ROYAL COLLEGE OF PSYCHIATRISTS NORTHERN IRELAND DIVISION

TRAINEE SECTION SOURCEBOOK
2009
Foreword

Dear Colleagues

I am delighted to endorse this guide for Trainees. I have no doubt it will prove an invaluable resource for those starting out in their career in Psychiatry in Northern Ireland and I wish to commend Dr Gary Woods and the Trainees’ Committee for all their hard work in compiling this Sourcebook.

Trainee membership of the College provides many benefits for junior doctors, principally:

1. full participation in the profession by a process of training, examination, standard setting and CPD;

2. access to a wide range of Council Reports, Occasional Papers and College Journals providing detailed guidance on every area of work and expertise in the professional life of a psychiatrist. The College website, which has won awards for its quality, will be an invaluable resource which you will use frequently.

3. membership of the College provides for the very fundamental need for professional identity, and collegiality. The College Support Unit (CSU) is available to help psychiatrists who are experiencing difficulties in any area.

The more one is involved in College affairs the more these benefits are realised.

The College’s process of devolution allows us regionally to have a much greater input into shaping the future of Psychiatry. Joining and participating in the decision making process provides an opportunity to change and improve the lives of those suffering from mental illness and the services that we provide for them.

The Chair of the Trainees’ Committee sits on the Northern Ireland Divisional Executive Committee and trainee representation is present on each of the Faculties within the Division. The Trainees’ Committee also has three representatives on the central Psychiatric Trainees’ Committee College.

We have a full time Divisional Manager and a Divisional Administrator, (Ruth Fitzsimons) who is your first point of contact for trainees’ in our local office based at Clifton House (Tel: 02890278793, e-mail: rfitzsimons@nirelanddiv.rcpysch.ac.uk).

Finally may I take this opportunity to welcome you into Psychiatry and wish you every success in your future career.

Dr Philip McGarry FRCPsych  
Chair, Northern Ireland Division  
July 2009
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INTRODUCTION

It is with great pleasure that as outgoing Chair of the Northern Ireland Royal College of Psychiatrists’ Junior Trainees’ Committee I have been asked to update the Sourcebook, originally developed by Dr Conor Barton and the Trainees’ Committee in 2005. I would like to thank my predecessors for their sterling efforts in authoring a work I have consulted on numerous occasions.

As per the previous edition, it is hoped that this update will provide a useful introduction to those beginning a career in psychiatry, and that it may also remain a useful reference point for those a little further on in their careers.

There have been huge changes in the nature of postgraduate medical careers during the past five years. Modernising Medical Careers has been implemented, bringing with it a move toward a more universal and well-defined career pathway for each medical specialty. With this comes the need for a more formal and organised method of assessing trainees’ progress during their development. In psychiatry this takes the form of Workplace-Based Assessments. The Royal College of Psychiatrists has reorganised its Membership Exam system toward a more modular framework. At a local level, as part of the Review of Public Administration, the Province has moved from having 19 Health and Social Care Trusts to 6, while the College’s Northern Ireland Division Office has moved premises to the beautiful and historic Clifton Street setting.

In the previous edition of the Sourcebook Dr Barton urged trainees to become registered with and an active part of the College’s Northern Ireland Division. I note that it is now compulsory for trainees to register with the College in order to access Workplace-Based Assessments online but I would urge trainees not to end their ties with the College there. During a period of ongoing change, affiliation with the College continues to provide numerous benefits and an important platform from which to take an active role in shaping the future direction of both training and service development.

All information has been obtained from the public domain and sources listed in the appendices section.

Updated by Dr Gary Woods MRCPsych
ST4 in General Adult Psychiatry
Belfast Health and Social Care Trust

Original author Dr C.M. Barton MRCPsych
Senior House Officer, Downshire Hospital (2005)
CAREERS IN PSYCHIATRY

Psychiatry Training

Psychiatry deals with the care and treatment of people with mental health problems in hospital and community settings. This booklet aims to provide basic information about training to become a member of the Royal College of Psychiatrists and attaining entry to the higher specialist training grade (CT4-6). Although much of the information specifically relates to training in Northern Ireland most of it should be relevant to other regions in the United Kingdom and Republic of Ireland.

Specialties in Psychiatry

General Adult Psychiatry
This specialty deals with the mental health of people usually between the ages of 18 and 65. All posts emphasise a multidisciplinary approach to patient care and liaise closely with general practitioners and community based services.

General Adult Psychiatrists may have a special interest in a sub-specialty such as:

Forensic Psychiatry
Dealing with the interaction between psychiatry and the law, this specialty involves caring for and treating offenders with mental health problems. Forensic Psychiatrists may work with the courts in elucidating the role of mental illness in offences, providing expert opinion and recommending management.

Substance Misuse
Psychiatrists in this field manage the physical, mental and social problems associated with addictions. There is often a substantial overlap with other areas of psychiatry and medicine as well as legal and public health aspects. Experience in Psychiatry of Substance Misuse is extremely valuable in any area of medicine and there is frequent liaison with other specialties.

Rehabilitation
Rehabilitation deals with the physical, mental and social problems associated with long term mental illness. A multidisciplinary approach is used in determining appropriate placement of patients and helping them develop autonomy.

Neuropsychiatry
In all psychiatry there is an extensive overlap with neurology. Specialists in this field are involved in the assessment and management of mental and behavioural problems associated with organic conditions. They liaise extensively with other medical specialties and may be involved in the assessment, management, rehabilitation and placement of those with chronic brain injuries.

Liaison Psychiatry
Liaison psychiatrists are involved in diagnosis and management of mental and behavioural problems that may present initially to other medical specialties. They frequently provide psychiatric cover to accident and emergency departments and other wards in general hospitals. Specialists in this field should have a broad base of medical knowledge and experience and be adept at dealing with other medical professionals.
Psychiatry of Old Age

Concerned with the mental and physical health of the over 65s, this specialty is currently expanding to match changes in the population. A major challenge in this field is the management of dementia as well as functional mental illnesses. There is a multidisciplinary approach to the assessment, management, rehabilitation and placement of elderly patients.

Child and Adolescent Psychiatry

Psychiatrists in this field deal with the intellectual, emotional and social well being of the under 18 population. A working relationship with the child and their family and an appreciation of the various developmental factors at this age are vital. Diagnostic skills and a multidisciplinary multimodal approach to management are particularly important in this field.

Psychiatry of Learning Disability

This specialty deals with the prevention, diagnosis and treatment of mental health problems in people with learning disabilities. An appreciation of the impact of illness on carers and the patient's social functioning is required.

Psychotherapy

All psychiatrists need basic psychotherapeutic skills and all trainees must now gain psychotherapy experience as part of their basic specialist training. This specialty emphasises the use of psychotherapeutic techniques in the assessment, management and understanding of mental illness. In the course of training a psychotherapist may be required to undergo personal psychotherapy themselves.

