


Date	01 June 2026	
Report title	Registrar's report to AGM	
Report author:	Professor Owen Bowden-Jones, Registrar	
Executive summary	An executive summary of work carried out since the last AGM	
Purpose (select one)	For Information	
Recommendation		
Link to College strategy	Addressing the Treatment Gap	
Resource implications	N/A	
Report history	N/A	
Next steps/timeline	N/A	
Appendices	N/A	

1. Public Affairs and Stakeholder Engagement

The College maintained a high level of engagement with Parliamentarians, Government departments, and external stakeholders.

Activity spanned regular meetings with MPs, Peers, Ministers and officials; participation in APPGs; representation at party conferences; and engagement with Select Committees. The College's evidence was cited in parliamentary inquiries, including Community Mental Health Services, and used to inform broader policy debates.

The College contributed to the passage of the Mental Health Bill (now enacted), influencing debate on key issues including detention powers and implementation requirements. It also engaged on the Medical Training Prioritisation Act, ensuring workforce concerns were addressed.

Significant attention was given to the Assisted Dying / End of Life Bill, to ensure psychiatric perspectives on capacity, coercion and safeguards were embedded in legislative scrutiny and debate.

- **Early scrutiny and influence:**
During the Lords' Second Reading, the College provided detailed briefings and hosted an online session for Peers to highlight clinical concerns. Issues raised by the College—including safeguards, mental capacity and the role of mental illness—were widely referenced in parliamentary debate.
- **Select Committee engagement:**
Following the Bill's progression, a Lords Select Committee was convened to take oral evidence. The College continued to support scrutiny through written submissions and formal oral evidence from its Assisted Dying Lead, ensuring psychiatric expertise informed the legislative record.
- **Ongoing parliamentary engagement:**
The College maintained close engagement with Peers, sharing briefings and evidence transcripts, while senior parliamentarians drew on the College's work to clarify its position during Committee stage debates.
- **Strategic focus:**
The College's position has consistently emphasised:
 - The need for robust safeguards around mental capacity and vulnerability

- Risks relating to coercion, untreated mental illness and social pressures
- Clarification of the role of psychiatrists within any legislative framework
- A commitment to evidence-based, ethically robust policy development

Additional areas of focus have included Welfare Reform (including PIP proposals and Universal Credit changes), the Right Care Right Person policy, and ongoing engagement with Select Committees and Government departments. The College played an important role in influencing the withdrawal and review of proposed welfare changes affecting people with mental illness.

Following the King's Speech in May 2026 the College has engaged with MPs on the Health Bill (NHS Modernisation) and has met with the Bill Team in the DH&SC, the Chair of the Health and Social Care Select Committee, and MPs.

The College has also continued to support the All Party Parliamentary Group (APPG) for Mental Health, as part of the Co-Secretariat with Rethink Mental Illness by holding various all stakeholder events and roundtable discussions in Parliament.

The College has also continued to facilitate the 'Parliamentary Scholars' Scheme, with seven Resident Doctors currently on placements with a range of Peers from across various parties/groups in the Lords. The scheme is led by Crossbench Peer, Baroness Hollins.

2. Policy & Publications

The College delivered a broad programme of policy development and publications, alongside strengthening its internal policy structures.

Key published outputs were:

- Psychedelics and their role in treating mental illness (PS02/25)
- Sodium valproate prescribing to men and women – risks to reproductive health (PS01/25)

- Gabapentinoids in psychiatric practice: balancing the risks and benefits (PS03/25)
- Timely access to Clozapine (PS01/26)
- Menopause and mental health Position Statement (PS02/26 the first of its kind for the College, launched in Parliament)

Further position statements and College Reports have continued to progress through the pipeline with the following closest to publication:

- Reflective Practice
- Prescribing of Antipsychotic medications to those with Intellectual Disability
- Repetitive Transcranial Magnetic Stimulation
- Provision of service to children and young people with Mental illness
- Job Planning

A significant review of the Policy and Public Affairs Committee (PPAC) has taken place including a wide consultation of stakeholders from across the College structures and discussion at Council. The aim is to modernise the role of PPAC and improve effectiveness, reflecting growing policy demands. Council agreed for the Committee to change its terms of reference to have greater oversight of policy and public affairs work across the College, and to support more strategic and agile decision-making. The Committee is currently being re-constituted and will have a more streamlined membership.

