**AFPSIG Exec Meeting 15.6.18**

**Attendees**

***Chair*** – Heidi Hales

***In person –***

Ollie White – Forensic link

Nick Hindley – FCAMHS rep

Peter Misch – medico legal

David Kingsley –treasurer, C&A link

Phil Anderson – Northern Ireland rep

***Dial in –***

Enys Delmage – international rep

Richard Church – EFCAP & web rep

Alixe Lewis – prison rep

Aileen Blower – co-Scottish rep

**1 - Introduction from Paul Rees – Chief Executive RCPsych**

Started about 6months ago and visiting Faculty, Division and SIGs to share Vision.

Vision – 3 key areas

1 - Improve membership experience

2 – More campaigning approach and engagement with stakeholders

3 – Employee engagement strategy

Developed our college values - CIRCLE

Courage, Innovation, Respect, Collaboration, Learning, Excellence

AFPSIG exec feedback the needs of Adolescent Forensic – that

1 - *we work closely with and support colleagues from other disciplines in forensic adolescent teams but it appears that the unique skill set  and expertise of psychiatrists can be under-recognized. This can result in substitution of psychiatric time with that of other less expensive disciplines with a failure to understand how this reduces the overall expertise and competence of the team. Support is needed to emphasize the important role of psychiatrists in forensic adolescent work*

2 – that our sub-speciality is small and psychiatrists can often be isolated

3 – the need for support with increasing dual training in Adolescent Forensic Psychiatry, especially with the expansion of FCAMHS – which lead to a long discussion. Three new dual STs appointed this year and a few in post - but notable that no one knows where all the schemes are and difficult to develop new ones.

We also noted that it would be helpful to have editing rights to the AFPSIG webpage so that we can keep it updated.

**2 - Review of this year**

***2a updates from everyone in their exec roles***

*Alixe Lewis – child in secure care update* – SECURE STAIRS is the major workstream. Everything has been scoped and is being implemented, perhaps slower than planned but certainly moving apace in Secure Children’s Homes. Developing children and adolescent informatics group, reviewing how CHAT is going into HJIP – hoping that this will generate the ongoing data needed about children in secure care. BEH have contract to provide training for YJLD across London, for workers and courts. Alixe is developing a programme for this. There is also a review of young people in CSU – commissioned by NHSE – to develop a set of principles for care of young people.

*Nick Hindley – FCAMHS* – Providers for 13 areas in England for FCAMHS have been appointed. London has been the last area to go live. Recruitment has been easier than anticipated. Evaluation process has been allocated to Anna Freud centre.

*Ollie White* – *Forensic rep* – Ongoing liaison role informing adult forensic faculty of our work. Ensuring adolescent forensic psychiatry is considered within consultation work. Ollie is also involved in the forensic faculty work looking at the Mental Health Act.

*David Kingsley – C&A Rep* – As above – liaison with C&A colleagues and involvement in the C&A faculty response about the Mental Health Act review. AFPSIG have been asked to lead for the RCPsych on the review of the HealthCare Standards for Children and Young People in Secure (noted below). David has been discussing dual training with the CAPSAC chair.

*Phil Anderson* *- Northern Ireland* – He took up post as adolescent forensic in Northern Ireland – with inreach into juvenile justice and in future may have a role in welfare secure. There are no secure hospital beds. Noted that there is thinking of the Capacity Act He has developed links across with England and Scotland in terms of peer support.

*Peter Misch – MedicoLegal* – Little to add. More things seem to be coming under terrorism charges.

*Richard Church – EFCAP* – Richard attended a board meeting last year. We agreed to contribute £500 yearly for 3 years and then agreed to continue (as the UK group that is linked to EFCAP). However, it was noted that the recent EFCAP document said that the UK was developing a group. It also noted that Nick was our link, though Richard is now the link. Heidi is attending the board meeting in Venice EFCAP and will try to raise this. Last year they discussed joining EFCAP and SCAP (child and adolescent) but we agreed we would prefer the EFCAP to remain stand alone.

*Website* – Discussed with Paul Rees. We have asked for rights to be able to change things. Exec roles were discussed.