Basic Specialist Training

Basic Specialist training takes place in College-approved training posts and following the implementation of Modernising Medical Careers (MMC) is of fixed 3 years duration (CT1-CT3). Prior experience in other medical specialties such as accident and emergency and general medicine may be accepted by the College as counting towards training for the purposes of exam eligibility.

Trainees in the UK must be eligible for full registration or equivalent with the General Medical Council and usually start at the grade of CT1. In order to qualify for membership of the Royal College trainees must complete recognised training in general adult and old age psychiatry as well as in either child and adolescent psychiatry or psychiatry of learning disability. After completing the required training and passing the Membership of the Royal College of Psychiatrists (MRCPsych) examination, trainees can enter higher training (CT4-6).

Introduced over the past couple of years has been a continuous system of Workplace-Based Assessments (WBPA), designed to allow for regular and systematic trainee appraisal. The assessments are recorded via The Royal College of Psychiatrists’ Assessments Online site. It is mandatory to complete a set number (varying according to trainee seniority) of each of four key assessments (ACE, mini-ACE, CbD, mini-PAT) annually. Presently completion of the remaining assessments remains desirable rather than compulsory. Assessments are evaluated at Trainee’s Annual Review of Competence Progression (ARCP).
Higher Training

On gaining membership of the college, the trainee is eligible to apply for a post as a higher specialist trainee (CT4-CT6) lasting 3 years during which there may be the opportunity to gain research experience or experience in other medical fields. The trainee will be expected to plan their career with a view to gaining proficiency in a specialty and a sub-specialty of interest. As per basic specialist training, the trainee is expected to maintain a portfolio of evidence which will be inspected yearly at the ARCP.

On completion of higher specialist training a doctor gains certification of completion of training (CCT) and may apply for a consultant post or equivalent.

Consultant Posts

At this point in the psychiatrist's career, the emphasis shifts from demonstration of competency to practice and completion of specialist training to one of career development and continuing professional development (CPD). As part of the new process of re-validation, consultants, in common with all other grades of doctor, will be required to demonstrate their ongoing fitness to practice.
THE ROYAL COLLEGE OF PSYCHIATRISTS

The Royal College of Psychiatrists has existed in some form since 1841 when the Association of Medical Officers of Hospitals and Asylums for the Insane was established. The current structure of the college dates to a Royal Charter of 1971 and it acts as the professional and educational body for psychiatrists in the United Kingdom and Republic of Ireland.

It has 4 main roles:
- Setting standards and promoting excellence in mental health care
- Improving understanding through research and education
- Leading, representing, training and supporting psychiatrists
- Working with patients, carers and their organisations

COLLEGE STRUCTURE

The Central Executive Committee (CEC) replaced the Executive and Finance Committee and Council in July 2006. The CEC is the principal decision-making body within the College and has full management of its affairs, including its finances. The College is a registered charity and full members of the CEC are Trustees of the College.

The CEC oversees several subcommittees, receiving regular reports from these. It is charged with identifying issues of interest and recommending new policies for the College.

As described on The College website, the CEC also oversees matters such as:
- Constitutional and charitable matters such as amendments to the Bye-Laws and Regulations
- The College’s strategic plan
- College participation in case or statute law making
- The College’s compliance with legal obligations
- The work of Faculties, Sections, Divisions and Special Interest Groups
- The College’s relationship with other organisations
- International relations
- Public statements (including publications)
- Establishment of new Committees, Sections or Faculties
- The election of Honorary Officers
- Nominations for honours

A copy of College Structure can be found in Appendices iv-v
THE NORTHERN IRELAND DIVISION

The Northern Ireland Division of The Royal College of Psychiatrists was established in September 2003 to recognise the distinct political legal and health provision issues that exist in Northern Ireland and to reflect the process of regional devolution occurring in the United Kingdom. It works closely with the Irish College of Psychiatrists based in Dublin and is united with it under the auspices of the All-Ireland Institute of Psychiatry.

The Division represents the interests of college members, associates and inceptors in Northern Ireland through the chairman who attends meetings of the Council and Executive and Finance Committees. The Division also sends representatives to many of the various college committees and groups listed above.

The Division executive committee has representatives from the following groups and faculties which organise a series of academic meetings:

- General Adult Psychiatry
- Psychiatry of Learning Disability
- Child & Adolescent Psychiatry
- Psychiatry of Old Age
- Psychotherapy
- Addiction Psychiatry
- Trainee Section
- Affiliates and SAS
- Forensic Psychiatry

The Northern Ireland Division has dedicated offices and staff based in Belfast and details of how to contact it are given elsewhere (see “Useful Information”).

The structure of the Northern Ireland Division is summarised below:
Psychiatric trainees in Northern Ireland were previously represented by the Association of Psychiatrists in Training (APINT) which was separate from the Royal College of Psychiatrists. In June 2004 it was decided by popular vote to affiliate to the College and form the Trainee Section of the Northern Ireland Division of the Royal College of Psychiatrists.

The Trainee Section aims to democratically represent the interests of all psychiatry trainees in Northern Ireland to the Royal College of Psychiatrists and works closely with its counterpart in the Irish College of Psychiatrists as part of the All-Ireland Institute of Psychiatry (AIIP).

The trainee section is open to all doctors training as Psychiatrists but bye laws restrict representation to the College to members and pre-membership trainees only. All trainees are encouraged to become pre-membership trainees and thus gain entitlement to voting rights within the college.

The trainee section is divided into Junior (CT1-CT3) and Senior (CT4-CT6) Trainees Groups under the chair and deputy chairperson with a common committee representing the trainee section to a variety of bodies including the various faculties of the Northern Ireland Division, the Collegiate Training Committee of the Royal College of Psychiatrists, various Medical Advisory Committees. Each group in the trainee section holds regular administrative and academic peer-led meetings.

Full details of how to contact the Trainee Section are given in “Useful Information”.

The structure of the Trainee Section is summarised below:

- **Northern Ireland Division**
- **Trainee Section**
  - Executive Committee
    - Chairperson
    - Deputy Chairperson
- **Junior Trainees (CT1-CT3) Group**
  - Representation
    - CTC reps
      - (3 posts)
    - SAC/BMA rep
    - AMAC reps
      - (4 posts)
- **Higher Trainees (CT4-CT6) Group**

AMAC  Area Medical Advisory Committee
CTC  Collegiate Training Committee
PTC  Postgraduate Training Committee (NIMDTA)
BMA  British Medical Association
MEMBERSHIP

To gain membership of the Royal College of Psychiatrists a trainee must complete the approved training and pass all parts of the MRCPsych examination. On passing the examination the College writes to the trainee for personal details and to request a registration and annual membership fee.

Members are entitled to regular programmes of College events nationally and locally, the British Journal of Psychiatry and Psychiatric Bulletin. They have access to the College’s information service and library and electronic journal database.

Members can choose to be affiliated to one or more specialist faculties and sections and have voting rights within the College.

