The Royal College of Psychiatrists is grateful to the following organisations for their support of College research projects and academic activities, the mental health information programme and RCPsych Awards during the past year:

- Cambridge University Press
- Charitable Monies Allocation Committee of St Andrew’s Hospital, Northampton
- Department of Health
- Health Foundation
- National Institute for Health and Clinical Excellence
- NHS National Institute for Health Research
- 108 NHS providers of mental health services in the UK and Ireland
- Oxford University Press
- Priory Group
- St Andrew’s Healthcare
- Wiley-Blackwell

We received generous bequests from the late Dr Margaret Mary Slack FRCpsych, and the late Mary Whewell Taylor.

We also received donations for College Prizes in memory of the late Dr Alexander Mezey FRCpsych and the late Dr Brian Oliver FRCpsych.

The College also thanks the many members, non-members and organisations that have given to College campaigns and appeals, and our advertisers for their continued business.
Call for membership data

The following are Members and Associates of the College for whom there is no address currently available. If any member has details of any of those listed below, please contact the Membership Data Office.

Dr A Abraham
Dr M Z Al-Qassim
Dr M Anil
Dr L Barron
Dr F Berry
Dr S Brett
Dr E A Brown
Dr A E Buck
Dr D F Buckle
Dr J Chandrakanth
Dr SK Chand
Dr J Chappell
Dr P E Copus
Dr K J Craig
Dr V E Dadds
Professor E Dimitriou
Dr T Dormann
Dr A W Drummond
Dr D M Forshaw
Professor L Frighi
Dr J G Garai
Dr R Gordon
Dr I F Gough
Dr A M Gray
Dr N Gupta
Dr A Guthrie
Dr K F Hirsch
Dr I Izediuno
Dr M H B Joyce
Professor M Kaila
Dr G D A Kearney
Dr F J Kelleher
Dr C Kenton
Dr N J P Killala
Dr F King
Dr A I Koryagin
Professor D J Lewis
Dr E Lianantonakis
Dr J S B Lindsay
Dr R MacDonald
Professor E Dimitriou
Dr D L MacKenzie
Dr T K MacLachlan
Dr J McMichael
Dr T Mahmood
Dr S G R Martens
Dr M B Matthews
Dr A Millan
Dr N Mitchell
Dr E B M Murphy
Dr MA Mustapha
Dr M P A O’Donnell
Dr K A O’Keeffe
Dr G O’Leary
Dr D Oluwashugun
Dr M H Paterson
Dr E W A Pitch
Dr B J Phillips
Dr J L Pisani
Dr G Rajyeh
Dr SKK Rayapureddy
Dr S M Saleh
Professor A J P Sherston-Baker
Dr M Singh
Dr R A Stepanek
Dr A C Thompson
Dr J I Timothy
Dr S Veerasamy
Dr T P S Watts
Dr J N Williams
Dr C E Yeates

Every attempt is made to maintain an up-to-date database of the membership. If your membership details have changed recently, please contact the Membership Data Office (+44(0)20 7235 2351 ext. 6281; email: membership@rcpsych.ac.uk).
PRESIDENT’S WELCOME

Professor Dinesh Bhugra

Last year, I said that 2009 had been a year of change in mental health services. This is true again in 2010. In England we have seen the publication of the NHS White Paper and are now awaiting the Health Bill – whose reforms will revolutionise the delivery of healthcare in this country.

The College has had extremely fruitful discussions about the commissioning of mental health services with the Royal College of General Practitioners and the NHS Confederation. Co-commissioning between GPs and specialists is the way forward, and we anticipate the development of joint guidance and a training package early next year.

The public health White Paper is out and I am delighted to see mental health given such a strong presence. The new mental health strategy is due in January 2011. I have sat on the strategy boards for the development of both of these, ensuring that the voice of our profession is heard at the very highest level, and I am pleased with the results.

The College continues to work closely with colleagues from other medical specialties. This year, I sat on the Review Panel of the Foundation Training Programme, chaired by Professor John Collins, which reported in November. I also set up a joint physical and mental health forum at the Academy of Medical Royal Colleges.

In November, we held the second RCPsych Awards. Over 200 people attended the ceremony at the Royal Society of Medicine, and the day was a wonderful celebration of the excellent work carried out by psychiatrists and mental health professionals across the UK (see pages 12 and 13 for pictures of the winners).

