
Quality in Training (QIT) Report 2023

An overview of quality assurance in psychiatry training in
2023

June 2024

Foreword

We are pleased to submit the QIT Report for 2023. As you can see, the year has been full of change, challenges, and achievements.

Dr Debasis Das stepped down as Specialist Advisor for Quality Assurance in Training and I took on the role in Dec 2023. We thank Debasis for all his hard work in the role.

We summarise the outcomes of CCTs, ARCPs, and CESR-Equivalence applications for the year. The new curricula continue on the path to be embedded nationally and we give data on the take-up by trainees. The GMC expects all trainees to be on the new curricula by Aug 2024. The report summarises the first cycle of curricula implementation evaluation undertaken by the College via surveys to trainees and trainers. The response rates were relatively low. The report summarises the interesting feedback, which overall highlights the need for The College, trainees and trainers to work together in establishing more consistent communication and information sharing.

The College has started work on reviewing Formative Assessments within the portfolio online to make them more fit for purpose with inclusion of entrustability scales (entrustability of professional activities). These would give much more comprehensive information regarding progression. Similarly the portfolio online will also be reviewed. The QAC (quality assurance committee) has started work on bolstering the number of external advisors for ARCPs available from the College on request. This will also help in getting assurance regarding the quality of ARCP reviews across the training landscape.

The MRCPsych exams continue to be delivered digitally for the theory papers with an increase in the number of diets to 3, so helping candidates who have to re-sit exams due to the reason of technical issues. CASC had been held online since 2020 and was held again in-person for the first time since then in September 2023, with good support via digital marking. We thank Dr Ian Hall (Chief Examiner) for his work in this complex arena.

The College demonstrated its excellence in training delivery by successfully running the Eating Disorders Credential pilot across different medical specialties (including Paediatricians and GPs). The credential modules had good feedback.

We commend the work also done on the Liaison credential. The GMC has stopped supporting credentials (December 2023). However, the College has continued to explore setting up in-house credentials such as: NDD (neurodevelopmental disorders) credential with support from and backing of NHSE (due to the high need particularly in this area), and additionally discussions continue on the Neuropsychiatry, Addictions, and Military Psychiatry credentials.

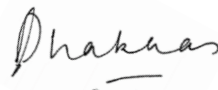
Further training excellence shown by the College was through the successful and popular CAP (child & adolescent psychiatry) run-through training pilot which started in England in 2018. After 5 years of the pilot (and annual reports to the GMC), the GMC granted full approval to CAP run-through training pathway to on a permanent basis. The success and popularity of this training pathway has meant that Scotland started the CAP run-through pilot in Aug 2023, with Wales due to start in Aug 2024. The LD (Psychiatry of Learning Disabilities) run-through pilot started in England in 2023. We commend all the training leads, College colleagues, trainees, and trainers involved in these innovative training pathways which have promoted the specialty in general and provided a wider range of training options to trainees.

The report highlights the work done by the College to support psychiatrists through the PSS (psychiatrists' support service) and also the College's Differential Attainment strategy.

We submit and commend to you, fellow members of RCPsych, the QIT report for 2023.



Professor Subodh Dave
Dean, Royal College of Psychiatrists



Dr Suyog Dhakras
Specialist Advisor for Quality Assurance,
Royal College of Psychiatrists

Summary

The following report highlights our work in education and training in 2023, and ongoing activities supporting quality assurance of education and training standards.

Key highlights from the report include:

- Overview of specialty training, including summaries of data on Certificates of Eligibility for Specialist Registration (CESR) and Certificates of Completion of Training (CCTs).
- Overview of our curricula implementation feedback survey.
- Overview of the Formative Assessment work.
- Summary of ongoing work around externality and improvements in quality oversight.
- Workforce initiatives and the Psychiatrists' Support Service (PSS).
- MRCPsych Examination and Differential Attainment.

Data timescales covered are indicated throughout the report. The majority of data is reported from October 2022 to October 2023.

Specialty Training

Certificate of Completion of Training (CCT)

A summary of CCTs awarded in 2023 (August 2022 – August 2023) is provided below per specialty. Figures include those awarded CCTs in dual specialties:

Psychiatric Specialty	Number of CCTs awarded
Child & Adolescent Psychiatry	53
Forensic Psychiatry	35
General (Adult) Psychiatry	80
Medical Psychotherapy	11
Old Age Psychiatry	47
Psychiatry of Learning (Intellectual) Disability	14
Total	280

ARCP Outcomes for trainees

A summary of data for overarching numbers of ARCP outcomes and type can be seen below.

Data for 2022 includes data for the period **01/09/2021 to 31/08/2022**. Data for 2023 includes data for the period of **01/09/2022 to 31/08/2023**.