Pre-Membership Psychiatric Trainee

The College is keen to encourage trainee participation in all aspects of its activities. This is achieved by enrolling as a Pre-membership Psychiatric Trainee. Registration with the College is mandatory as set out in A Reference Guide for Postgraduate Specialty Training in the UK (“Gold Guide”) and as of August 2009, access to the WPBA Online section will be available only to Pre-membership trainees, Members and Affiliates. Membership has a number of advantages for the trainee:

- Subscription to the British Journal of Psychiatry and Psychiatric Bulletin with reduced subscription rates to the journal Advances in Psychiatric Treatment. All three of these are excellent sources of information on current research, trends and practice in psychiatry and invaluable in preparing for the MRCPsych examinations and job interviews as well as aiding best practice.

- The Pre-Membership Psychiatric Trainee handbook which gives details about the College, examinations and careers.

- Programmes of college events and courses both nationally and locally.

- The right to vote in some college proceedings and to stand for election to the Psychiatric Trainees Committee (PTC) which represents trainee's interests to the college council.

- Affiliation to two specialist sections in the college.

- Access to the college information service.

- Reduced fees for attending college events and the annual meeting.

Registration details may be found on the College website:

http://www.rcpsych.ac.uk/specialtytraining/trainees/traineeregistration.aspx

This is an excellent means of gaining important information about the college's activities and plans as well as the latest advances in psychiatric management and also demonstrates a clear commitment to a career in psychiatry to potential future employers.
THE MRCPSYCH EXAMINATION

The MRCPsych examination is divided into four parts, three written papers and a final Clinical Assessment of Skills and Competencies (CASC). Examinations are held in spring and autumn of each year.

Potential candidates must contact the college for an application form which asks details of experience to date and the sponsorship of the applicant’s supervising consultant and college tutor. An entrance fee is charged by the college and first-time applicants may be asked to supply identification and evidence of registration with the General Medical Council. Details for application can be found in “Useful Information”.

The MRCPsych Written Papers

Trainees are eligible for any of papers 1-3 following completion of 12 months in approved training posts, 6 months of which must be in general adult psychiatry and the remainder in general or old age psychiatry. Curricula for each of the 3 papers are subject to change and are best checked on the College site. Papers may be taken in any order but the College recommends the following timeframes for applying for Papers 2 and 3, as these reflect the standard level of training being assessed:

- **Paper 1**: mandatory 12 months
- **Paper 2**: 18-24 months
- **Paper 3**: 18-30 months

A pass in paper 3 may be banked for 635 days in order to facilitate more than one attempt at the CASC exam.

**Paper One**
The MRCPsych Paper 1 will be 3 hours long, containing 200 questions. The paper will include both ‘best answer 1 of 5’ style MCQs and EMI. Approximately one third of the Examination will be the EMI component.

**Paper Two**
The MRCPsych Paper 2 will be 3 hours long, containing 200 questions. The paper will include both ‘best answer 1 of 5’ style MCQs and EMI. Approximately one third of the Examination will be the EMI component.

**Paper Three**
The MRCPsych Paper 3 will be 3 hours long, containing a maximum of 200 questions. The paper will include both ‘best answer 1 of 5’ style MCQs and EMI. The Clinical Topics will be approximately two thirds of the paper. The Critical Review component will make up approximately one third of the paper.

**Clinical Assessment of Skills and Competencies (CASC)**
Eligibility criteria include passes in Papers 1-3 and completion of 30 months training, of which at least 24 months should be in psychiatry. The CASC exam consists of 2 separate circuits. One circuit will consist of 8 individual stations of 7 minutes with a preceding 1 minute ‘preparation’ time. The other circuit will consist of 4 pairs of linked stations. Here the stations each last 10 minutes with an additional 2 minutes of ‘preparation’ time.

Successful candidates are then eligible to apply for membership of the college provided they have completed all training requirements. On payment of a registration and annual membership fee, successful candidates are allowed to use “MRCPsych” as a professional qualification.
Psychotherapy

Psychotherapy training should take place in all approved posts and basic requirements for the trainee include:

- Development of interview skills.
- An ability to plan psychotherapeutic formulations of cases.
- A minimum of three short cases (12-16 weeks each) utilising different psychotherapeutic models.
- One long case (12-18 months) of individual psychotherapy.
- Experience of group, couple, or family therapy.

In Northern Ireland there is currently a shortage of trained supervisors in psychotherapy. This makes it difficult to find and retain cases and trainees are advised to take on cases as early as possible under supervision. The college tutor in each training post can identify the local approved psychotherapy supervisor who can assist in arranging cases.

Currently, psychotherapy experience is recorded in the trainee's logbook (see "The Trainee") and is a requirement for sponsorship of a trainee's application for examination and membership. The College is currently introducing Workplace-Based Assessments (WBPA) in Psychotherapy which in time will become a prerequisite for eligibility for the CASC exam.

The MRCPsych Lecture Course

In Northern Ireland, the Department of Mental Health based in the Whitla Medical Building (see chapter 7 "Useful Information") runs a programme of lecture courses to prepare trainees for the MRCPsych examinations. The cost in Northern Ireland is largely met from postgraduate training funds but candidates do have to pay a small administrative fee.

On Wednesday Mornings there is psychotherapy training consisting of a Balint group and lectures based at the Department of Psychiatry in the Knockbracken Hospital Belfast. Other hospitals also run Balint and doctor-patient relationship groups on a separate basis.

On Wednesday afternoons, there are psychiatry lectures for the MRCPsych examinations and the Diploma in Mental Health. Lectures take place in the Whitla Medical Building, Belfast and occasionally in other locations.

Additional Courses

A number of privately-run courses exist to prepare candidates for the MRCPsych examination. Some of these are arranged locally by individuals or companies and some by the Trainee Section of the Northern Ireland Division. Other courses are available in England and the Republic of Ireland and some of these are listed in Chapter 7 ("Useful Information"). None are officially recommended by the Royal College of Psychiatrists.

The Trainee Section

It is planned that the trainee section will become more involved in exam preparation as it develops. Higher trainees frequently organise mock clinical exams for their junior colleagues.
THE TRAINEE

Career Planning, Appraisal & Revalidation

The consultation document *Confidence in the Future- for patients and for doctors* (DHSSPS 2000) along with other similar initiatives in the United Kingdom has proposed a number of key initiatives to be quickly implemented with the aim of assisting doctors in their careers and safeguarding patients. Key among these proposals is the setting up of a system for regular appraisal of all doctors which aims to:

- Set out personal and professional development needs, career paths and goals.
- To agree plans by which these needs can be met.
- To review each doctor’s performance.
- To consider the doctor’s contribution to the quality and improvement of local healthcare services.

Appraisal is being introduced for all doctors in the United Kingdom and is based around the document *Good Medical Practice* (GMC 2001) which describes the standards expected of all doctors:

- Good clinical care.
- Maintaining good clinical practice.
- Participation in teaching and training.
- Forming good relationships with patients.
- Working well with colleagues.
- Probity.
- Safeguarding patients from medical ill-health and poor practice.

