various groups who share common goals, especially pertaining to the improvement of resources and practice in mental healthcare in Africa. One tangible result of such formal and informal interactions during the sessions and social functions was the development of collaboration with the West African College of Physicians (WACP), whose current President, Dr Roger Makanjula, is a psychiatrist. The College is currently helping to develop their curriculum in psychiatry.
Our exhibition stand at the American Psychiatric Association (APA) conference in May was very popular with delegates. College publications, international activities and public education materials were displayed and members of staff were on hand to deal with enquiries. In addition to the academic session organised by the Pan-American Division (‘Women and psychiatry around the world: the importance of gender and culture’) we had a successful joint Presidential symposium (‘Health inequalities for persons with mental health problems and developmental disabilities’), a series of business meetings (with the APA leadership, the APA Assembly and the Council on Global Psychiatry) and a well-attended drinks reception for our members in the Pan-American Division.

The WPA Regional Conference and the Chinese Society of Psychiatry’s Annual Congress was held in Shanghai, China, from 20 to 23 September 2007. The College delegation included Professor Sheila Hollins (President), Professor Sue Bailey (Registrar), Dr Tony Zigmond (Vice-President) and Joanna Carroll (International Manager). In addition to presenting a session on mental health legislation around the world, our main objective was to initiate contact with psychiatrists in mainland China and to meet representatives of relevant organisations, with the view to discussing collaboration. We had a very fruitful meeting with Mr David Wang, Projects Manager, and Miss Hu Xuan, Projects Officer, of the British Council. Our public education materials and the volunteer programme were of particular interest and we will be exploring this further with the Chinese Health Bureau in Shanghai. Our impromptu visit to the Shanghai Mental Health Centre gave us a valuable overview of Shanghai mental health services. The formal business at the Congress included a poster presentation about the College’s international work and a College symposium on developing and implementing mental health legislation around the world. The full post-conference report is available on the College website.

**COLLABORATION WITH OTHER ORGANISATIONS**

**Europe**

The College has extended its long-standing commitment of engaging with trainees on the international stage by supporting the European Federation of all Psychiatric Trainees (EFPT). For many years the College has supported the activities of this body, a federation of 24 national trainee organisations, not least by sending delegates via the Psychiatric Trainees’ Committee (PTC). The organisation is currently grappling with many complex issues, including the implementation of competency-based training in Europe, the development of a European exchange programme for trainees and harmonisation of training in Europe. Our College has been a leader in many of these issues and has both facilitated and contributed to many of these discussions. Additionally, this year Dr Amit Malik, the immediate past-chair of the PTC, was elected President of the EFPT for 2009. Please join us in wishing him success in this challenging new role.

We also continue to provide support to the Section and Board of Psychiatry of the European Union of Medical Specialists (UEMS). Our links with the UEMS are further fostered through delegations sent to the Sections of Adult Psychiatry (the Dean and a representative, the Education Training and Standards Committee) and Child and Adolescent Psychiatry (the Registrar and the chair of CAP Faculty). This arrangement gives the Board a unique opportunity to gain insight into various issues of concern to European psychiatrists such as the relationship between the pharmaceutical industry and continuing medical education in Europe, problems with recruitment and retention experienced by many European countries, the promotion of the competency-based model of training and developing national approval systems of training institutions.

**Worldwide**

The Board continues to support the College collaboration with the WPA. The business meeting between the College and the WPA officers, held during the College’s Annual Meeting in Edinburgh, identified several areas of possible collaboration, such as the efforts to prevent the ‘brain drain’, the review of the WPA guidelines on the relationship with the pharmaceutical companies and advocacy to influence mental health policy.

Joanna Carroll
International Manager
Professor Rachel Jenkins
Director of International Affairs
NO HEALTH WITHOUT MENTAL HEALTH

The President’s campaign, Images of Psychiatry, had its foundations in a growing awareness that the perception of psychiatry among both the general public and other medical professionals has, on occasion, been negative or inaccurate. It seeks to address this, as well as to continue to build on the work of previous campaigns such as Changing Minds and Partners in Care.