Outcome type	2022		2023	
	Number	Percent	Number	Percent
Outcome 1	2067	52.9%	2465	59%
Outcome 2	94	2.4%	126	3%
Outcome 3	232	5.9%	236	5.7%
Outcome 4	52	1.3%	56	1.3%
Outcome 5	411	10.5%	412	9.9%
Outcome 6	649	16.6%	465	11.1%
Outcome 7.1	7	0.2%	6	0.1%
Outcome 7.2	1	0%	0	0%
Outcome 7.3	0	0%	0	0%
Outcome 7.4	0	0%	0	0%
Outcome 8 (OOPC)	12	0.3%	35	0.8%
Outcome 8 (OOPE)	29	0.7%	26	0.6%
Outcome 8 (OOPR)	38	1.0%	29	0.7%
Outcome 9	0	0%	0	0%
Outcome 10.1	23	0.6%	4	0.1%
Outcome 10.2	20	0.5%	2	0.0%
No Outcome awarded	270	6.9%	314	7.5%
Total	3905		4176	

CESR and equivalence

The total number of CESR applications received/submitted by the College in 2023 is outlined below by speciality:

Specialty	Applications	Reviews
General (Adult) Psychiatry	14	2
Old Age Psychiatry	2	0
Forensic Psychiatry	0	0
Child & Adolescent Psychiatry	4	2
Psychiatry of Learning (Intellectual) Disability	0	0

Total:	20	4
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For failed applications in 2023:

The key areas outlined for failures were similar to previous years but in line with the decrease in recommendations, the ongoing areas of failure are significantly smaller. A summary of the key areas is outlined as follows:

- Clinical governance with regards to ILO11a.
- Research methodology and critical appraisal of research – ILOs 8a and 8b.
- Insufficient setting or age range experience as part of ILO1a.o
- Psychotherapy competencies within ILO5a.

GMC outcomes for CESR for 2023 are outlined below – *applications awaiting a GMC decision have not been included. (Inclusive of Applications and Reviews)*

Specialty	Success	Reject
Child & Adolescent Psychiatry	0	6
General (Adult) Psychiatry	6	8
Forensic Psychiatry	0	0
Old Age Psychiatry	2	0
Psychiatry of Learning (Intellectual) Disability	0	0

Academic Training

Academic work is split into the following two streams of work:

- Academic Strategy
- Academic SSAC

Academic Strategy

Dr Rohit Shankar was successfully recruited as the new Associate Dean for Academic Training in late 2023 and will be leading on the Academic Strategy work of the College. Academic Strategy meetings have been planned for 2023 and the group will begin to agree aims and objectives.

Academic SSAC

Dr Shankar will also Chair the Academic Sub-Specialty Advisory Committee (SSAC). Outcomes, aims and objectives from the initial Academic Strategy will be used to develop the agenda for the Academic SSAC.

Out of Programme Applications

A summary of out of programme applications received by College for 2023 is outlined below.

OOP Type	Total
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Research (OOPR)	10
Training (OOPT)	9
Experience (OOPE)	9
Career Break (OOPC)	27
Pause (OOPP)	3
Acting up as a consultant (AUC)	26
Total	84

Most applications recorded were for OOPC and AUC.

Trainees are not required to apply to the college for prospective approval for OOPP, and the gap analysis and sign-off will be done at local level.

Run-Through Training

CAMHS Run-Through Programme

The CAHMS Run-Through programme achieved GMC approval in July 2023. GMC have requested annual reports to monitor quality management of the programme.

In August 2023, the first cohort from the programme entered ST6. A summary of destination data per cohort is outlined below.

Destination information	Number
Moved to ST5 in Child & Adolescent Psychiatry	6
Moved to ST4 in Child & Adolescent Psychiatry	10
Moved to ST3 in Child & Adolescent Psychiatry	15
Moved to ST2 in Child & Adolescent Psychiatry	12
Moved to ST1 in Child & Adolescent Psychiatry	9
Left training	8
Unknown destination	2

ARCP outcome data across all cohorts throughout the programme is outlined below.

ARCP Outcome	2019	2020	2021	2022	2023
Outcome 1	10	22	31	32	33
Outcome 2	0	0	0	0	1
Outcome 3	0	0	0	3	3
Outcome 4	0	0	0	0	0
Outcome 5	1	1	4	1	0
Outcome 10.1 (Covid)	0	0	0	1	0
Outcome 6	0	0	3	4	3
Outcome 10.2 (Covid)	0	0	0	0	0

Not completed/no outcome	0	2	1	0	11
Total	11	25	37	41	51

Intellectual Disabilities (ID) Run-Through Programme

In August 2022 we secured approval for a pilot run through programme in Psychiatry of Learning Disability. The first cohort of nine trainees began their core training placements in August 2022, with a second cohort of 11 trainees starting in August 2023. Outcomes from the first cohort are as follows.

Destination information	Number
Moved to ST2 in Intellectual Disability Psychiatry	7
In ST1 in Intellectual Disability Psychiatry	1
Left training	1
Unknown destination	0

ARCP Outcome	2023
Outcome 1	7
Outcome 2	0
Outcome 3	0
Outcome 4	0
Outcome 5	0
Outcome 10.1 (Covid)	0
Outcome 6	0
Outcome 10.2 (Covid)	0
Not completed/no outcome	1
Total	8

Plans for future programmes

This year we plan to develop a run-through programme for Old Age Psychiatry, with the aim of offering posts for August 2025. This is subject to GMC approval of the pilot programmes.