By participating in appraisal the trainee provides evidence which can be submitted to the General Medical Council allowing them to issue a licence to practise and ensuring inclusion on the Medical Register.

In Northern Ireland the process of appraisal has already begun and the relevant documentation can be obtained from the Postgraduate Deanery of the Northern Ireland Medical and Dental Training Agency in the form of a folder (see “Useful Information”).

It is important that trainees obtain and complete their appraisal forms as they progress through training. They should include details of training completed, qualifications gained, research and audit, publications, courses attended, meetings attended and experience gained. There should also be evidence of an intended career path planned with the aid of educational supervisors and college tutors. As such keeping an up to date College logbook or portfolio will be an invaluable source of information.

The GMC will introduce ‘The Licence to Practise’ on 16 November 2009. All doctors will be legally obligated to hold both registration and a licence to practice. After licensing, the process of Revalidation will be introduced, whereby doctors will periodically have to prove their fitness to practice in order to have their licence to practice renewed.
Recent Developments in Postgraduate Medical Education

Significant changes in medical education and assessment affecting all the Royal Colleges have been implemented rapidly over the course of the past five years. Such developments were a result of Government desire to modernise medical careers and make postgraduate training more efficient in producing the necessary numbers of competent doctors in each medical field.

The first step in this process was the establishment of an independent Postgraduate Medical Education and Training Board (PMETB) which developed principles for assessment of postgraduate trainees to ensure competency. These have been adopted by the various Medical Royal Colleges. In addition to this, various recommendations made by Sir Liam Donaldson in his review of training Unfinished Business and by the GMC in Tomorrow's Doctors were incorporated into the initiative known as Modernising Medical Careers (MMC). Finally, guidance from the Royal Colleges was received as to how these recommendations can be put into practice while complying with the European Working Time Directive (EWTD). The input of patient’s and carer’s groups was also been sought.

Modernising Medical Careers in conjunction with the Department of Health and the Medical Royal Colleges has developed a new curriculum and plan for the training of newly-qualified doctors:

1. **Medical School**
   - Provisional Registration with GMC

2. **Foundation Programme Year 1 ("F1")**
   - Similar to PRHO year
   - Competency to practise

3. **Foundation Programme Year 2 ("F2")**
   - Full Registration with GMC
   - Generic medical competency
   - 4 separate 3-month speciality placements e.g., GP, Psychiatry, General Medicine, ICU, Surgery, A+E, GUM

4. **Retraining in new Speciality if required**
5. **Further training in speciality/sub speciality**
6. **Consultant Post**
7. **Completion of higher training Possible exit examination**
   - Envisaged as a 3-4 year period of continuous training and assessment to be further developed in the future.
   - In psychiatry this is a 3-year period (CT1-CT3)

8. **Continuing Professional Development**

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Workplace Based Assessments (WPBAs)

As described earlier, a system of ongoing and standardized appraisal in the workplace has been introduced over the past two years. The bulk of these assessments are recorded online for posterity and copies may be printed off for inclusion in trainees’ portfolios for presentation at ARCP. The online recording system was originally under the auspices of Healthcare Assessment and Training (HcAT) but latterly has been adopted by The Royal College of Psychiatrists.

Trainees may register for WPBAs at the following web address:
http://www.rcpsych.ac.uk/specialtytraining/assessmentsonlinesign-up.aspx

Once registered, trainees may access the site at the following address:
https://training.rcpsych.ac.uk/

There are several different WPBAs, with minimum numbers of each required annually depending on the trainee’s seniority. The different assessments are listed below, with a brief description of what each entails.

**Assessed Clinical Encounter (ACE)** [minimum required 2 per year in CT1, 3 in CT2, 3 in CT3]
Assessor observes a new patient encounter and assesses trainee’s ability to take a full history and derive a diagnosis and appropriate management plan.

**Mini Assessed Clinical Encounter (Mini-ACE)** [minimum required 4 per year]
The assessor observes and rates part of a patient interaction, for example history taking or counselling for potential adverse side effects when commencing a new medication.

**Case-Based Discussion (CbD)** [minimum required 2 per year]
Trainee selects two sets of notes of patients recently seen and the assessor picks one to discuss. The discussion will allow rating of the quality of clinical decision making and of the trainee’s clinical knowledge.

**Mini-Peer Assessment Tool (Mini-PAT)** [minimum required 2 per year]
Trainee approaches several colleagues from various disciplines and they complete an anonymous questionnaire, analyzing the trainee’s attitudes and behaviours and their ability to function as part of a multidisciplinary team.

**Case Presentation (CP)** [minimum recommended 1 per year]
Used for assessment of case presentations given during local academic programmes.

**Journal Club Presentation (JCP)** [minimum recommended 1 per year]
Used for assessment of journal club presentations at local academic programmes.

**Directly Observed Procedural Skills (DOPS)** [As opportunity arises]
Less often used in psychiatry than other medical or surgical specialties, but useful for assessment of ECT administration.

**Assessment of Teaching (AoT)** [As opportunity arises]
Assessment of trainee’s teaching skills. Opportunities may arise when undergraduate medical students are attached to the hospital.
Health & Support

Like members of any other workforce, junior doctors can be affected by physical and mental ill-health at any point in their training. Unfortunately this has the potential to affect the ill doctor, their patients and colleagues. The GMC requires doctors to act if they feel their own or a colleague’s illness or behaviour poses a threat to their competence to practise.

Trainees in psychiatry are entitled to sick leave if unwell with the same benefits and protections as other National Health Service employees. If a period of illness is prolonged, the trainee should follow the regulations that apply to their individual health trust and inform their supervising consultant and college tutor. This is important as a long period of sick leave may impact on the amount and type of training received and eligibility to sit examinations. In certain circumstances trainees may be entitled a refund on exams missed due to illness.

Prior to beginning employment most health trusts require doctors to undergo an occupational health assessment. It is important to declare any ongoing or recent health problems according to the employer’s requirements bearing in mind that not to do so may constitute a breach of terms of service. Equally it is illegal for employers to discriminate against job applicants on the basis of ill-health or disability that does not affect the employee’s ability to work.

Various organisations exist to provide support to ill doctors or those who feel unable to cope at work (see Chapter 7 “Useful Information”). Peers and superiors are also an important source of support to trainees who are under pressure and solutions can often be found and implemented on a personal and local level. It is hoped that with the establishment of the Trainee Section that arrangements for peer support can be improved throughout Northern Ireland psychiatry.

Safety

Psychiatry often involves working with acutely disturbed or sometimes violent patients and trainees should be aware of their personal safety at all times.

The Royal College of Psychiatrists has published two useful documents on this subject: Safety for Trainees in Psychiatry (Council Report CR78) and Management of Imminent Violence (College Research Unit 1998).