Images of Psychiatry’s main objectives are listed below.

1. To promote psychiatry as a modern medical discipline, one which is not only scientific, but also psychosocial/holistic and central to the care of people with mental disorders.
2. To ensure that user and carer issues are central to all training in psychiatry.
3. To promote psychiatry to school students as an exciting career, thereby widening the group of young people going into psychiatry.
4. To ensure that medical graduate entry programmes are attractive to mature applicants with an interest in mental health.
5. To encourage medical students to choose psychiatry as a career.
6. To ensure that we develop a positive and accurate understanding of psychiatry among doctors of all disciplines.

To achieve these objectives four work streams were established, each with a working group attached, to fully utilise the skills and expertise of the campaign’s steering group members on a practical level.

1. **Perceptions of psychiatry**, chaired by Mr Paul Farmer
   Aims: to define the nature and role of modern psychiatry and to develop a plan to achieve this in line with the strategic plan.

2. **School curriculum**, chaired by Dr Martin Hollins
   Aims: to influence the required curriculum, raise the profile of mental health in schools and provide continuing professional development for teachers.

3. **Undergraduate education**, chaired by Dr Nisha Dogra
   Aims: to develop web-based resources of good practice for undergraduate teaching of psychiatry and of good practice in promoting psychiatry as a career.

4. **Service users and carers**, chaired by Ms Deborah Hart
   Aims: to develop mutual understanding and respect between users, carers and psychiatrists, and promote involvement of users and carers in all aspects of mental health services such as training and selection.

As a direct result of the work of these groups, and the interest and enthusiasm shown by the Divisions for the campaign, practical projects are now up and running across the country. All of these projects are helping to further the campaign aims and objectives, while offering a real benefit to those involved in, or affected by, them.

These projects have been funded, wholly or partially, from a campaign fund of £75,000, with grants ranging from a few hundred pounds to just under £15,000.

The projects are wide-ranging, from research into attitudes towards psychiatry among GPs in the West Midlands, through dance movement therapy for in-patients in Merseyside, to a service-user-led film and training resource showing best practice for involving service users and carers in training and selection of psychiatrists.

A national survey of attitudes towards mental health will also be repeated in July 2008, the results of which will inform and develop the College’s continuing anti-stigma work.

A full list of the projects is available on the website at: [http://www.rcpsych.ac.uk/imageprojects](http://www.rcpsych.ac.uk/imageprojects). Regular updates on the progress of these projects will also be posted here.

For more information, please contact Nicola Boyce, nboyce@rcpsych.ac.uk.
ADOPT-A-BOOK CAMPAIGN

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.

Its aim is to raise funds for the conservation and repair of the College’s antique book collection, some of which date as far back as the 15th century. Most of the books were donated in 1895 to the Medico-Psychological Association, a predecessor body of the College, as gifts or bequests towards the development of the library. Donations mainly came from the private collections of Doctors Daniel Hack Tuke, J Lord, C Lockhart Robertson and J Whitwell. The collection contains books written by notable authors such as John Charles Bucknill, Henry Maudsley, John Connolly and Sigmund Freud. Also included are 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 intellectual disability.

The appeal for donations is directed at Members and Fellows of the College, and anyone 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 adopt a book, please contact archives@rcpsych.ac.uk

List of donors (2007)
Dr Philip Sugarman
Dr John S. Christie
Dr Larry Culliford
Dr Indrani Anthony-Pillai
Dr Val Yeung
Dr Dora and Jack Black

Changes to the examination process are being initiated to coincide with the introduction of a national programme of competency-based training and the development by the College of a competency-based curriculum (see p. 6). These changes remain subject to approval by external bodies. Please see the website for updates.