Curricula

Curricula Implementation Evaluation

In August 2023, the College sent a survey to trainees and trainers to assess the experience of the new curricula.

Below is a snapshot of the statistics that featured in the report.

- 8 Trainers responded to the survey; Clinical Supervisors had the highest representation at 29%

- 110 Trainees responded to the survey, the highest response, at 33%, was ST5 Trainees.
- 73% of respondents were in a full-time training post.
- The Specialties with the highest responses were from General Adult and Old Age.
- Trainees from the Northeast and Yorkshire and the Northwest had the highest response rate.
- 76% of respondents transitioned to the new curricula in August 2022 with 7%, at the time of writing, yet to transition. The reasons shared for not transitioning included:
 - Having their CCT before August 2024
 - Poor TPD leadership
 - Unsure how to transition.
- When asked if they felt the Curricula Implementation was well communicated, 57% said No, 35% said yes and 8% selected 'other'.
- When asked what worked well, the responses included:
 - College Communication and support which included videos, an eLearning package, online drop-in sessions and an implementation hub on the website.
 - Good communication from TPDs (Training Programme Directors).
 - Improvement of the HLOs.
 - An 'exemplar' PsPDP (Placement-specific Personal Development Plan).
 - WPBAs (Workplace Based Assessments).
 - New curricula are relevant to clinical practice.
 - The Silver Guide.
- When asked what could be improved, the responses included:
 - Sessions delivered locally and regionally by the National Committee.
 - Portfolio Online.
 - Trainer knowledge.
 - Communication from both the College and Schools.
 - Clarity on what has changed.
 - The amount of mapping required.
 - Requirements of ARCP.
- When asked about the Curriculum Implementation Support from the College:
 - 43.5% described the Curricula Implementation Hub as 'Fair'.
 - 46.2% described the Curricula Drop ins sessions as 'Fair'.
 - 49.1% described the eLearning Course as 'Fair'.
 - 50% described the Training Videos as 'Fair'.
- Curriculum Implementation Support from the outside of the College:
 - 33.6% described local support as 'Fair'.
 - 32.1% described regional support as 'Poor'.
 - 40.2% described national support as 'Fair'.
- 42% of LTFT (Less Than Full Time) Trainees were able to understand the transition arrangements, with 21% 'somewhat' understanding.
- When asked about the Curricula documents and resources:

- 80.5% described the Psychiatry Silver Guide as either ‘Excellent’, ‘Good’ or ‘Fair’.
- 77.9% described the Curricula as ‘Excellent’, ‘Good’ or ‘Fair’.
- 55.1% described the PsPDP as ‘Poor’ or ‘Very Poor’.
- 77.1% described the ARCP guidance documents as ‘Excellent’, ‘Good’ or ‘Fair’.
- 79.7% described the ARCP decision aids as ‘Excellent’, ‘Good’ or ‘Fair’.
- 83.1% described the WPBAs as ‘Excellent’, ‘Good’ or ‘Fair’.
- 48.3% described the ILO v HLO guidance as ‘Poor’ or ‘Very Poor’.
- When asked about the Portfolio Online Experience:
 - 39% described conversations with their supervisors around their PsPDP as ‘Poor’ or ‘Very Poor’.
 - 50% described creating a PsPDP as ‘Poor’ or ‘Very Poor’.
 - 50% described creating activities within a PsPDP as ‘Poor’ or ‘Very Poor’.
 - 53.4% described mapping activities to the key capabilities within the PsPDP as ‘Poor’ or ‘Very Poor’.
 - 63.5% described their experience submitting and saving their PsPDP as ‘Excellent’, ‘Good’ or ‘Fair’.
 - 71.2% described the Portfolio Online support desk as ‘Excellent’, ‘Good’ or ‘Fair’.
 - 40% described Portfolio Online as ‘Poor’ or ‘Very Poor’, with a further 38% describing it as ‘Fair’.
- When asked how Portfolio Online could be improved, the responses included:
 - Remove the prompt for Trainers to grade every HLO when not necessary.
 - Remove repetition of comments.
 - Make the PsPDPs more user friendly.
 - Reduce the amount of time required to use.
 - Improve the mapping experience.
 - Simplify the process.

Transfer to the new Curricula

The GMC mandated that all trainees must have transitioned to the new Curriculum by **August 2024**. As of July 2023, the transition numbers were as follows;

Region	February 2022	August 2022	February 2023	August 2023
East of England	24	120	18	65
London	78	300	101	174
East Midlands	23	90	16	46
West Midlands	18	114	17	74
Northeast and Yorkshire	44	140	56	107
Northwest	50	143	34	108

Southeast	23	150	30	105
Southwest	32	84	19	50
Scotland North	7	28	6	19
Scotland Southeast	5	38	4	11
Scotland East	2	11	1	6
Scotland West	10	44	6	30
Wales	7	66	11	37
Northern Ireland	0	27	2	28
Totals	322	1355	321	860

This is a summary of trainee numbers per region who are yet to transition to the new curricula.