It is recommended that trainees:
- Are aware of their personal privacy and the need to ensure that they are safe outside the hospital. This also applies to home visits, moving around the hospital site and time spent off-duty.
- Behave in a safety conscious, non-provocative manner with patients, relatives and carers.
- Withdraw from any situation in which they feel under threat or take appropriate steps to ensure their safety such as making sure other members of staff are present.
- Should receive training in breakaway techniques at induction and six-monthly thereafter.

In the event of being involved in a dangerous situation, the trainee should make sure events are clearly documented and discuss the matter with their educational supervisor to ensure safety is reviewed and follow-up help provided if appropriate.

Working Conditions

Terms and conditions of employment may vary according to health trust but in all training posts they should be of a standard acceptable to the Department of Health, Postgraduate Deanery and Royal College of Psychiatrists. In the first instance, problems can often be resolved locally within the trust. If necessary the British Medical Association (BMA) can offer advice and each hospital should have a junior doctor representative who can be approached.

At the very least a trainee is entitled to annual leave, study leave, sick leave, parental leave and emergency leave. The post should comply with the European Working Time Directives (Council Directive 93/104/EEC).
Directive and be paid according to national salary scales based on experience. It should, of course, also comply with the training requirements outlined in “Training in Northern Ireland”. To ensure this, The Royal College of Psychiatrists visits and inspects each post in each region making recommendations for change if necessary.

**Non- EU Graduates**

The NHS has relied on overseas doctors throughout its existence and has gained a great deal of additional experience and expertise via this source. It is currently one of the largest multi-ethnic employers in the world and reflects the multi-cultural society in the United Kingdom today.

All doctors working in the United Kingdom must be registered with the General Medical Council (GMC). The GMC maintains two registers:

- The *Medical Register* of all doctors licensed to practice in the UK. Medical Registration exists in two main types: *full registration* and *limited registration*.

- The *Specialist Register* of all doctors registered with the GMC and eligible to work in honorary or substantive consultant posts. Entry to this register for overseas graduates is determined by the Specialist Training Authority and application must be made directly to the Royal College to determine if the doctor is eligible to work as a consultant in the UK.

By law, from 1985 any doctor who is not a national of a European Union (EU) country is only allowed to enter the United Kingdom for a set period of training.

The Royal College of Psychiatrists operates two schemes to assist overseas doctors. The CASS scheme exists to assist entry to consultant grade posts and the Overseas Doctor Training Scheme (ODTS) for prospective trainees. Unfortunately the ODTS is currently suspended and applicants seeking work have to obtain GMC registration and seek employment individually.

Non-EU graduates wishing to apply for basic specialist training (CT1-3/FTTA) posts must be appropriately registered (usually limited registration) with the GMC and able to demonstrate this to their prospective employers before starting work. Failure to do so may constitute breach of contract. Most trainees will have to pass the PLAB examination before being granted limited registration (exceptions include doctors entering the UK via CASS or ODTS).

The Royal College of Psychiatrists is keen to promote a more ethnically inclusive, culturally sensitive service and conducts regular monitoring of members and inceptors to ensure a balanced representation by all members of the community. In Northern Ireland there is also regular monitoring of workforce composition by law and it is illegal to discriminate against a person on the basis of ethnicity or religion.

Both the General Medical Council and Royal College of Psychiatrists have dedicated offices to support and advise potential overseas applicants (see “Useful Information”).

Finally, overseas doctors in the United Kingdom may be subject to visa and residency requirements decided upon by the Home Office, Foreign and Commonwealth Office and Northern Ireland Office for foreign nationals. The best way to investigate these is to enquire at the local Embassy or High Commission or via the Home Office in London.
Psychiatry in Northern Ireland

Organisation

Currently Northern Ireland is politically represented in London by locally elected Members of Parliament (MPs). The local devolved government based in the Northern Ireland Assembly at Stormont consists of Members of the Local Assembly (MLAs) who represent their constituencies to the Northern Ireland Office (NIO) and other bodies.

Health matters in the province are under the overall supervision of the Department of Health Social Services and Public Safety (DHSSPS). Services are divided geographically between five Trusts and their associated clinical services. The health boards are:

Belfast Health and Social Care Trust
Northern Health and Social Care Trust
Southern Health and Social Care Trust
South Eastern Health and Social Care Trust
Western Health and Social Care Trust
Psychiatric Hospitals

Hospitals in the United Kingdom are administered by healthcare trusts under the control of the area health boards. In Northern Ireland there are a mixture of dedicated psychiatric hospitals and general hospitals but only some of these have dedicated psychiatry departments.

Belfast Health and Social Care Trust

Department of Psychiatry
The Mater Hospital
47-51 Crumlin Road
Belfast
BT14 6AB

Tel: 028 9074 1211

Department of Psychiatry
Graham Clinic
Knockbracken Healthcare Park
Saintfield Road
Belfast
BT8 8BH

Tel: 028 9056 5656

Department of Psychiatry
Windsor House
Belfast City Hospital
Lisburn Road
Belfast   BT9 7AB

Tel: 028 9032 9241

Muckamore Abbey Hospital
1 Abbey Road
Antrim
BT41 4SH

Tel: 028 9446 3333

Department of Child and Adolescent Psychiatry
The Royal Belfast Hospital for Sick Children
Falls Road
Belfast
BT12 6BE

Tel: 028 9024 0503
Northern Health and Social Care Trust

Hollywell Hospital
60 Steeple Road
Antrim
BT41 2RJ

Tel: 028 9446 5211

Department of Psychiatry
Whiteabbey Hospital
Doagh Road
Newtownabbey
BT37 9RH

Tel: 028 9086 5181

Department of Psychiatry
Causeway Hospital
4 Newbridge Road
Coleraine
BT52 1HS

Tel: 028 7032 7032

Southern Health and Social Care Trust

St Luke’s Hospital
Loughgall Road
Armagh
Co Armagh BT61 7NQ

Tel: 028 3752 2381

Longstone Hospital
St Luke's Hospital
Loughgall Road
Armagh
Co Armagh BT61 7NQ

Tel: 028 3752 2381

Department of Psychiatry
Craigavon Area Hospital
68 Lurgan Road
Portadown
BT63 5QQ

Tel: 028 3833 4444
South Eastern Health and Social Care Trust

Department of Psychiatry
Lagan Valley Hospital
Hillsborough Road
Lisburn  BT28 1JP

Tel: 028 9266 5141

Department of Psychiatry
Downshire Hospital
Ardglass Road
Downpatrick  BT30 6RA

Tel: 028 4461 3311

Department of Psychiatry
Ards Hospital
Church Street
Newtownards
BT23 4AS

Tel: 028 9181 2661

Western Health and Social Care Trust

Gransha Hospital
Gransha Park
Derry City
BT47 6TF

Tel: 028 7186 0261

Stradreagh Hospital
Gransha Park
Derry City
BT47 1TF

Tel: 028 7186 0261

Tyrone and Fermanagh Hospital
1 Donaghadie Road
Omagh
Co Tyrone
BT79 ONS

Tel: 028 8224 52
Mental Health Legislation in Northern Ireland

The Mental Health (Northern Ireland) Order 1986 makes provision for the detention, guardianship, care and treatment of patients and for the management of their properties and affairs. It is broadly similar to such legislation in other parts of the UK.