AUTUMN 2006

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<tr>
<td>attempts:</td>
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<tr>
<td>1st</td>
<td>203</td>
</tr>
<tr>
<td>2nd</td>
<td>72</td>
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<td>3rd</td>
<td>43</td>
</tr>
<tr>
<td>4th</td>
<td>20</td>
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<tr>
<td>more than 4th</td>
<td>33</td>
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AUTUMN 2007

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<tr>
<th>Part I (written)</th>
<th>542 candidates</th>
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<table>
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<td>pass</td>
<td>227</td>
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<tr>
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<tr>
<td>1st</td>
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<td>2nd</td>
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<tr>
<td>3rd</td>
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<td>more than 3rd</td>
<td>16</td>
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<table>
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<tr>
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<th>697 candidates</th>
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<td>pass</td>
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<table>
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<th>Part II (clinical)</th>
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<tbody>
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<td>276</td>
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<tr>
<td>attempts:</td>
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<tr>
<td>1st</td>
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<td>2nd</td>
<td>72</td>
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<td>3rd</td>
<td>38</td>
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<tr>
<td>4th</td>
<td>20</td>
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<tr>
<td>more than 4th</td>
<td>24</td>
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</table>

Annual Review 2007 17
Treasurer’s Report

It is my pleasure to present my first report as Honorary Treasurer, having assumed office midway through the 2006 financial year.

I would like to pay tribute to my predecessor, Dr Fiona Subotsky, for her many years of service and for her help in easing my transition into this post. Handover was detailed and the fact that it has occurred at a time when the College is in a strong financial position has been helpful too.

The College is presenting its accounts for the first time under the new Statement of Recommended Practice (SORP) issued by the Charity Commission in 2005. One of my challenges is to show the accounts in such a way that enables a review of the College’s affairs and performance in line with SORP 2005 and the College’s strategic plan.

Officers and staff at the College continue to strive to bring the organisation close to its members, key stakeholders and the public in general. Working from a position of financial strength we have been able to establish staffed offices in all the English Divisions, the last one having been opened in Bristol in 2006 to support the South West Division. The College now has offices in all countries in the UK and Ireland, as well as the English Divisions, and has been able to devote increased resources to addressing issues in those countries with devolved jurisdictions.

The active development of the website, the most widely accessible public face of the College, has continued. A trial version of CPD Online was launched during the year and has been enhanced by innovations such as podcasts, hosted by Professor Raj Persaud. The public education area of the website, which provides downloads of the College’s acclaimed mental health information leaflets, continues to be recognised as a leader in its field, rating number one in the world on Google rankings for searches on antidepressants, cognitive therapy and postnatal depression. The site is rated as ‘in the top 3 for child health issues’ by The Times and ‘outstanding’ by The Sun newspapers in the UK.

The new College campaign, Images of Psychiatry, was specified during 2006 and will develop during 2007, with a wide-ranging programme aimed at increasing and improving understanding of psychiatry and psychiatrists. This campaign is crucial in light of recent proposed government legislation regarding mental health, persistent adverse publicity in the media about psychiatrists and the mentally ill, and an increasingly uncertain financial climate in the National Health Service.

The College had a good financial year in 2006 with an income of £12,147k (2005 – £11,503k) and expenditure of £12,013k (2005 – £10,819k) resulting in a surplus of £134k. The fixed assets, including the College’s investment portfolio, are valued at £3,156k.

Additionally, gains on investments amounted to £72k, increasing the surplus to a total of £206k. The equity market during 2006 was more volatile than during 2005, and this was reflected in an overall increase in value slightly smaller than the benchmark, as the College’s investment manager adopted a rather more defensive position. Cash flow remained positive. Capital expenditure for the
These summary accounts were circulated to the membership of the College and were approved at the Royal College of Psychiatrists’ AGM, 20 June 2007.

The College Research Unit continues to thrive, with its activities organised into the areas of Health Service Research (the College Centre for Applied Research), the National Collaborating Centre for Mental Health and the College Centre for Quality Improvement, which brought together quality improvement activities into a single organisational entity permitting greater flexibility and efficiency. Income during 2006 in these areas totalled £2,950k (2005 – £3,050k).