Region	As of July 2023
East of England	256
London	823
East Midlands	186
West Midlands	225
Northeast and Yorkshire	397
Northwest	350
Southeast	235
Southwest	290
Scotland North	60
Scotland Southeast	61
Scotland East	19
Scotland West	126
Wales	102
Northern Ireland	86
Totals	3216

Next steps

Now the College is a year into full implementation the next steps will be to:

- Continue to ensure transitioning trainees are knowledgeable of the August 2024 deadline and are informed of the changes between the old and new Curricula.
- The College are in the process of switching to a new developer to help improve the experience of Portfolio Online.
- The College will ensure that there is a clear process for amendments and communications of minor changes to the Silver Guide and other support documents linked with the curricula.
- Work has commenced reviewing the programme of formative assessments.

Recommendations

The College will look at working internally through Committees in the College and externally with key partners – HoS and TPDs – to get more comprehensive data on feedback regarding the curricula, ongoing implementation and support – especially in view of the changes to portfolio online and formative assessments.

The GMC have requested a follow up report due October 2024.

Portfolio online

Significant changes to the Portfolio were made regarding the Placement Specific PDP which was a major change following the implementation of the new curricula. This area of development has been successful following heightened communication, drop-in sessions, and a reflective implementation.

As this area of update has been a success, the Portfolio online team have been working on generic updates to reporting and user access. The Portfolio Online team have responded to all incoming queries, and the Portfolio Committee continues to meet quarterly for development.

Formative Assessment Working Group

The Formative Assessment Working Group was chaired by the Associate Dean for Assessment and attended by Subspecialty Advisory Committee Chairs (SSAC) and Specialty Advisory Committee Chairs (SAC), Specialist Advisors, and representatives from the Psychiatric Trainee Committee (PTC), and Exams Subcommittee (ESC). We also involved key staff from the College to ensure a wide range of perspectives from across education and training.

Proposed recommendations

The formative assessment working group reviewed a breadth of topics and innovations and have come to four broad recommendations. These have been grouped into two sub-sections, those requiring further development and piloting, and those that can be managed via implementation of a new Trainees' Portfolio. The first, requiring further development and piloting aim to:

1. Introduce Entrustable Professional Activities (EPA) as part of WPBAs (will involve piloting). This is in line with the key aim to make WPBAs directly relevant to patient care. Review other modules of EPAs and develop RCPsych model through short life Task and Finish Group.

2. Embed Formulation Skills throughout training, particularly in core training years with some additional training to be considered, scoped, and funded for Clinical Supervisors to support standardised assessment. It will be important to ensure that there are opportunities for a range of assessors (not just the CS/ES) to rate the trainee). This is in line with the ambition to encourage personalisation within training and allows assessment of synthesising skills.

The second sub-group will be managed via implementation of a new Trainees' Portfolio due to be launched in 2025 will:

3. Introduce feedback from patients and carers for trainees - as is the case with substantively employed colleagues. This is in line with our efforts to increase involvement of patients and carers in training.
4. Introduce guided supervision session relating to Caseload based discussion – this is in line with our efforts to train clinicians who understand prevention as well as intervention; and to ensure that learning from individual patient informs care provided to the wider community at population-level.
 - a. Changing the way in which WPBAs are assessed, moving away from a rating scale. To convene a task and finish group to assess the options and agree an alternative.
 - b. To support supervisors to use the full range of assessment and support trainees with constructive feedback throughout training.
 - c. In leadership and management, create an option in the DONC (Direct observation of non-clinical skills) to add caseload-based discussion as an additional option to ePortfolio.
 - d. Develop resources to help supervisors to support guided caseload discussions.

Next steps

Following ETC, the proposed recommendations will be circulated to key stakeholder groups for comment and consideration before the final paper and detailed proposed recommendations are brought to Council in April 2024.

Credentialing

Future of Credentials

In December 2023 the GMC Council took the decision to end the Credentialing project. The following was issued on their website;

We do not plan to develop any further GMC credentials but will continue to support and learn from the early adopters. The findings will support the career development of all doctors and help to improve flexibility in postgraduate medical education.

At the time of reporting, the College have pledged to look at models that will work for the Credentials that have either already been developed or are in development currently.

Credentials in 2023

Eating Disorders

Pilot

The pilot ended in October 2023. At the time of writing, 9 participants have obtained the Credential, with several portfolios still to be marked. The multi-professionals who participated in the pilot were not required to complete a portfolio and received certificates of attendance.

In October 2023, the participants were asked to provide feedback. Here is a snapshot of what was received;

93% will continue to work with eating disorder patients.

87% think the programme is effective in filling gaps in current eating disorder training.

96% found the programme impacted their skills and knowledge in training patients with ED in some way.

Written feedback:

- The ED credential pilot was the most enjoyable part of higher specialty training in CAMHS, it was a really worthwhile and rewarding professional experience.
- I'm glad for the opportunity and planning to share my thoughts with colleagues in higher training regional day to encourage into the ED credential.
- Would recommend it as there is no other similar formal ED training which focuses on developing the ED clinician.

Cohort 1

The first medics-only cohort commenced in September 2023. This cohort has participants from England, Wales, and Jersey.