***2b consultations***

1 - Shared statement on banning solitary confinement - shared with Royal College of Psychiatrists, BMA and Royal College of Paediatrics and Child Health. We presented this in parliament and have done a BBC interview for it. Prior to agreeing to this – the Exec were asked their opinion and the RCPsych ethics committee were involved. The joint statement was linked to a BMA ethical document which not all the exec agreed with. The joint statement led to a debate in Parliament.

2 - Human Rights SubCommittee (Government) on restraint and solitary confinement. We had much discussion, especially about restraint practice. The AFPSIG exec came to a consensus and submitted a response.

3 - Renewal of Healthcare Standards – request from C&A faculty for AFPSIG to be involved / named in RCPsych to contribute to this. This has been commissioned by Caroline Twitchett. C&A currently linking with David Kingsley and there is a suggestion of a meeting on 20 & 22 June, which seems quite soon. Nick Hindley was heavily involved with working on the initial standards. On discussion we noted it would be useful to have someone involved who is currently working in a secure setting. Abdullah Kraam was suggested as the lead consultant in HMYOI Wetherby. ***HH to email Abdullah and Tina to ask them.***

We had discussion about how to respond to consultations. In order to be transparent and inclusive it was agreed that when a consultation comes in we email everyone on Exec to ask for input. Hopefully those who are expert in the field or interested will then be involved.

***2c note delayed annual day conference, so none over the last 12 months***

We noted that we were unable to find a room available when our speakers were available and so we were unable to have our conference

***2d clarify finances - if not updated in exec role by David***

The finances are healthy and can be used to support the planning of our conference this year and we can continue to pay £500 to EFCAP.

**3 - review of exec roles - who does what and what spaces there are**

Welcome to Phil Anderson as Northern Ireland rep and Paul Monks as Indep Sector rep.

Thanks to Cesar - who has retired and stepped down.  Thanks to David who has stepped into C&A exec rep role.

Congratulations to Suzanne who is now a consultant and thank you for all your work. We need a new adolescent forensic trainee rep – first of all we need to identify all the dual trainees and open it up to them to identify who they would like to be their rep. We would also like Suzanne to remain involved if possible.

We thought about the Scottish reps and currently have 3 people named for this. HH to ask the Scottish group (Laxmi, Waleed, Aileen) about who will be the one Scottish Rep.

**4 - AOB**

There was a discussion on welfare secure and the needs of boys who are 13-16years who are violent not being accepted, sometimes due to concerns about risk to females or because of concerns about violent incidents. Therefore, though there are beds available, some young people are not getting placements. There is a sense that some Local Authority are saying that they do not fulfil criteria for secure, or there is a problem with access, or that people are being pushed into health. The group were encouraged to think about how we can consider how the needs of these young people can be met – and where. There is a sense of polarisation and reduction in multiagency working.

There was a discussion about medicolegal work with young people in gangs and role of PTSD / Adjustment reaction in some of the violence.

We had a discussion about medico legal experts and their qualifications / registration. We noted the approach from legal groups saying that it has been difficult to get experts who are developmentally informed. They have suggested developing a register – to train people to have a developmental perspective. We were uncomfortable with the idea of one or a few seminars to ‘train’ someone in child psychiatry. On discussion we agreed the need for psychiatric Child training for experts working in court. It was agreed for HH to reply to the group to note this discussion and offer to send an email around for AFPSIG members with the required experience to go on a register but unlikely that anyone would like to pay to be on such a register, and requesting a fee may mean that those who are most experienced do not register.

**5 - Plans for next year**

***5a Conference - Monday 19.11.18 'Stolen Childhood - Gangs & Grooming'***

Discussed having bursaries for medical students as well as trainees. We noted our current agreed speakers but need more. Peter is a member of EuroGang and attending their conference next week and can feedback what may be useful – and agreed to join the planning group.

***5b - to review / confirm ongoing link with EFCAP***

Agreed.

***5c - consultation group***

Discussion noted above. In future, consultations that come to us, the chair will email around to the exec to ask who can lead. It would be good if the exec rep for that area is able to lead on consultations in their area.

***5d - any other areas to work on***

AFPSIG to encourage the College to explore dual training for adolescent forensic psychiatry along with

AFPSIG to continue to note where young people’s needs are not being met and work towards clinical solutions and multiagency meeting.

**Next Meeting**

HH is suggesting – similar to this year – Friday 28th June 1-3pm.

Room booked