New Associate Registrar roles in Digital Mental Health, Co-occurring Substance Use, and Higher Education Mental Health) have been appointed to encourage development across clinical, societal, and technological domains.

The College also submitted multiple consultation responses (e.g. NICE, DHSC, and other Government consultations), reinforcing its influence across a wide policy landscape.

Particular policy areas where a significant amount of work has been undertaken include:

Welfare Reforms - We have been engaging across a range of issues, the main ones being submitting evidence to the Milburn Review into young people not in education, employment or training (NEET), commented on proposed scope for Timms Review into PIP reform and engaged with DWP on their proposal to remove Universal Credit from those convicted of

serious offences who are detained in hospital settings because of mental illness. We have worked with the Forensic Faculty in particular on the latter in both opposing the change on principle but also coming up with mitigations, recognising the Government are likely to proceed with it

Right Care Right Person - We have continued to highlight the health aspects of RCRP that have not been considered adequately up to now. The HO and DHSC are now more aware of the need to look at the impact on mental health services and the individual in crisis rather than just reduction in police hours. We have identified an uptick in Coroners Preventing Future Deaths Reports mentioning RCRP as a factor and are using that as well to highlight the need for attention to be broader than just police hours

Bipolar - We held a successful roundtable at the College in February chaired by the President and attended by a range of experts, people with lived experience and senior staff from NHSE. We have agreed to develop a model pathway for NHSE so that they can include it in the Modern Service Framework, due to be published in Autumn this year.

The Associate Registrar for Policy Support, Dr Mayura Deshpande, has been involved with the following workstreams:

1. MHA 2025 – Dr Deshpande has supported the College leads, Prof Gareth Owen and Dr Richard Latham, working with colleagues in NHSE and DHSC to ensure that there is adequate psychiatric representation in the development of the MHA Code of Practice, work on which is expected to start imminently.
2. Benefits – there is an ongoing piece of work with the Department of Work and Pensions on the government’s proposal to stop Universal Credit to patients admitted to hospital after committing certain serious offences. The College is working to ensure that rehabilitation of patients is not compromised by this move.
3. European Committee for the Prevention of Torture and Inhuman or Degrading treatment or Punishment (CPT) – The College has met with the CPT during their recent visit to the UK and provided feedback on a range of issues including seclusion and long term segregation, difficulty with access to inpatient beds, and delays in transfer from prison to hospital.
4. Police – mental health interface – we are about to start a multi-pronged project aimed at addressing issues at the interface of mental health and policing, including undue criminalisation of people who present in mental health crises, sharing of information, Right Care Right Person, lack of police

and Crown Prosecution Service action when people in mental health services assault staff in mental health services or have committed serious offences.

5. PPAC Editorial Board – a number of documents are proceeding through the development, finalisation and publication process. These include position statements and College reports.

3. Workforce

Workforce remained a central focus, combining operational improvements with ongoing systemic challenges.

The 2025 Workforce Census highlighted persistent shortages, with around one in seven consultant posts unfilled across several nations, and higher “true vacancy” rates when non-substantive roles are included.

The SAS workforce strategy continued to expand, with strengthened engagement through the SAS tutor network, newsletters, national conferences, and development resources such as Startwell and Staywell.

Operational challenges in job description approvals led to the introduction of an emergency AI-supported process (Copilot-assisted) to improve turnaround times and reduce backlogs. This approach has since progressed into a pilot for a longer-term system.

The College also maintained active engagement with national workforce planning, including contributions to the NHS workforce plan and parliamentary discussions on recruitment and retention.

The CR207 workforce guidance update progressed to final stages, with publication expected in early 2026.

Job Descriptions

Processing Job Descriptions has been challenging over the last year. Emergency procedures were brought in during September 2025 and the use of copilot. This has helped to speed up the process and clear the backlog of job descriptions that was building up.

Feedback from Medical Directors has highlighted several areas where improvements can be made including

- Updating FAQs on website

- Allowing NHS Trusts and health boards to use copilot prior to submitting to the job description portal
- Providing feedback on job descriptions that are now with trusts for amendments
- Integrating the use of AI to the process more effectively

These areas are now all being addressed and a pilot of regional work for Regional Advisors (RA) and Regional Specialty Representatives (RSRs) is also underway. It is hoped that through this pilot the College can also support shared learning, address challenges with job descriptions quickly and reallocate job descriptions to RAs and RSRs more smoothly.