CCQI are working with the Training and Workforce team to deliver a formative evaluation piece for the midway point of Cohort 1. The evaluation report is due by the end of Q2 2024.

Liaison

The GMC requested amendments to the GMC Approval Submission. The College must submit this by March 2024.

Credentials in development 2023

- Military
- Addictions
- Neuropsychiatry
- Neurodevelopmental

Quality Assurance Processes

Externality

The College continues to provide appointed external advisors (EAs) to ARCP panels and other quality visits where requested.

In 2023 we saw an increase in requests for EAs for ARCP panels. A summary of EA requests received for ARCP panels is outlined below.

Year	ARCPs with EAs allocated	Reports received
2021	5	1
2022	6	0
2023	11	2

It has been difficult to source EAs for panels. A change of tactic has slightly increased success in sourcing EAs but the pool of individuals available remains small. In addition, we are also aware that deaneries have started to utilise local arrangements to meet requirements outlined in the Gold Guide.

Improving Externality and Quality Standards

The College has identified issues within Externality and is taking steps towards improving this process. Recruitment of a new Specialist Advisor for Quality Assurance has been successful, and he will start his role in 2024. Plans have already been made to create a strategy to improve the quality assurance process,

including a meeting in January 2024 to discuss plans for the strategy and regular meetings throughout the year to develop ongoing work towards this. A programme will begin in 2024 to commence and improve training for EAs.

Some key points raised around current issues include:

- Difficulty sourcing College appointed EAs
- Concerns around the quality of the training provided to EAs
- Receipt of reports

Further work for 2024 will include expanding the pool of external advisors, increasing and improving training for new and existing external advisors. New initiatives include making it a requirement that each SAC member must make themselves available for at least 1 externality visit per annum.

Specialty Advisory Committees

Specialty Advisory Committees (SACs) play a vital role in overseeing and monitoring key issues within specialties. In psychiatry we have the following SACs:

- General Adult Psychiatry
- Old Age Psychiatry
- Child & Adolescent Psychiatry
- Forensic Psychiatry
- Psychiatry of Intellectual Disability
- Medical Psychotherapy

Since 2018, the SACs have predominantly focused on the curricula review programme, overseeing key issues within specialties on an ad-hoc basis. In 2023 we worked to reestablish the SAC Committees and recruit new chairs.

Key aspects of the SAC remit include:

- Curricula management
- Quality assurance in training (per specialty)
- Workforce and training issues
- Post and programme approvals (where applicable).
- Supporting the College's externality visits

In 2023, we have worked to further establish sub-specialty advisory committees (SSACs) in the following key areas:

- Academic Training in Psychiatry (sub-specialty)
- Addiction Psychiatry (sub-specialty)
- Liaison Psychiatry (sub-specialty)
- Rehabilitation Psychiatry (sub-specialty)
- Neuropsychiatry

In 2024 we plan to create SSACs for;

- Perinatal Psychiatry

- Eating Disorders

National Training Survey

Summary

The GMC publishes the National Training Survey (NTS) on an annual basis, the 2023 survey was completed by more than 70,000 trainees.

The survey questions are focused on the GMC standards for medical education and training which are organised around five themes:

- Learning environment and culture
- Educational governance and leadership
- Supporting learners
- Supporting educators
- Developing and implementing curricula and assessments

This year, the GMC introduced new, optional questions about discriminatory behaviours in the workplace. The questions explore the types of behaviours that trainees experience and how often they occur. They also look at how confident doctors feel about reporting and challenging discrimination from colleagues.

Psychiatry Trainees	Daily/ Weekly	Monthly	Less than once a month	Never
How often, if at all do you experience micro-aggressions, negative comments, or oppressive body languages from colleagues?	4%	4%	11%	80%
How often, if at all do you hear insults, stereotyping, or jokes in our presence on the grounds of a person's protected characteristics?	3%	4%	14%	79%

Trainees risk of burnout

Psychiatry Trainees	To a very high degree	To a high degree	Some what	To a low degree	To a very low degree
Is your work emotionally exhausting?	18.18%	31.95%	30.7%	12.23%	5.95%
Do you feel burnt out because of your work?	13.36%	15.13%	31.85%	24.18%	15.49%
Does your work frustrate you?	10.65%	19.71%	31.41%	23.08%	15.15%
	Always	Often	Some times	Seldom	Never

Do you feel worn out at the end of the working day?	11.33%	38.18%	33.69%	11.48%	5.326%
Are you exhausted in the morning at the thought of another day at work?	7.534%	21.18%	34%	20.93%	16.36%
Do you feel that every working hour is tiring for you?	3.285%	12.31%	26.45%	38.46%	19.48%
Do you have enough energy for family and friends during leisure time?	10.09%	36.35%	38.76%	13.05%	1.745%

The NTS Indicator, based on responses to the seven questions, measures overall risk of burnout. The proportion of trainees measured to be at high risk of burnout is at the highest level since the GMC started tracking this in 2018. 12% of trainers are measured to be at high risk of burnout – the same proportion as in 2022.

16% of Psychiatry Trainees reported to be at a high risk of burn out. This has increased by **3%** since 2022.