It is impossible to capture the enormous amount of work that has been done over the past 12 months within limited space. I hope this Review shows some of our major achievements, and how the College is continuing to meet its three core purposes (see left). As this is the last time I shall write for the Annual Review as President, I would like to take the opportunity to thank everyone – staff, Officers, Members and Fellows – for their constant support. I am sure the College can look forward to a hugely successful 2011.

Professor Dinesh Bhugra
President

The core purposes of the Royal College of Psychiatrists are to:

- set standards and promote excellence in psychiatry and mental healthcare
- lead, represent and support psychiatrists
- work with service users, carers and their organisations
HIGHLIGHTS OF THE YEAR 2010

The College and its members promoted its core purposes (see p. 1) with a broad range of activities throughout 2010.

Recognising excellence
At the RCPsych Awards 2010 Dr Michele Hampson won ‘Psychiatrist of the Year’ and Professor Sir Michael Rutter was given the Lifetime Achievement Award (see pp. 12–13). Professor Sheila Hollins was named a non-party political life peer by the House of Lords Appointment Commission in recognition of her contribution to learning disability and mental health.

Working with service users and carers
Our range of information and ‘key facts’ leaflets continues to grow, with new leaflets including ‘Mental health in pregnancy’, and an increasing number of translations into other languages (17 at present, including Chinese, Farsi and Polish). The leaflets are all available online and are very well used – the most popular, on cognitive–behavioural therapy, receives over 20,000 hits a week. Service user and carer involvement continues to increase in all areas of College activity. A successful meeting was held in December on employment issues and the physical health of service users.

Working with government
Before the General Election, the College Policy Unit produced documents highlighting mental health issues aimed at both prospective MPs and their constituents. The College in Wales worked with the Welsh Assembly Government in areas including the Legislative Competency Order, a review of approved clinician arrangements and Section 136 guidance. In Northern Ireland the College has briefed parliamentarians on the importance of the Mental Capacity Bill, and in Scotland has continued to work closely with government to keep mental health high on the national agenda.

Working with other organisations
We have worked with a number of partners to develop useful documents. For example, we are part of a group, including the Royal College of General Practitioners and the National Mental Health Development Unit, which has set up a Joint Commissioning panel for Mental Health. Guidance on responding to people with mental ill health or learning disabilities was developed for the Association of Chief Police Officers, drawing upon the expertise of health professionals, charities, third sector organisations and social care workers.

Around the country
Links between College Divisions continue to strengthen, exploring the possibilities for joint working and joint meetings, such as the Celtic Divisions Conference which included delegates from Wales, Scotland, the Republic of Ireland, Northern Ireland and Brittany.
HIGHLIGHTS OF THE YEAR 2010
The College and its members promoted its core purposes (see p. 1) with a broad range of activities throughout 2010

Encouraging higher standards
Membership of projects run by the College Centre for Quality Improvement has continued to grow and new standards are regularly being developed. The first national audit of dementia care in general hospitals was undertaken and will contribute to improving this important area of care. Several new projects were established, covering areas such as prescribing antipsychotics for children and adolescents, a national audit of schizophrenia, and accreditation for rehabilitation services.

Informing people
A number of the College’s publications received awards, including the BMA Medical Book Award for Primary Care and Mental Health. We continue to be certified as a quality provider of health and social care information by the Information Standard. Liaison with local and national media also continues to improve, with panels of College members around the country who respond to press or other media calls.

International activities
The College has signed a number of memoranda of understanding with colleges and associations overseas, including ones in Bangladesh, Brazil, India, Pakistan, Sri Lanka and Thailand. The President also travelled extensively to collaborate with key international agencies, and the College’s International Volunteer programme has sent psychiatrists overseas to places including the Solomon Islands, Ghana and Haiti (where Dr Peter Hughes provided help in the immediate aftermath of the earthquake).

Education and training for psychiatrists
The curricula for psychiatric training have been revised. Portfolio Online was launched, a performance-based tool designed to promote the use of the postgraduate psychiatric curricula in educational planning and to enhance learning based on reflection. The CASC (Clinical Assessment of Skills and Competencies) examination took place in Hong Kong in May. This was the first overseas sitting of the CASC, and is part of our programme of developing the College’s Membership examination internationally.