The fourth area of activity within the College Research and Training Unit, the College Education and Training Centre, grew in 2006, increasing the number of courses and conferences held from 20 during 2005 to 70 during 2006. Activities are being developed regionally and a new member of staff was recruited to work from the Leeds office, in addition to the staff working from the London base. Income during 2006 was £304k (2005 – £115k).

The Annual Meeting 2006 was held in Glasgow. Excepting the allocation of central overheads, which are met by general funds, a very satisfactory surplus of £125k (2005 – £100k) was achieved. The overall number of delegates attending Faculty, Division and Section meetings increased during 2006. Once more excepting the allocation of central overheads, most meetings made modest surpluses.

In 2006 the sum of £330k was generated for the Development Fund, from the 15% levy on certain income-generating activities of the College. The sum of £200k has been transferred to the New Building Fund. £50k will be allocated for the 2007 Omnibus survey, £74k will be available to the divisions in 2007 for projects in connection to Images of Psychiatry and it is likely that £6k will be allocated to the Afiya conference to be held in 2007.

In conclusion, I should like to thank the Chief Executive, Vanessa Cameron, and Paul Taylor, Head of Financial Services, and their staff, for their commitment and support during 2006 and as we plan for the challenges to come.

Professor George Ikkos, Honorary Treasurer 7 March 2007
# Statement of financial activities – year to 31 December 2006

<table>
<thead>
<tr>
<th>Unrestricted Funds £000</th>
<th>Restricted Funds £000</th>
<th>Total Funds 2006 £000</th>
<th>Total Funds 2005 £000</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Incoming resources</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Incoming resources from generated funds</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Voluntary income – donations and gifts</td>
<td>1</td>
<td>–</td>
<td>1</td>
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<tr>
<td>Investment income and bank interest</td>
<td>290</td>
<td>–</td>
<td>290</td>
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<tr>
<td><strong>Incoming resources from charitable activities</strong></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Standard setting and research</td>
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<td>2322</td>
<td>3,198</td>
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<tr>
<td>Education and training</td>
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<td>4</td>
<td>4,942</td>
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<tr>
<td>Member services and support</td>
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<td>3,335</td>
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<tr>
<td>College campaign and public education</td>
<td>38</td>
<td>4</td>
<td>42</td>
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<tr>
<td>Central College development</td>
<td>330</td>
<td>–</td>
<td>330</td>
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<tr>
<td>Prize funds</td>
<td>–</td>
<td>9</td>
<td>9</td>
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<tr>
<td><strong>Total incoming resources</strong></td>
<td>9,808</td>
<td>2,339</td>
<td>12,147</td>
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<td><strong>Resources expended</strong></td>
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<td><strong>Cost of generating funds</strong></td>
<td></td>
<td></td>
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<tr>
<td>Activities for generating funds</td>
<td>20</td>
<td>–</td>
<td>20</td>
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<tr>
<td>Investment management costs</td>
<td>9</td>
<td>–</td>
<td>9</td>
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<tr>
<td><strong>Charitable activities</strong></td>
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<td></td>
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<tr>
<td>Standard setting and research</td>
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<td>2,463</td>
<td>4,304</td>
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<tr>
<td>Education and training</td>
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<tr>
<td>Member services and support</td>
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<td>College campaign and public education</td>
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<td>50</td>
<td>561</td>
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<tr>
<td>Prize funds</td>
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<td>25</td>
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<tr>
<td><strong>Governance costs</strong></td>
<td>351</td>
<td>–</td>
<td>351</td>
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<tr>
<td><strong>Total resources expended</strong></td>
<td>9,475</td>
<td>2,538</td>
<td>12,013</td>
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<tr>
<td><strong>Net incoming (outgoing) resources before transfers</strong></td>
<td>333</td>
<td>(199)</td>
<td>134</td>
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<tr>
<td><strong>Transfer between funds</strong></td>
<td>7</td>
<td>(7)</td>
<td>–</td>
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<tr>
<td><strong>Net incoming resources before other recognised gains and losses</strong></td>
<td>340</td>
<td>(206)</td>
<td>134</td>
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<tr>
<td><strong>Other recognised gains and losses</strong></td>
<td></td>
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<tr>
<td>Gains/losses on investment assets</td>
<td>72</td>
<td>–</td>
<td>72</td>
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<tr>
<td><strong>Net movement in funds</strong></td>
<td>412</td>
<td>(206)</td>
<td>206</td>
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<tr>
<td><strong>Reconciliation of funds</strong></td>
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<tr>
<td>Total funds brought forward</td>
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<td>867</td>
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<tr>
<td><strong>Total funds carried forward</strong></td>
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<td>661</td>
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### Balance sheet as at 31 December 2006