11% of Psychiatry Trainers reported to be at a high risk of burn out. This has increased by **1%** since 2022.

21% rated the intensity of workload as heavy/very heavy. This remains the same as 2022.

Trainers

Indicator	Score (average across psychiatry)	Outcome
Supportive Environment	70.28	Within IQR
Educational Governance	68.76	Within IQR
Professional Development	75.02	Within IQR
Appraisal	53.63	Within IQR
Support for Training	74.12	Within IQR
Time to Train	60.93	Within IQR
Rota Issues	62.41	Within IQR
Handover	66.16	Within IQR
Resources to Train	72.38	Within IQR

General Summary Report across psychiatry specialties

Scores are outlined via the *mean* performance indicator. The benchmark (BM) scores are outlined in the BM indicator column. Where a cell is highlighted in green, the score is above the BM indicator. Where the score is in red, it is below the BM indicator. Where there is no variation indicated, the cell is highlighted in grey.

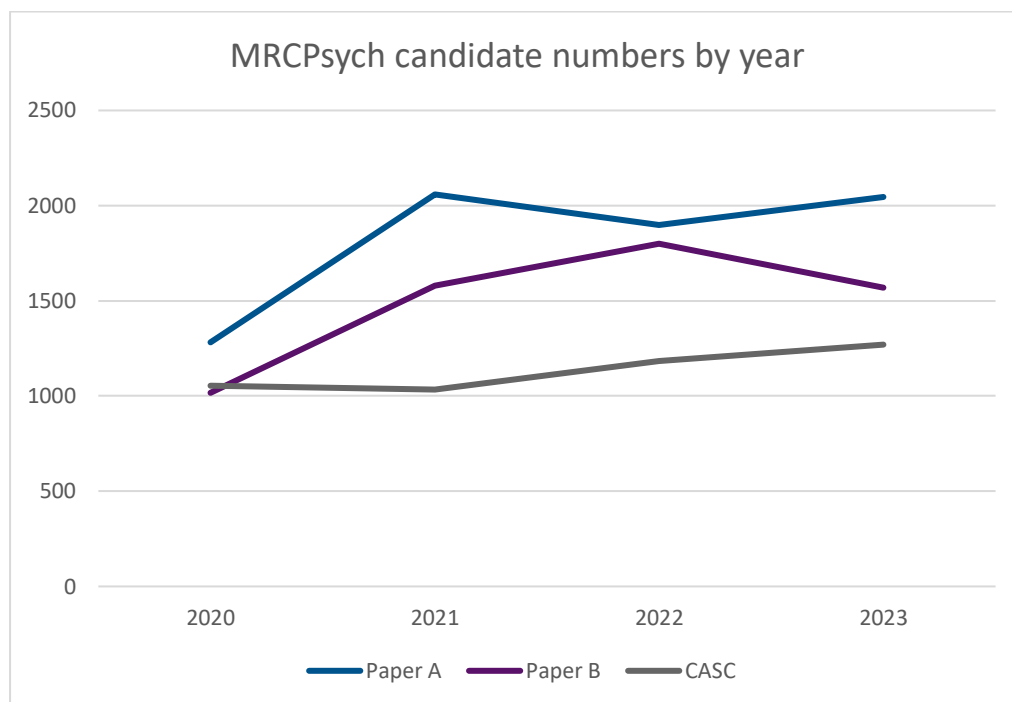
Indicator	BM Indicator (%)	General Adult (%)	Old Age (%)	Child & Adolescent (%)	Forensic (%)	Intellectual Disability (%)	Medical Psychotherapy (%)
Clinical Supervision	89.17	89.70	92.28	92.44	93.53	94.28	92.42
Clinical Supervision (OoHs)	86.57	85.28	86.80	88.92	88.43	86.88	83.65
Reporting systems	72.46	70.72	71.52	73.71	72.19	73.62	70.63
Workload	48.26	62.08	62.17	59.87	60.89	65.20	61.88
Teamwork	74.72	76.00	76.92	77.85	78.42	77.67	75.95
Handover	68.27	66.49	66.68	69.95	65.79	67.89	67.90
Supportive Environment	74.52	75.77	78.10	80.35	76.76	81.81	77.67
Induction	79.99	78.63	80.57	80.35	81.10	82.87	80.32
Adequate Experience	77.25	76.16	79.72	83.24	81.20	85.31	86.92
Educational Governance	71.04	72.60	73.51	75.59	73.72	76.11	72.07
Educational Supervision	84.83	83.46	83.50	83.69	84.59	83.84	82.23
Feedback	74.62	78.65	80.22	82.35	81.81	81.88	82.23
Local Teaching	70.81	78.77	79.12	77.22	76.70	82.51	82.62
Regional Teaching	65.26	67.45	65.28	75.02	65.25	71.41	68.32
Study Leave	63.40	64.82	68.47	70.87	71.93	73.23	81.05
Rota Design	56.85	67.10	67.82	71.27	71.84	71.32	73.60
Facilities	62.47	63.50	62.15	62.25	58.47	60.40	64.53
Overall Satisfaction	77.54	78.54	81.02	83.70	82.02	85.69	87.26