Doctors are primarily concerned with the detention of psychiatric patients who fall into any of five categories detailed in Part I of the Order:

- Mental Illness
- Mental Handicap
- Severe Mental Handicap
- Severe Mental Impairment
- Mental Disorder

Certain conditions are specifically excluded from the Order; these are “personality disorder, promiscuity or other immoral conduct, sexual deviancy or dependence on alcohol and drugs”.

Part II of the order deals with the circumstances and procedures through which mentally disordered people can be compulsorily taken into and detained in hospital. The forms used in these processes are summarised overleaf.

Advice on the process of detention may be sought from the Supervising Consultant, Trust advisors (eg. medical records departments) or the Mental Health Commission.

Other parts of the order such as Part III (criminal proceedings) and Part IV (consent to treatment) are primarily dealt with by Consultant psychiatrists.

The Mental Health Review Tribunal

This is an independent body that safeguards against unjustified detention of patients in hospital or control under guardianship by means of reviewing their cases from both medical and non-medical viewpoints.

The Mental Health Commission

This is an independent multidisciplinary body with investigative, inspectorial and advisory functions whose role is to protect the rights and welfare of mentally disordered people and to safeguard staff involved in their care.
The Mental Health Order
(Northern Ireland) 1986

Patient already in hospital requiring detention

Form 5
Signed by SHO for patient already admitted to a psychiatric hospital

Form 5a
Signed by responsible SHO for patient already admitted to a general hospital

Form 3 (GP)

Form 1 (Nearest Relative)

Form 2 (Social Worker)

AND

EITHER

Forms 1+3/ Forms 2+3
Community Detention
Lasts 48 hours

Form 7
Signed immediately on admission to hospital to complete detention process.
By SHO lasts 48 hrs
By Consultant lasts 7 days

Form 7 allows transfer of a patient from one psychiatric hospital to another

Form 8
Form 9
Signed by Consultant and each last 7 days

Form 10
Form 11
Signed by Consultant and each last 6 months

Form 12
Signed by 2 consultants and lasts 1 year
Reform of the Mental Health Order

In October 2002 the Department of Health Social Services and Public Safety initiated a wide ranging, independent review of the law, policy and service provision affecting people with mental health needs or learning disability in Northern Ireland.

Under the chairmanship of Professor David Bamford, this initiative broadly mirrors changes in mental health legislation proposed in other parts of the UK as required by our membership of the EU.

The “Bamford Review” to date has established a number of steering and working committees composed of representatives from health, academic, voluntary, statutory and patient-carer groups. To date it has published proposals for the future of learning disability services and other areas of mental health services are currently being addressed.

The Bamford Review has a website with further information:
http://www.rmhldni.gov.uk/

In England and Wales, the majority of The Mental Health Act 2007 (amending the Mental Health Act of 1983) came into effect in November 2008. Northern Ireland will similarly publish an update of its mental health legislation (currently Mental Health Order 1986) in due course.
TRAINING IN NORTHERN IRELAND

Training Posts

To be eligible for membership of the Royal College of Psychiatrists the trainee must have passed the MRCPsych examination and have completed a six-month attachment in child and adolescent psychiatry or psychiatry of learning disability (or a combination of both).

Entry for the final MRCPsych CASC examination requires a minimum of 30 months approved training of which 24 must be in psychiatry. In approved 3 year schemes this should include broad experience in General Adult Psychiatry and in at least 3 of the 5 other main psychiatric specialties (Psychiatry of Old Age, Forensic Psychiatry, Psychiatry of Learning Disability, Child and Adolescent Psychiatry and Psychotherapy).

Job descriptions should state whether a post has been approved for training by the Royal College of Psychiatrists. If there is any doubt as to this, it can be verified by contacting the College. Unapproved posts are generally not accepted as counting towards training requirements for the MRCPsych examination.

A trainee in an approved post should have access to a designated college tutor and an educational supervisor who normally provides both educational and clinical supervision. There should be regular appraisal and assessment as part of the placement.

The trainee should be permitted to attend an approved training course to prepare them for the MRCPsych exam. In addition they must receive at least one hour per week of dedicated training with their own supervising consultant. During training additional experience should be gained in psychotherapy, research and health management. Trainees are expected to have completed at least one formal audit project. Trainees are also encouraged to be directly involved with patient and carers groups.

All trainees should participate in a structured induction programme on starting each new placement. There should be training in electroconvulsive therapy (ECT) and safety at work including breakaway training (which trainees should repeat regularly). All posts should provide regular life-support training. Trainees are expected to maintain all case notes to an acceptable legal standard.

There should be the opportunity to present new cases to the consultant and participate in regular multi-disciplinary case meetings with an educational component. All new cases seen in outpatients should be discussed with the consultant.

Trainees should also participate in regular supervised case-conferences and journal clubs. They must receive interview skills training during their first year and have the opportunity to appropriately prepare for the MRCPsych examinations.

Placements must include direct clinical care of patients in both hospital and community settings.

Each placement must have a job description and timetable and be a balance of service commitment and training. Trainees should not have to perform inappropriate duties such as routine phlebotomy, filing of case notes, bed management and escorting patients.

During basic specialist training the trainee should have experience of a first on call rota with a minimum of 55 nights on call or equivalent.
In common with all junior doctors’ posts in the United Kingdom, the placement should also comply with the nationally agreed standards of the European Working Time Directive.

Each training scheme should also make allowance for “flexible” training on a part-time basis as well as making provisions for the needs of trainees from other cultures or those with disabilities.

Trainee’s logbooks are available from the Royal College of Psychiatrists and College tutors. It is important that the trainee complete this log and keep it up to date as a record of training completed and assessments received. This will become particularly important in the new process of re-validation (see “The Trainee”).

The Northern Ireland Central Scheme

In Northern Ireland the majority of approved training posts are under the supervision of a central training scheme. Places on this scheme are advertised annually and typically provide placements for a total of 3 years. The central scheme is intended for those doctors planning a career in psychiatry.

Advertisements are placed in local newspapers and medical journals for places on the scheme which are obtained by competitive interview.

Following the completion of the final ‘run through’ cycle, or seamless transition between CT3 and CT4 (or indeed ST3 and ST4) in August 2010, the training scheme will revert to an uncoupled operation, with competitive re-entry at CT4 level.