<table>
<thead>
<tr>
<th></th>
<th>2006 £000</th>
<th>2005 £000</th>
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<tbody>
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<td><strong>Fixed assets</strong></td>
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<tr>
<td>Tangible assets</td>
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<tr>
<td>Listed investments</td>
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<td>1,046</td>
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<tr>
<td><strong>Total</strong></td>
<td>3,156</td>
<td>3,256</td>
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<tr>
<td><strong>Current assets</strong></td>
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<tr>
<td>Stocks</td>
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<td>176</td>
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<tr>
<td>Debtors</td>
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<td>842</td>
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<tr>
<td>Short-term bank deposits</td>
<td>1,500</td>
<td>1,350</td>
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<tr>
<td>Cash at bank and in hand</td>
<td>2,428</td>
<td>2,579</td>
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<td><strong>Total</strong></td>
<td>5,547</td>
<td>4,947</td>
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<tr>
<td><strong>Creditors: amounts falling due within one year</strong></td>
<td>2,025</td>
<td>1,731</td>
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<tr>
<td><strong>Net current assets</strong></td>
<td>3,522</td>
<td>3,216</td>
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<td><strong>Total net assets</strong></td>
<td>6,678</td>
<td>6,472</td>
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<tr>
<td><strong>Represented by:</strong></td>
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<td></td>
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<tr>
<td><strong>Funds and reserves</strong></td>
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<tr>
<td>Income funds</td>
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<td></td>
</tr>
<tr>
<td>Restricted funds</td>
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<tr>
<td>Unrestricted funds</td>
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<tr>
<td>Designated funds</td>
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<tr>
<td>General funds</td>
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<tr>
<td><strong>Total</strong></td>
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<td></td>
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</tbody>
</table>

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CENTRAL EXECUTIVE COMMITTEE
MEMBERSHIP 2007

Ex Officio
President
Professor S C Hollins
Treasurer
Professor G Ikkos
Dean
Professor D K M L Bhugra
Registrar
Professor S M Bailey
Editor
Professor P J Tyrer

Vice-Presidents
Dr P F Kennedy*
Dr R Banks*

Associate Deans
Dr A S Bird
Dr N S Brown
Dr L M Mynors-Wallis
Professor G P O’Brien
Dr S A Pidd
Dr K Sivakumar

Deputy Registrars
Dr P Byrne
Dr M A Javed
Dr O Junaid
Dr P R Snowden

Vice-Presidents
Dr P F Kennedy*
Dr R Banks*

Associate Deans
Dr A S Bird
Dr N S Brown
Dr L M Mynors-Wallis
Professor G P O’Brien
Dr S A Pidd
Dr K Sivakumar

Deputy Registrars
Dr P Byrne
Dr M A Javed
Dr O Junaid
Dr P R Snowden

Elected Members
Professor S M Benbow (Fellow)
Professor R N Chithiramohan (Fellow)
Dr S R Nimmagadda (Member)
Dr P A Sugarman (Member)