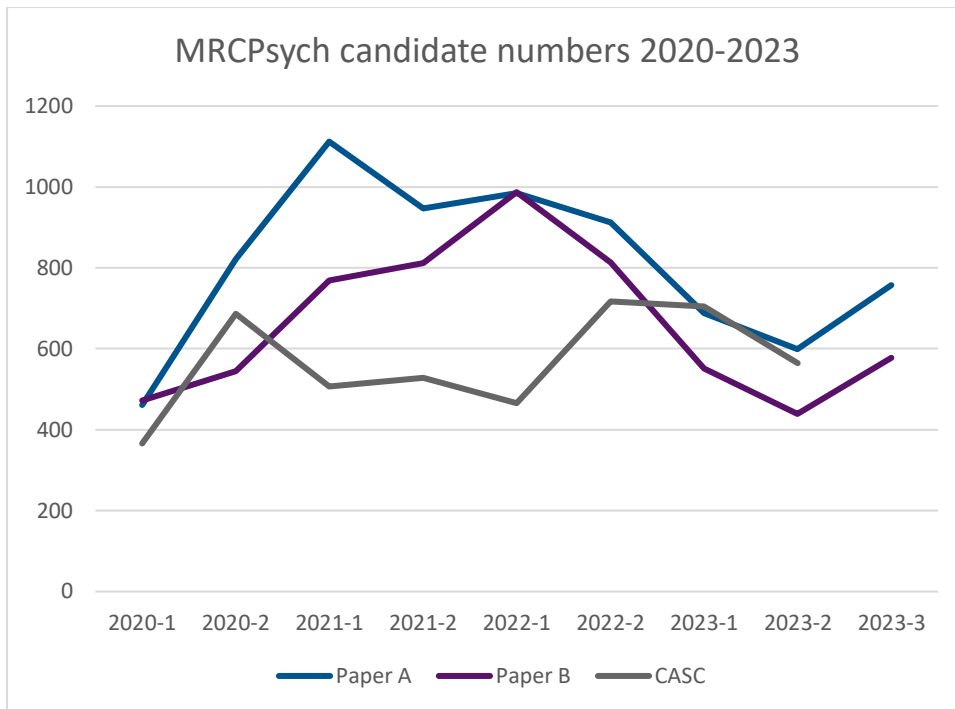
MRCPsych Examination

Paper A and Paper B

The digital delivery of the theory papers is now considered business as usual and the rapid increase in (overseas-based) candidate numbers seen in 2021 plateaued in 2022. The majority of candidates sat their exam in Pearson test centres which, whilst still susceptible to technical issues, is more reliable than remote testing via the OnVUE platform.

In 2023, the number of diets for Paper A and Paper B was increased to three per year, to improve flexibility for candidates on when they sit an exam and to decrease the time between diets. Resits for candidates who had technical issues sitting their exam have ceased with this three diet model. The implementation of three diets also saw a decrease to the number of candidates sitting each diet, overall numbers sitting Paper A increased slightly and Paper B decreased.





CASC

The 2023-1 diet of the CASC was oversubscribed so an additional week of examining was delivered in May 2023. Candidates who had applied for ST4 recruitment were prioritised for January 2023. 2023-1 was the last diet of the online CASC, following the College’s Assessment Strategy Review (ASR) recommendation to return to an in-person CASC. The first in-person CASC since January 2020 was successfully delivered in September 2023. Candidate capacity is greater in this model and all candidates were allocated a place. Digital marking on iPads was used for the first time which worked well to streamline activity on the day and was appreciated by examiners and invigilation staff.

Summary of Exam Diets for 2023

Examination Diet	Number of trainees who sat the examination	Trainee pass rate (%)	Overall pass rate (%)
Paper A 2023-1	369	59.3%	50.29%
Paper A 2023-2	278	42.8%	40.57%
Paper A 2023-3	335	67.2%	62.48%
Paper B 2023-1	266	75.2%	62.18%
Paper B 2023-2	179	41.3%	35.08%
Paper B 2023-3	265	52.5%	42.73%
CASC 2023-1	216	79.2%	55.20%
CASC 2023-1 (May)	42	83.3%	45.79%
CASC 2023-2	277	69.3%	49.80%

The ESC was concerned by the reduction in pass rate in the 2023-2 Paper B but concluded that there were no issues with the administration of the exam. It was noted that this was the smallest cohort to ever take an MRCPsych theory exam, meaning exam statistics may be more prone to fluctuation compared to a larger cohort. It was also the first exam diet since moving to a structure of three exam diets annually, meaning seasonality and cohort effects are still unknown.

Workforce

Psychiatrists' Support Service (PSS)

The Psychiatrists' Support Service (PSS) continues to support the psychiatric workforce, providing confidential support via trained peer-support psychiatrists (PSPs).

The data below is from the period between October 2022 and October 2023.

Type of call	Call number
Total number of calls to the PSS	54
Calls from trainees to the PSS	16
Calls to the PSS where covid 19 was a factor	0

Of the calls received, the most common reasons for calls included:

- Burnout
- Difficult Relationships with Colleagues
- Grief
- Mental Health

Further information about the service is available on our website¹. The service can be contacted on **020 8618 4020**, or via pss@rcpsych.ac.uk.