Flexible Training

Part-time “flexible” training requires the agreement of the local college tutor and regional post-graduate dean. Flexible trainees are required to undergo the same length of training as full-time trainees and therefore may need to spend a longer amount of time in each individual placement. Some posts may be advertised as suitable for flexible training, or alternatively the local college tutor can be approached about the possibility of flexible training.
The Diploma in Mental Health

The Diploma in Mental Health is organised by the faculty of medicine of The Queen’s University of Belfast and is a one year part-time course designed for trainees preparing for a career in General Practice or General Medicine. It is also suitable for trainee psychiatrists and shares many lectures with the MRCPsych Part I training programme (see “The MRCPsych Exam”).

It aims to provide knowledge of current psychiatric theory and practice and must be paid for by the trainee. Assessment is in the form of a short written paper followed by a clinical examination.

Application details are usually available from the college tutor in each psychiatry training post, or from the Department of Mental Health in The Queen’s University of Belfast (see “Useful Information”).

Research

Formal research projects usually require the collaboration of a senior colleague or the local academic department. In Northern Ireland this is the Department of Mental Health of the Faculty of Medicine of The Queen’s University of Belfast, based in the Whitla Medical Building. Research may take a variety of forms and current fields of research in the department include:
- Clinical psychiatry
- Psychopharmacology and Neurochemistry
- Psychiatric Genetics

It may be useful to discuss any plans for research with the college tutor who can advise where further information may best be obtained. A number of local medical journals publish original research, case reports and abstracts and further opportunities exist to present research at local and national meetings (see “Useful Information”).

Audit

Audit forms one of the cornerstones of clinical governance and all trainees are required to complete one audit as part of their basic specialist training. The college tutor or supervising consultant may suggest useful audit topics and most health trusts have a dedicated clinical audit officer to assist staff in obtaining, collating and presenting information. Most hospitals hold regular audit meetings at which findings can be presented. Audit provides another means of gaining publication in local journals and presenting at meetings.

Management Experience

This is also encouraged as part of basic specialist training. Management experience can be obtained by sitting on medical staff committees in individual hospitals, as a BMA representative, on local training or divisional meetings or with voluntary organisations. Additional training may be obtained through specific management training courses.
THE NORTHERN IRELAND MEDICAL AND DENTAL TRAINING AGENCY

All medical posts approved for basic and higher specialist training in the United Kingdom come under the supervision of postgraduate deaneries usually affiliated to the local university medical school.

In conjunction with the Medical Royal Colleges, the deaneries inspect posts to ensure they meet standards for training doctors with regard to areas such as training and experience gained, workload and conditions of employment.

The Northern Ireland Medical and Dental Training Agency

Until 2004 postgraduate medical training in Northern Ireland was organised and funded by the Northern Ireland Council for Postgraduate Medical and Dental Education. It has now been reconstituted as the Northern Ireland Medical and Dental Training Agency (NIMDTA) which has a broader role incorporating aspects of revalidation and continuing professional development reflecting recent reforms in all medical training. It will take the lead in implementing the changes to basic specialist training recommended by the Postgraduate Medical Education and Training Board (PMETB) at the local level.

Organisation

NIMDTA is chaired by the Postgraduate Dean and supervises training in each medical specialty through a series of committees.

Organisation of psychiatric training (from 2005) is described below:

- **NIMDTA**
  
  *Postgraduate Dean*

- **Psychiatry Training Committee**
  
  (meets twice per year)

  - Postgraduate Dean
  - Regional Advisor
  - Training Programme Director
  - Basic Specialist Training Coordinator
  - Higher Specialist Training Coordinator
  - Specialty Tutors
  - Training Programme Directors
  - Academic Representatives
  - Trainee Representatives

- **Other Medical Specialities**
  
  - Training Committees for Medicine, Surgery, General Practice, Dentistry etc.

- **Basic Specialist Training Committee**
  
  (meets twice per year)

- **Higher Training Programme Committee**
  
  (meets twice per year)

- **Psychotherapy Training Committee**
  
  (meets three to four times per year)
Functions of NIMDTA

NIMDTA administers the central training schemes for basic and higher specialist training in Northern Ireland. NIMDTA acts as the employer and advises on recruitment and advertising. As such, members of the NIMDTA psychiatric training committee may sit on interview panels and advise on the design and suitability of certain posts. The psychiatric training committee is also involved in designing and implementing induction programmes for doctors employed on the central training scheme and for overseas doctors. As previously described, the psychiatric training committee is also involved in the introduction and support of the new Appraisal for Doctors in Training programme.

NIMDTA also is involved in providing information regarding available postgraduate training such as the Diploma in Mental Health as well as the MRCPsych and Psychotherapy training courses. Information is available through NIMDTA in the form of a handbook. Other functions include organisation of direct and joint funding for medical education, including study leave, education of tutors and trainers, implementation of flexible training, arranging secondments to other posts and supporting research. Careers advice is provided at all levels from Medical Audit upwards and pastoral care is seen as increasingly important for doctors in training.

Basic Training Schemes

As detailed, NIMDTA is involved in the organisation of the central scheme for basic specialist training and the approval of all trainee posts accredited for training outside the scheme.

Higher Training Schemes

All Specialist Registrar (SpR), ST/CT4-6 and Locum Appointment for Training (LAT) posts are supervised by NIMDTA. Current Higher Training Schemes available in Northern Ireland include:

- General Adult and Old Age Psychiatry
- Child and Adolescent Psychiatry
- Psychiatry of Learning Disability
- Psychotherapy (not annually)
- Forensic Psychiatry (not annually)

Study Leave, Management Training and Teaching Courses

NIMDTA also runs training and management courses for higher specialist trainees via its education unit and is involved in the approval and funding of study leave.

Assessment

Trainees in all specialties are required to undergo Assessment on an annual basis. This also includes LAT and FTTA appointments. This normally takes place in June each year. The ARCP (Annual Review of Competency Progression) provides a record of the trainee's progress through his/her training programme and the Grade. It should normally be completed by the trainee and Postgraduate Dean or his staff each year.
USEFUL INFORMATION

The Royal College of Psychiatrists

The Royal College of Psychiatrists
17 Belgrave Square
London
SW1X 8PG

Tel: 020 7235 2351
http://www.rcpsych.ac.uk

The Royal College of Psychiatrists
Northern Ireland Division
Clifton House - BCS
2 North Queen Street
Belfast
BT15 1EQ

Tel: 020 9027 8793
E-mail: nmcnairney@nirelanddiv.rcpsych.ac.uk

The Irish College of Psychiatrists
121 St Stephen’s Green
Dublin 2

Tel: 003531 4022346
http://www.irishpsychiatry.com

The General Medical Council of Great Britain and Northern Ireland

The General Medical Council
178 Great Portland Street
London
W1N 6AE

Tel: 0845 357 8001
The British Medical Association

The British Medical Association
Head Office BMA
House Tavistock
Square London
WC1H 9JP

Tel: 020 7387 4499
http://www.bma.org.uk

The British Medical Association
Northern Ireland Office
16 Cromac Place
Cromac Wood
Ormeau Road BT27
2JB