Chairs of Faculties
Academic
Professor N Craddock
Addictions
Dr M P Farrell
Child and Adolescent
Dr G J R Richardson
Forensic
Dr J C O’Grady
General and Community
Dr M Hampson
Learning Disability
Dr S Bhaumik
Liaison
Professor E A Guthrie
Old Age
Dr D N Anderson
Psychotherapy
Dr C J Mace
Rehabilitation and Social
Dr F Holloway

Chair of Sections
Perinatal
Dr M R Oates
Eating Disorders
Dr U Schmidt

Chair of Divisions
Irish
Dr M C Walsh
Eastern
Dr P Roberts
London
Dr M Maier
Northern & Yorkshire
Dr C J Fisher
Northern Ireland
Dr C Cassidy
North West
Dr J Holloway
Scottish
Dr T M Brown
South East
Dr R A Baker
South West
Dr A James
Trent
Dr D Khoosal
Welsh
Dr V R Anness
West Midlands
Dr M A Javed

Co-opted members
Dr H Griffiths (for the National Director of Mental Health),
Dr J S Bamrah (Chair, BMA CCSC Psychiatry Sub-Committee),
Dr P Lelliott (Director, College Research and Training Unit),
Dr A S Zigmond (Honorary Vice-President)

Chair of Professional Governance & Ethics Committee
Dr E Fellow-Smith
Dr H Miller
Professor R Jenkins
Dr P Byrne
Dr I Ahmad

Chair of the Psychiatric Trainees’ Committee
Dr A Malik

Patients and Carers Representatives
Mr R Goss
Mr P Partridge
Mrs C Young

Information on this page reflects committee membership as at November 2007. Further enquiries should be sent in writing to the Registrar.

*term of office ends 31 December 2007
*term of office begins 1 January 2008
## EDUCATION, TRAINING AND STANDARDS COMMITTEE

**Ex Officio**
- Professor S C Hollins, President
- Professor D K M L Bhugra, Dean (Chair)
- Professor S M Bailey, Registrar

**Dr**
- J S Bamrah
- A W Bateman
- A S Bird
- N S Brown
- A I Etchegoyen
- R Jenkins
- E J Marshall

**Dr H E J Miller**
- L M Mynors-Wallis
- G P O’Brien
- S A Pidd
- R J W Williams
- O G White

## OFFICERS OF STANDING COMMITTEES

<table>
<thead>
<tr>
<th>Committee</th>
<th>Chair</th>
<th>Secretary</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patients and Carers</td>
<td>D P Byrne</td>
<td>S Bailey</td>
</tr>
<tr>
<td>Policy Co-ordination</td>
<td>H Miller</td>
<td>A Malik</td>
</tr>
<tr>
<td>Programmes and Meetings</td>
<td>R J Tyer</td>
<td>P Byrne</td>
</tr>
<tr>
<td>Psychiatric Trainees</td>
<td>J Hall</td>
<td>I Hall</td>
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<tr>
<td>Publications Management Board</td>
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<td>Public Education</td>
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<td>Westminster Liaison</td>
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## OFFICERS OF SPECIAL COMMITTEES

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<th>Chair</th>
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<tbody>
<tr>
<td>Board of International Affairs</td>
<td>R Jenkins</td>
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<tr>
<td>ECT and Related Treatments</td>
<td>A Easton</td>
<td></td>
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<tr>
<td>Ethnic Issues</td>
<td>P Moodley</td>
<td></td>
</tr>
<tr>
<td>Informatics</td>
<td>M Baggailey</td>
<td></td>
</tr>
<tr>
<td>Professional Governance &amp; Ethics</td>
<td>E Fellow-Smith</td>
<td></td>
</tr>
<tr>
<td>Ethics Sub-Committee</td>
<td>C L Freeman</td>
<td>R McClelland</td>
</tr>
<tr>
<td>Confidentiality Sub-Committee</td>
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## OFFICERS OF SPECIAL INTEREST GROUPS