Differential Attainment

GMC work on differential attainment and fair training

The GMC is continuing to work to address differential attainment in training and continues to provide support to organisations with equality and diversity considerations. The GMC now require all medical royal colleges and faculties to submit a differential attainment action plan on an annual basis.

The College submitted the following at the end of 2023;

Valuing diversity and visible representation in college leadership and governance

- The College's Act Against Racism Campaign and Strategic Plan 2024-2026 outlining the College's commitment to promoting diversity not only across Psychiatric Training, but also for everyone regardless of their background. (Section 2 Strategic Plan, Objectives 2.1; 2.10; 2.12; 2.13)
<https://www.rcpsych.ac.uk/docs/default-source/about-us/corporate->

¹ [Psychiatrists' Support Service \(PSS\)](#)

[publications/strategic-plan-2024---2026.pdf?sfvrsn=8f385de3_3](#). The College has established an Equality taskforce to monitor its equality and equity commitments and to monitor the Trusts engagement in Act Against Racism.

- Continue to ensure this is diversity in RCPsych Committees and in senior educational appointment such as Associate Deans and Specialist Advisors, including less than full time training (LTFT) and examiners.
- Continue to monitor ethnicity, sex and age data of Examiners, ETC and Associate Deans. This data includes diversity data on the membership as a whole, as a comparison.
- Specific unconscious bias training for examiners every 2 years and for other key educational roles.

Inclusive programmes of learning and assessment

- Inclusive in language in exam content & curricula by continuing to review language used in written / clinical exam items and curricula to avoid bias, slang and ensure plain english is used as much as possible.
- Representation of diverse service users and professionals in clinical exam items. The new CASC syllabus specifies the inclusion of personalised/ individualised approach to patients.
- Continue to ensure there is diversity in RCPsych Committees by working with Committee Managers and Chairs.
- Creation of Neurodiversity in Training Working Group to create and review specific initiatives to support this group of trainees by this group of trainees.

Support for trainers and early learning needs analysis

- College updates relating to differential attainment; where the College is at and what improvements are needed.
- Inclusion of advisory notes on the new RCPsych trainee portfolio (Summer 2024). Educational Supervisors to be made aware.
- Support the Deanery administration teams with ensuring they have access to all the relevant information, at the same time. For example; Curricula, Silver Guide etc...
- Work with Portfolio developers to create a reporting tool for Trainers to review results of all their trainees.
- Review of MRCPsych Courses to ensure fit for purpose and aligned to new core curriculum and assessments ensuring inclusivity.
- Review of Formative Assessment with key recommendations around formulation skills ensuring inclusivity.

Support for UK trainees preparing for high-stakes summative assessments and recovery from failed attempts

- As part of exam preparation, ensure Trainees are aware of the resources available on the RCPsych Website/ TrOn (Trainees Online)
- Ensure the Curricula changeover deadline is communicated to both Trainers and Trainees; via portfolio online, email updates, better communication with deanery administrators, Educational Supervisors and Heads of Schools.

- Consider opportunities for funding / support for trainees who fail first and/or second attempt - criteria to be agreed. Continue discussions with UK education partners and employers regarding funding for CASC preparation course vs extension of training.
- Improve personalised feedback after an exam attempt by piloting free text feedback at the CASC exam in January 2024
- Development of resource/reading lists for theory exams.
- Promoting access to reasonable adjustments, as IMG take up of these is lower than UK graduates.
- Review of MRCPsych Courses to ensure fit for purpose and aligned to new core curriculum and assessments ensuring inclusivity
- Review of Formative Assessment with key recommendations around formulation skills ensuring inclusivity.

The Academy of Medical Royal Colleges (AoMRC) published its '[Principles for exam preparation, feedback and support for candidates to address the awarding gap](#)' in September 2023 and work to review the Colleges existing activity against the recommendations and identify gaps will be completed in February 2024.

CASC Masterclasses

Eight two-day masterclasses were delivered between July 2021 and Nov 2022 to provide targeted support for trainee groups considered statistically as being at higher risk of failing to pass the clinical examination and to progress in training; trainees from deaneries with average pass rates below the national average, trainees with a previous fail, from a UK ethnic minority background, or who completed their undergraduate training overseas.

A total of 183 participants attended 8 masterclasses between July 2021 and November 2022. The formal [evaluation of the impact of the masterclasses](#) was published in June 2023, with *early findings indicating higher pass rates and a narrowed attainment gap for masterclass participants: Pass rates in the September 2021 and January 2022 CASC sittings were 11.3% points and 12.9% points higher for UK and overseas-qualified minoritised ethnic trainees respectively for those who attended the masterclasses.*

Work around improving differential attainment is ongoing. The College are working to tackle differential attainment in a number of ways, including:

- Development of the format of the masterclasses for the CASC examination component to be available as CASC preparation courses for all candidates.
- Expanding international medical graduate (IMG) networks and creating tailored support and guidance for IMGs.
- Creation of a working group to consider specific support and adjustments for trainees with neurodivergent conditions.

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