

RCPsych Annual General Meeting 2022

Report of the Dean



INTRODUCTION

It has been a privilege to serve as your Dean since June 2021. Personally, I have found it an energising experience largely fuelled by the humbling awareness of the humongous amount of work being done for the College by colleagues across the country. I want to start my report by thanking my indefatigable team of Associate Deans, Specialist Advisers and staff members of the College who beaver away in the background. The success of the Education and Training Team is down to their persistent efforts.

Dr Neeraj Berry- Associate Dean for Equivalence

Dr Regi Alexander – Associate Dean for Conferences and Advanced Learning

Dr John Russell – Associate Dean for Curricula.

Dr Israel Adebekun – Associate Dean for Trainee Support

Dr Charlotte Wilson-Jones - Associate Dean for Undergraduate Psychiatry

Prof Vivienne Curtis – Associate Dean for Academic Psychiatry

Prof Helen Bruce – Specialist Advisor for Credentialling

Dr Debasis Das – Quality Assurance Committee

Dr Paul Emmerson – Portfolio Online Committee

Prof Nandini Chakraborty – National Recruitment Board

Dr Ellen Wilkinson – Workforce Committee

Dr Arty Das – Foundation National Working Group

Dr Fabida Aria – MTI Scheme

Dr Kate Lovett – Presidential Lead for Recruitment

Prof Mohammed Al-Uzri – Presidential Lead for International Affairs

Dr Rosemary Gordon – Chair for PTC

Dr Ian Hall – Chief Examiner

Dr Abdul Raouf – CALC Lead for Member Training

Dean's Key Priorities:

My overarching vision is to explicitly link the Royal College of Psychiatrists' education and training offer with patient outcomes. I intend to translate this idea to action through the following five Key Priorities.

1. Address health inequalities through education and training

The best measure of our education and training offer should be based on how it improves outcomes for the sections of our population that are left behind. We have seen health inequalities for many of our patients persist for decades. Poverty, co-morbid conditions such as substance misuse and chronic physical health conditions are all contributors to these inequalities. Ethnicity, gender and other protected characteristics can add yet another layer of inequity. I believe that understanding and addressing the factors that cause and perpetuate these inequalities needs to be a part of our core education and training offer. Our new curricula now include a set of new key capabilities that will help our workforce acquire **public mental health** and **person-centred care skills** to narrow the health inequality gap.

a. I have secured funding for a Health Inequalities Fellow and for Supervisor time to supervise the Fellow. The job Description for Health Education England-funded Fellow in Health Inequalities has been agreed and the post will be advertised soon.

b. Our seven [new curricula](#) pilots have commenced and full implementation will start in August 2022.

2. Making training personally/professionally meaningful and flexible

Learners have varying needs based on their personal and professional circumstances. It is vital that our training offer creates an alignment between what our learners need and what our patients need. I have commenced the process of mapping all our educational content and to launch training courses that will upskill the workforce in areas where there is a clinical need.

a. I have launched the first RCPsych Certificate Course on Autism, Developmental Disorders and the Criminal Justice System. This course is almost fully subscribed.

b. Scoping exercise for our International Diploma offer has been completed and I am hoping to provide details of our first ever Diploma in early 2023. In conjunction with the Public Mental Health Implementation Centre, I also hope to launch a **Certificate course in Public Mental Health in 2023**.

- c. Centre for Advanced Learning and Conferences has had another busy and successful year. International Congress, 2022 has had record number of registrations and this follows our full online Conference in 2021, which had >3300 registered delegates and received overwhelmingly positive feedback. The College webinar series remains very popular. We had 52 webinars last year with >25000 registered attendees.

3. Strengthen identity of Psychiatrists as Academic Clinicians

- a. It is estimated that translation of academic evidence to clinical practice can take as long as 15-20 years. It is vital that each of us considers narrowing the evidence-practice gap as an integral part of our working life. With this aim in mind, I have introduced **Dean's Grand Rounds**.

Co-hosted by a Faculty and a Division/Devolved Nation, the Grand Rounds will feature *four key elements*:

- i) Lived Experience narrative
- ii) Academic Evidence
- iii) Wider Population/Public health level impact
- iv) Quality Improvement project to narrow the gap between evidence and practice.