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<th>Group</th>
<th>Chair</th>
<th>Secretary</th>
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<tbody>
<tr>
<td>Adolescent Forensic</td>
<td>P Misch</td>
<td>H Killaspy</td>
</tr>
<tr>
<td>Gay and Lesbian</td>
<td>A Bartlett</td>
<td>J Brady</td>
</tr>
<tr>
<td>Mental Health Informatics</td>
<td>Z Nadeem</td>
<td></td>
</tr>
<tr>
<td>Management</td>
<td>R Deo</td>
<td>M Dilley</td>
</tr>
<tr>
<td>Neuropsychiatry</td>
<td>S Fleming</td>
<td>B Fulford</td>
</tr>
<tr>
<td>Philosophy</td>
<td>J Hughes</td>
<td>S McKeown</td>
</tr>
<tr>
<td>Private and Independent Practice</td>
<td>L McClelland</td>
<td></td>
</tr>
<tr>
<td>Psychopharmacology</td>
<td>D Baldwin</td>
<td>S Dursun</td>
</tr>
<tr>
<td>Spirituality and Psychiatry</td>
<td>S Egger</td>
<td>J Candy</td>
</tr>
<tr>
<td>Transcultural</td>
<td>K Bhui</td>
<td>K McKenzie</td>
</tr>
<tr>
<td>Women</td>
<td>F Mason</td>
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## OFFICERS OF FACULTIES AND SECTIONS

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<th>Chair</th>
<th>Secretary</th>
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<tbody>
<tr>
<td>Addictions</td>
<td>P Farrell</td>
<td>K Fletcher</td>
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<tr>
<td>Child and Adolescent Forensic</td>
<td>G J Richardson</td>
<td>C Lamb</td>
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<tr>
<td>General and Community</td>
<td>J O’Grady</td>
<td>K Fraser</td>
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<tr>
<td>Learning Disability</td>
<td>M Hampson</td>
<td>S Joseph</td>
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<td>Liaison</td>
<td>S Bhauvik</td>
<td>H Boer</td>
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<td>Old Age</td>
<td>E A Guthrie</td>
<td>M Temple</td>
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<td>N Anderson</td>
<td>S Black</td>
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<td>Rehabilitation and Social</td>
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<td>F Dennman</td>
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</table>

<table>
<thead>
<tr>
<th>Section</th>
<th>Chairman</th>
<th>Secretary</th>
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<tbody>
<tr>
<td>Perinatal</td>
<td>R Oates</td>
<td>R Cantwell</td>
</tr>
<tr>
<td>Eating Disorders</td>
<td>U Schmidt</td>
<td>D Morgan</td>
</tr>
</tbody>
</table>

## Elected Officers
- R P Arnold
- S Bhaumik
- S E Bonnar
- A M Boyle
- R Cantwell
- Professor S Curran
- F M C Denman
- Dr S Edwards
- Professor A E Farmer
- M P O’Farghail
- P V Gill
- Professor A S Hale
- Professor J Hayden
- Professor R J M W Howard
- B W Jacobs
- S A Joseph
- R MacPherson
- A Michael
- S M Miller
- T Morris
- E J Mounty
- Professor K C Murphy
- R Rao Nippani
- C E Oakley
- J M Parrott
- D G Patterson
- J E Pugh
- P H Robinson
- M Staines
The Royal College of Psychiatrists is grateful to the following organisations for their support of College research projects and academic activities during the past year:

- The Charitable Monies Allocation Committee of St Andrew’s Hospital, Northampton
- Big Lottery Fund
- Department of Health
- Gatsby Foundation
- Health Foundation
- Healthcare Commission
- National Institute for Health and Clinical Excellence

The College also thanks the many members, non-members and organisations that have given to College campaigns and appeals, and our advertisers for their continued business.

College reports are available from Booksales, tel: +44 (0)20 7235 2351 ext.146, and may be downloaded free of charge from the College website http://www.rcpsych.ac.uk
No health without mental health