Leadership and management
Leadership of health services by doctors, within and in the context of multi-disciplinary teams, is vital in ensuring best possible patient care. The College’s local networks of medical directors continued to meet to provide support and information sharing, and we produced a report on leadership based on input from focus groups and other College activities. Work has also taken place to embed into the curricula for training in psychiatry the skills and competencies needed to ensure that psychiatrists are effective clinical leaders.
EXCELLENCE: PROMOTING EXCELLENCE IN PSYCHIATRY AND MENTAL HEALTHCARE THROUGH QUALITY IMPROVEMENT

Dr Adrian Worrall, Head, College Centre for Quality Improvement (CCQI)

All National Health Service (NHS) trusts and other NHS mental healthcare providers in the UK now participate in the work of the College Centre for Quality Improvement (CCQI). Some local services take part in as many as ten of the Centre’s projects which include accreditation programmes (Box 1), quality improvement networks (Box 2) and national clinical audits (Box 3). The work includes most of the psychiatric subspecialties, with particularly strong programmes in child and adolescent mental health services (CAMHS), old age psychiatry and forensic psychiatry.

The accreditation programmes and quality improvement networks share a common approach to engage local clinical teams in the process of improving services. Standards are set based on evidence and consensus; local teams are supported to review their own service against the standards and then to receive a peer-review visit from a team made up of clinicians from other participating services – the teams often also include service users. The results are compiled and fed back to the service concerned with recommendations about strengths and aspects of the service that could be developed or further strengthened. If the programme offers accreditation, it is at this point that a recommendation is made by an advisory group and the final decision made by a key College committee. Services have reported numerous examples of improvements made as a result and there is increasing interest from other medical Royal Colleges in this model of professionally

Box 1  Accreditation programmes

- Electroconvulsive therapy clinics*
- Acute adult psychiatric wards*
- Adult assessment wards*
- Old age psychiatric wards*
- Learning disability in-patient units*
- Prison therapeutic communities
- Psychiatric liaison services

Box 2  Quality improvement networks

- CAMHS in-patient units*
- CAMHS community services*
- Forensic mental health services*
- Memory clinics
- Prescribing Observatory for Mental Health
- Therapeutic communities
- Perinatal mental health service
led quality improvement. Some typical comments are reported in Box 4.

The work is funded by a combination of grants (from government departments, the Health Foundation and the Healthcare Quality Improvement Partnership) and subscriptions are paid by participating services. Those projects marked with an asterisk in Boxes 1 and 2 are funded solely by subscriptions.

The CCQI also manages ACP 360, the College’s multi-source feedback system for psychiatrists. This enables psychiatrists to collect structured feedback from patients and colleagues in the domains of working with colleagues and relating to patients that are essential to good psychiatric practice. Over the past year, the questionnaires have been adapted for child and adolescent and learning disability psychiatrists. By October 2010, 3200 psychiatrists had enrolled for ACP 360.

The Health Services Research Team has recently been incorporated into the CCQI. Their previous work includes a major programme of research about in-patient CAMHS. This provided important evidence about the effectiveness of in-patient care and described the pathway through care of people who were denied admission because no bed was available.

The work has led to the CCQI being commissioned to develop standards about age-appropriate environments for young people who require in-patient care. Other completed research includes an evaluation of the NHS Mental Health Improvement Partnership programme, which identified factors that enable and obstruct service improvement, and the development of a questionnaire to measure the experience of carers of people with mental health problems. The resulting Carers Wellbeing and Support questionnaire will be incorporated into all of the NHS Programme for IT mental health systems. New work includes leading the UK arm of a major study of the prevalence of mental disorders in older people, funded by the European Union. This study collects data on the prevalence, incidence and prognosis of mental disorders, using representative samples of older people living in the community across six countries (Germany, Italy, Israel, Spain, Switzerland and the UK). This includes assessing health service needs, investigating to what extent existing services are used by older people and which specific barriers to utilisation may exist.

### Box 3 National clinical audits

- National Audit of Psychological Therapies (focus on therapies for anxiety and depression)
- National Audit of Dementia Care (focus on care of people with dementia in medical and surgical wards)
- National Audit of Schizophrenia

### Box 4 Comments from units accredited by the CCQI

“Being accredited with excellence raised the spirits of the whole service and increased interest in liaison psychiatry”

“Accreditation helped the team argue to retain the clinical lead in the context of cuts”

“Excellent accreditation raised our profile in the trust and within the primary care trust”
LEADERSHIP: LEADING, REPRESENTING AND SUPPORTING PSYCHIATRISTS

Dr Laurence Mynors-Wallis, Registrar

Effective clinical leadership underpins high-quality mental healthcare and will be essential to realising the long-term vision set out in July 2010 in the NHS White Paper *Equity and Excellence: Liberating the NHS*. Psychiatrists are key to clinical leadership both within their teams and also in leadership and management roles within trusts and in regional and national roles.