Total JDs in 2026 to date

Total JDs Submitted Eng/Wales/NI	With RSR	With RA	With Trust	Approved	Query/duplicate/withdraw
315	55	58	65	136	1

4. Wellbeing

The College continued to prioritise member wellbeing and retention through a range of services and strategic initiatives.

The Psychiatrists' Support Service remained a key offer, providing confidential peer support, with steady demand and ongoing recruitment to expand capacity and representation across groups, including SAS doctors.

The Wellbeing Committee progressed several major workstreams, including:

- Development of a College-wide Wellbeing Position Statement
- Implementation of the Retention Charter (developed by presidential lead Ananta Dave)
- Creation of practical tools such as the "10 Wellbeing Steps"

Targeted programmes advanced in key areas such as:

- Preventing violence and aggression against psychiatrists (survey and publication pipeline)
- Reflective practice guidance
- Support for psychiatrists affected by patient suicide

New and continuing initiatives, including peer support networks and training events (e.g. supervising doctors through inquests), further strengthened support for members.

Work to improve wellbeing and retention is progressing across multiple areas. The Associate Registrars for Wellbeing, Samir Shah and Saadia Muzaffar, have co-authored and resubmitted a position statement on the *Wellbeing of Psychiatrists*, supported by an evidence base and focused on staff wellbeing as a key element of retention strategies. They are also contributing to wider academic and professional work, including a book chapter on wellbeing for trainees and medical students (co-authored with Ananta Dave), and participation in the ICC session '*Beyond burnout: rethinking psychiatrists' wellbeing through creativity, neuroscience and system design*'. A programme of webinars on wellbeing topics is being developed for the coming year, alongside close liaison with mentoring and coaching initiatives within the College.

Significant workstreams are underway to address specific challenges facing trainees, including the development of guidelines on violence and aggression, supported by findings from a major survey of nearly 1,000 psychiatrists. Two academic papers based on this survey are in development, with statistical analysis nearing completion and thematic analysis already undertaken (April 2026). Additional workstreams include inquest support for trainees (in progress) and ongoing consultant advocacy work within HIOW Trust. Wellbeing champions have largely been recruited and are exploring a proposal for a podcast, complemented by contributions to the Thrive carers remit podcast. A wellbeing conference for all members is being planned at the College in March with support from the wellbeing committee, building on wider event activity in development for the coming year.

5. Coaching and Mentoring

Associate Registrar for Coaching and Mentoring, Jeya Balakrishna, has worked on initiatives in College including over 25 talks in 15 months to NHS and independent sector providers, consultant and resident group meetings, and Faculty conferences.

We now deliver talks and workshops through an experienced and diverse Delivery Team of eight consultants and two residents, and are at our third successive Congress delivering masterclasses, increasing our presence on the programme from 2 to 3 days. We are developing reflective practice

events to be delivered at Prescot St in the first instance, and considering accredited skillset training.

6. Public Mental Health

Since June 2025, the Public Mental Health Implementation Centre (PMHIC) has continued to progress a focused programme of work spanning research, policy influence, collaboration, education and knowledge exchange.

A significant output has been the publication of *Physical Activity for People Using Mental Health Services: A Framework for Action in Wales*, commissioned by the Dyfodol Programme and delivered in partnership with the National Collaborating Centre for Mental Health, RCPsych Wales and the NHS Wales Joint Commissioning Committee. The framework sets out a practical, evidence-informed approach to embedding person-centred physical activity within mental health services across Wales. This is the third of four reports commissioned and funded by the Senedd (please see [Reports by the Public Mental Health Implementation Centre](#)).

The Centre has continued to support the College's external influencing role, contributing to a number of government consultations and parliamentary inquiries, including those on mental health spending, obesity and children and young people's experiences of the online environment. In relation to the development of the UK Government's new Mental Health Strategy for England, the Centre will work across the College to highlight evidence and challenge both the treatment and implementation gaps. The Centre also supports colleagues across the three devolved nations in advocating for prevention and public mental health within their governments' strategies.

Research activity has remained aligned to priorities of prevention and addressing inequalities. This has included a systematic review and meta-analysis of interventions to improve school attendance and work on an Experience-based Investigation and Co-design of Psychosis Centred Integrated Care Services for Ethnically Diverse People with Multimorbidity. In parallel, the Centre is contributing to a forthcoming publication on prevention in public mental health, covering areas such as stigma, theory of change and youth mental health.