The first Grand Rounds, co-hosted by the Addictions Faculty and the West Midlands Division, held on 16th June attracted over 700 delegates. So far, we have five more confirmed Grand Rounds pairs between Divisions/Nations and Faculties.

- b. Being an academic clinician is a serious endeavour but learning can (and some may argue should) be fun. To showcase the diverse and versatile science that Psychiatry is, I have launched [RCPsych MindMasters](#), our new InterNation/Inter-Division Annual Psychiatry Quiz. Featuring 12 teams, the live heats to be held on **21 and 22 June 2022** at the RCPsych International Congress should be a celebration of the richness of Psychiatry as an academic subject. The finals will be held at Prescott Street on 28th November 2022.
- c. The MRCPsych is a much coveted honour largely as it is also a measure of our academic rigour. As part of the **Assessment Strategy Review**, our core curriculum has been mapped against our assessment tools and this will enhance our assurance of the capabilities we expect our trainees to acquire through their training. While the digitisation of the exams has been a successful endeavour, the comprehensive review will help us decide whether continuing with the digital CASC exam is the right option or not. The review will

also look at ways of optimising Work Place Based Assessments and will feature strategies to address Differential Attainment.

- d. The digital CASC completion rate remains very high at 99% in the January 2022 cohort. The growth in written exam candidate numbers also looks set to continue in 2022. We have had a significant expansion to our Examiner numbers after a successful recruitment drive.
- e. RCPsych has now formally partnered with NIHR on its Associate PI scheme opening up more academic opportunities for our workforce.

4. Workforce: Recruitment, Retention, Well-being

- a. Recruitment remains strong and we have developed a strong case for continued increase in training numbers at both core and higher trainee levels. Numbers remain embargoed at the time of writing this but I can assure that the overall recruitment figures are extremely pleasing at core training level though we have much work to do for higher training.
- b. Our new Eating Disorders credential was oversubscribed seven-fold. Credential training for 30 colleagues will commence later this year.
- c. Nine new run-through training posts in Intellectual disability have all been filled.
- d. The RCPsych Medical Training Initiative (MTI) scheme is in its eighth year and received 117 applications from doctors hoping to start placements in August 2022. Doctors applied from 18 different countries with a range of experience in Psychiatry. Applications from Employing Bodies are still being received and the MTI team have so far confirmed 32 posts.
- e. Applications for the 2022 cohort of Psychiatry Foundation Fellowships have closed and the 123 applications have been marked and quality assured and the UKFPO is in the process of offering these posts.
- f. A revised edition of the Guide to Psychiatry in the Foundation Programme has been drafted and approved for publication shortly.
- g. International Medical Graduates (IMGs) remain a large part of our workforce. I am proud to share the fabulous [guide](#) for IMGs produced by the hard work of The Psychiatric Trainees' Committee working in conjunction with the Trainees' Support Committee and with the MTI (Medical Training Initiative) team.

5. Improve internal processes and engagement with members, learners and educators

- a. It is vital that as a College we engage with Schools of Psychiatry and also with Local education providers such as Trusts and Health Boards. I have therefore launched a network of Directors of Medical Education

- Drs Roshelle Ramkisson and Dr Jeremy Mudunkotuwe have been appointed as co-Chairs of this network.

- b.** While we have Specialty Advisory Committee (SAC) Chairs for each of the higher training specialties and some sub-specialties, we have not had a SAC Chair to oversee the core curriculum. I have now created a new post of Core (Specialty) Advisory Committee Chair to oversee core training across the UK. The post-holder will report to the Associate Dean for Curricula and will provide liaison with Core Training TPDs and with MRCPsych Course organisers.
- c.** Substance misuse comorbidity is extremely common and yet we have seen a decline in Addictions services and training in Addictions has been adversely impacted. The Addictions Steering Group, which created the report [Training in Addiction Psychiatry: Current Status and Future Prospects](#) is transitioning to a Specialist Advisory Committee and will oversee what I hope will be a significant expansion in training opportunities in Addictions.

It is an absolute pleasure and a huge honour for me to serve you as your Dean. I am immensely grateful for your support and look forward to working with you over the coming years.

Professor Subodh Dave, Dean

June 2022