The College is supporting leadership for psychiatrists in several ways. First, Dr Andy Brittlebank, with colleagues, has put the framework of medical leadership competencies into the curriculum for trainee psychiatrists. This will clarify the skills needed to undertake leadership for consultants. Second, the College is celebrating, through the annual RCPsych Awards, those psychiatrists who provide leadership across the spectrum of the profession (see pages 12–13). Third, in June the College published *The Role of the Consultant Psychiatrist*. This report helps to clarify the leadership role expected of consultant psychiatrists within multidisciplinary teams and within organisations as a whole. Building on this document, we intend to develop training in leadership principles and skills with an initial focus on materials that can be provided online. The College is currently looking at whether to recognise the value of leadership and management within its structures.

Nationally and internationally, the College has a vital role in representing the expertise of the psychiatric profession to governments and other organisations. Since 2008, much of our policy and public affairs work has been guided by our Fair Deal Campaign. For example, in November we published *No Health Without Public Mental Health: The Case for Action* (see opposite), a position statement laying out the evidence showing that physical and mental health are intertwined. We hope that this document, which was launched in Westminster, will be used by government at all levels – as well as wider society – to ensure that mental health remains at the heart of the public health agenda. Other highlights from Year 2 of the Fair Deal campaign, showing how the College continues to lead the way in the mental health sector, are summarised opposite.
LEADERSHIP: FURTHERING THE FAIR DEAL PRIORITIES – YEAR 2 OF THE CAMPAIGN

Chris Fitch, Research Fellow and Dr Rowena Daw, Head of Policy Unit

Launched at the College’s 2008 Annual Meeting in London, Fair Deal promotes equal rights and fairness for mental health service users, carers, and those working with them (www.rcpsych.ac.uk/fairdeal). It challenges psychiatrists wherever they are based to address inequality, unfairness and discrimination across eight key areas, and to collaborate with others to achieve this.

Much has been achieved in 2010, including:

Helping people with mental health problems get into employment – the College was commended by the Human Rights and Equality Commission for its role in getting “the most important new clause for disabled people” into the new Equality Act, which will break down some of the barriers stopping people with mental health problems getting work (www.rcpsych.ac.uk/work).

Responding to the challenges that self-harm and suicide presents to College members, service users and carers – chaired by College member, Lord John Alderdice, evidence taken from over 1500 psychiatrists, service users, carers and other groups has pointed to changes in assessment, management and care. The College is now working to help implement these (www.rcpsych.ac.uk/risk).

Action to stop age discrimination in mental health services – the launch of our position statement Making Equality a Reality played an important part in the Government’s announcement to outlaw such discrimination from 2012 (www.rcpsych.ac.uk/oldage).

Other highlights included a new tool to improve the care provided to Black and minority ethnic in-patients, an influential programme of thought and work on public mental health, economic analyses of the cost of out-of-area treatments in mental health, and over 50 different responses to major Government consultations (for more see www.rcpsych.ac.uk/fairdeal).

Led by psychiatrists, but always in collaboration – Fair Deal is predicated on psychiatrists leading from the front, championing the rights of patients, other service users, and carers, while also working with government and other agencies to drive forward the Fair Deal agenda.

A great deal still remains to be done. With reforms across the UK and continuing economic challenges to us all, achieving a Fair Deal for mental health has never been more important or relevant. We look forward to a fruitful, and final, third year.
ENGAGEMENT: WORKING WITH SERVICE USERS, CARERS AND THEIR ORGANISATIONS

RCPSYCH IN NORTHERN IRELAND: WORLD MENTAL HEALTH DAY

Dr Peter Sloan, Chair, Northern Ireland Public Education Committee

Northern Ireland psychiatrists celebrated World Mental Health Day on 10 October with 300 school students, the Health Minister and an indie rock band, who all took a pledge not to make fun of mental health problems.

The Northern Ireland Public Education Committee organises an event each year as part of its schools engagement programme, which also includes outreach work to schools across Northern Ireland. This year, Health Minister Michael McGimpsey opened the event with an announcement of plans for a government stigma initiative.