The PMHIC has sustained active engagement in collaborative research initiatives and partnerships, including supporting proposals in areas such as net zero healthcare. The Centre has contributed to a successful proposal

on integrated systems for children and young people's mental health and emotional wellbeing, which secured funding from the Children and Young People's Innovation Lab. The Centre will also contribute to activity within the NIHR Applied Research Collaboration.

Knowledge exchange has continued through the Public Mental Health Learning Community, which brings together clinicians, researchers, policymakers and experts by experience. Regular workshops and learning sets have provided a structured forum for sharing practice, exploring emerging challenges and facilitating peer learning. The Centre runs ten free to join sessions a year that highlight the best projects across public health, public mental health and other key interventions (please see [Public Mental Health \(PMH\) Learning Community](#)).

The Centre has maintained its training and leadership offer, including delivery of the third cohort of the Public Mental Health Leadership Certification course, developed with the eLearning Hub and Events Team. Feedback from the 2025 cohort has been positive and options for further development of the programme are under consideration (please see sign up link: [The Public Mental Health Leadership Certification course](#)).

The PMHIC blog series has remained an important dissemination channel, amplifying the perspectives of practitioners, experts by experience and public health experts. Content has focused on key public mental health priorities, particularly the intersection of physical and mental health and wider health inequalities and has supported the dissemination of Centre outputs, including practical resources such as the Health Inequalities Briefing Pack.

In terms of strategic oversight, the Centre continues to benefit from a well-established advisory board and has welcomed additional members over the year to further complement existing expertise across epidemiology, behavioural science, population health, prevention, inequalities, healthy ageing, system leadership and lived experience.

The Centre will continue to work with many individuals and institutions inside and outside RCPsych to collate and promote the best evidence for preventative interventions.

7. Digital

Digital mental health emerged as a growing strategic priority.

Paul Bradley and Asif Bachlani were appointed as the College's first co-leads for Digital (Associate Registrars) in November 2026. Since then, they have established a Digital Roundtable, chaired by Owen, to define a clear five-year vision for the College's digital strategy. This work is centred on four priority areas: workforce training and capability, digital transformation and clinical service design, organisational digital maturity, and the safe and effective use of artificial intelligence.

Over the past eight months, Paul and Asif have made significant contributions at a national level. They have supported the MHRA Commission on the regulation of AI in healthcare and are working closely with NHS England to develop guidance on the use of [Ambient Voice Technology](#). They continue to represent the College across key strategic forums, including the NHS England Referrals and Appointments Programme Board, the NHSE Frontline Productivity Stakeholder Reference Group, and the Professional Record Standards Body Advisory Board. In addition, they have been actively involved in shaping the digital components of the Modern Service Framework for Severe Mental Illness, contributing to both virtual and in-person workshops.

Workforce development has been a central focus. They participated in the inaugural [RCPsych Midlands Workforce, Population Health and Training Event](#) in January 2026 and delivered a Digital and Data Literacy Skills Training Programme at Derbyshire Mental Health Trust in March 2026. They have also presented on digital transformation at a range of conferences, including the Essex Partnership Trust Digital Conference, the National Resident Doctors' Conference, and the RCPsych Medical Directors' Conference.

Together, this work reflects a strong and growing leadership role in advancing the College's digital agenda, supporting both national policy development and practical implementation across services.

8. Co-occurring Substance Use and Mental Health (CoSUM)

Activity in this area has been strengthened through new leadership and emerging strategic direction.

Associate Registrar for CoSUM, Dr Emily Finch, has spent the past year promoting the CoSUM report recommendations across a range of College forums and conferences, including in Northern Ireland. This has highlighted how complex and inconsistent services for CoSUM are across the four nations.

Regular meetings have been established with key stakeholders, including DHSC, the NHS Addictions Provider Alliance (APA), and Progress (the national co-occurring network), to map existing work, identify priorities for collaboration, and determine where the College can have the greatest impact. We will continue to contribute to the development of proposed national training for mental health staff.

A workshop at the RCPsych Addictions Conference reinforced the need to focus on patients with complex needs and on general adult psychiatrists.

Internal work is ongoing, including scoping CCQI input and ensuring the CoSUM agenda is central to the new addictions credential curriculum.

Our first steering group meeting will take place in July to review our work plan and objectives.