Tel: 028 9026 9666
E-mail: info.belfast@bma.org.uk

Postgraduate Deanery

The Northern Ireland Medical and Dental Training Agency
Beechill House
42 Beechill Road
Belfast
BT8 7RL

Tel: 028 9040 0000

The Queen’s University of Belfast

Department of Mental Health
The Queen’s University of Belfast
Whitla Medical Building
97 Lisburn Road
Belfast
BT9 7BL

Tel: 028 9033 5790
http://www.qub.ac.uk

Faculty of Health Sciences
The Queen’s University of Belfast
Whitla Medical Building
97 Lisburn Road
Belfast
BT9 7BL

Tel: 028 9033 5790
http://www.qub.ac.uk
HELPLINES

The BMA Counselling Service
(24 hours)
Tel: 0845 9200 169

Ask BMA
Tel: 0300 123 1233
e-mail: askBMA@bma.org.uk

The National Counselling Service for Sick Doctors (NCSSD)
10 Carlton House Terrace
London
SW1Y 5AH
Tel: 0870 241 0535

Doctors' Supportline
Tel: 0870 765 0001

The Mental Health Commission
The Mental Health Commission
Fourth Floor
Lombard House
10-20 Lombard St
Belfast
BT1 1RD
Tel: 028 9043 6760
APPLYING FOR THE MRCPSYCH EXAMINATION

Apply for an application form in writing:

Examination Services Department
The Royal College of Psychiatrists
17 Belgrave Square
London
SW1X 8PG

Enquiries/ Application requests:

Written papers: Grant Fisher gfisher@rcpsych.ac.uk
CASC: Quin Golding ggolding@rcpsych.ac.uk

College Website: http://www.rcpsych.ac.uk

MRCPsych Examination Timetable
Web address: http://www.rcpsych.ac.uk/PDF/Examinations%20Calendar%202009%20UPDATED%20June%202009.pdf
PREPARING FOR THE MRCPSYCH EXAMINATION

Pre-examination Courses

http://www.birminghamcourseonline.co.uk/
http://www.cascexampracticecourse.co.uk/
http://www.manchestercourse.com/
http://www.newcastlecourse.com/
http://www.oxfordpsychcourse.com/

Other courses are available

Online Resources

Superego Café
http://www.superego-cafe.com/

Trickcyclists
http://www.trickcyclists.co.uk/

MRCPsych Exam Help
http://www.mrcpsych.com/

Other resources are available
Sources Used:

The Royal College of Psychiatrists
Website: http://www.rcpsych.ac.uk
Handbook for Inceptors
Curriculum for Basic Specialist Training
Assessments Online

The General Medical Council
Website: http://www.gmc-uk.org

The Irish College of Psychiatrists
Psychiatry Training in the Republic of Ireland

The British Medical Association
Junior doctor’s handbook

The Northern Ireland Medical and Dental Training Agency

The Bamford Review of Mental Health and Learning Disability
Website: http://www.rmhdni.gov.uk
EXPRESSION OF INTEREST

The Association of Psychiatrists in Training (APINT) in Northern Ireland affiliated with the Royal College of Psychiatrists to become the regional trainee section in June 2004.

The Trainee Section of The Northern Ireland Division of The Royal College of Psychiatrists aspires to democratically represent the interests of all psychiatry trainees in the province. It is hoped that with the establishment of the Northern Ireland Division we will be able to have a greater say in the running of the college and, in particular, our own training.

It is important to establish a list of trainees who wish to be informed of and involved in the Trainee Section’s activities. If you are interested please return the attached form to the address below.

Membership of the Trainee Section is free and carries no additional obligations.

You may be contacted about Trainee Section activities which include regular joint academic meetings for all trainee grades (CT1-6) held in Clifton House through the course of each year.

Dr G Woods
Chairperson
CT1-3 Trainees Group
Northern Ireland Division of the Royal College of Psychiatrists

Please see attached data protection statement – appendix iii

I confirm that I am interested in receiving information relating to the Trainee Section of The Northern Ireland Division of The Royal College of Psychiatrists. Please send me details about becoming a Pre-Membership Trainee of the Royal College of Psychiatrists.

PLEASE PRINT CLEARLY

Name: ..............................................................
Hospital/ Employer: ..............................................................
Home Address: ..............................................................

... ..............................................................

Personal (home) e-mail address: ..............................................................
Work e-mail address (if appropriate): ..............................................................

Please return to:
Nora McNairney – Division Manager
The Royal College of Psychiatrists
Northern Ireland Division
Clifton House - BCS
2 North Queen Street
Belfast
BT1 5 IEQ
DATA PROTECTION ACT 1998 STATEMENT

In accordance with the Data Protection Act 1998, the College will process personal data, or any part of it, (including any photograph), by any means, for the purpose of registering members and associates and/or in pursuit of the College’s objectives generally.

The College may transfer and release this data (or any part of it) to Officers, staff and committees of the College, for its ongoing administration and/or in the pursuit of its objectives generally.

This data (or any part of it) may also be disclosed on the College's website, including by way of lists of its members and associates, lists of speakers, attendees at its meetings/conferences, as part of its publication of examination results, by way of information on the authors of its publications, for the purposes of its newsletters and annual reviews, and/or for any other purposes related to its website or the College's objectives generally.

The College's Data Controller is the Chief Executive, and the nominated representative for the purposes of the Data Protection Act 1988, is the Membership Manager.

If you have any comments on, or if you object to the terms of, this Statement, please contact the Membership Manager immediately at latkinson@rcpsych.ac.uk.

All members and associates have a right to access the personal data which the College holds and which relates to them. To obtain a copy of such data (or any part of it), in the first instance, please contact the Membership Manager at the above e-mail address. The College is entitled to make a charge for the provision of such data (or any part of it).

Such personal data (or any part of it) may also be disclosed to third parties approved by the College, for the purposes of research, statistical analysis and related activities, within the field of psychiatry, in the pursuit of the College's objectives generally. Any such data (or any part of it) comprising home contact details or sensitive data (including data relating to health or race) will not be disclosed without prior consent.

If you do not wish such data (or any part of it) to be sent to such third parties, please contact the Membership Manager at latkinson@rcpsych.ac.uk
<table>
<thead>
<tr>
<th>POLICY COMMITTEES</th>
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<td>Eastern</td>
<td>Academic</td>
<td>Perinatal</td>
<td>Policy Coordination</td>
<td>Affiliates and Staff &amp; Associate Specialist Members</td>
<td>Adolescent Forensic</td>
<td>Overseas Doctors Training Committee</td>
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<td>English Division Chairs to form an English Policy Committee, the remit of which will include legislation and parliamentary matters (Division Chairs/policy leads to form a Policy Coordination Committee) (see Standing Committees)</td>
<td>London</td>
<td>Addictions</td>
<td>Eating Disorders</td>
<td>Coordination</td>
<td>ECT and Related Treatments</td>
<td>Mental Health Informatics</td>
<td>Examinations Sub-Committee</td>
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Appendix v