The event host was Dr Stuart Flanagan, from BBC Radio 1’s Sunday Surgery programme. During the event he talked to 16-year-old Maebh Harper, who has experienced mental health problems, and to me, about stigma and recovery.

The College, together with the Western Health and Social Care Trust, also commissioned a play about stigma and mental wellbeing called Wise in the Head. The play was previewed by students from Holy Cross College, Strabane.

On the day, more than 80 individuals and organisations pledged to Take a Stand on Stigma. The list included many well-known names, including Alastair Campbell and Snow Patrol lead singer Gary Lightbody. After a formal morning education session, the kids tried out activities that promote good mental health including relaxation, a laughter workshop, African drumming and Zumba dancing. The event was supported by the Public Health Agency.

The event was hugely successful, as it was able to reach school students on their own level. It provided an opportunity to discuss mental health problems, the impact of stigma and the ability to recover without ‘preaching’. It also showed how having fun supports good mental health.

A Plastic Rose, one of Northern Ireland’s hottest bands, came to the event to lend support on behalf of Northern Ireland’s music industry. They signed the pledge with pupils from Ashfield High.
RCPSYCH IN SCOTLAND: POLITICS AND THE ARTS

Dr Peter Rice, Chair, RCPsych in Scotland

In June 2010 the Scottish Government launched a Scottish Dementia Strategy, and our members from the Old Age Psychiatry Section have been working hard to ensure psychiatry is well represented on the various strands of implementation work. There is a Cross-Party Group on Alzheimer’s in the Scottish Parliament and the College is represented on it, alongside colleagues in the health, social care and voluntary sector. Alzheimer’s Scotland were our partners in a fringe event we organised at the Scottish National Party’s conference in October, highlighting the care and treatment of people with dementia who are admitted to the acute sector.

The College was once again proud to be a partner in the ground-breaking Scottish Mental Health Arts and Film Festival, which saw over 200 events take place around Scotland. The festival engaged audiences in a variety of ways through music, drama, dance, film and poetry, all with messages about positive mental health, recovery and stigma. Media coverage for the festival was again excellent and the festival is now gaining a reputation not only in the UK but internationally as a vehicle to combat stigma. Our members contribute to the festival by providing input to the programming, sitting on discussion panels, and giving help and advice on some of the research and evaluation work that goes on around the festival.

SOUTH WEST DIVISION: RECOVERY

Dr Mike Metcalfe

The South West Division Executive is working with local service users to help them share their stories of recovery. The project, Recovery South West, is part of the Fair Deal campaign (see p. 7).

The power of narrative in recovery, through enabling individuals to reclaim their own history and express it in personal terms, is now widely acknowledged. Positive accounts of recovery are an inspiration to others, giving empowering examples of peer experience and have a major role in combating stigma.

Recovery South West will progress to the production of a book which will showcase a number of the recovery stories, and will be widely circulated both as a vehicle to combat stigma and as a therapeutic tool.

A website is currently under development and this will be active during 2011. The primary focus of the website will be to give individuals an opportunity to present their own stories of recovery, expressed through a variety of media including personal narratives, art, poetry and video clips. The site will highlight recovery-orientated initiatives, projects and events around the South West region, as well as providing signposting links to a wide range of other recovery resources.

Recovery South West is coordinated by a steering committee, with a membership which is aimed to be 50% experts by experience (service users and carers) and 50% professionals. As the project is self-funding, a community interest company has been established to facilitate fundraising.
PSYCHIATRIC BULLETIN BECOMES THE PSYCHIATRIST

Professor Patricia Casey, Editor, The Psychiatrist

In 1971, with the formation of the Royal College of Psychiatrists, a College newsletter entitled *News and Notes* began publishing information relating to College activities. Renamed *Bulletin of the Royal College of Psychiatrists* in 1977, it began gradually accepting descriptive papers about service-related matters and developed into the *Psychiatric Bulletin* of recent years – no longer a newsletter for a membership organisation, but a learned, peer-reviewed journal. Rare among learned journals, the *Bulletin* was often read cover-to-cover by the members receiving it, because it tackled clinical issues that affect everyday practice, written in an accessible style.

To signal the progress made by the *Bulletin*, and to support its future development, the Editorial Board, with the backing of the Publications Management Board of the College, took the decision to relaunch the journal under a new title: since January 2010 it has become *The Psychiatrist*. While the *Bulletin* was held in affection, the name harks back to the parochial newsletter of the 1970s. Why *The Psychiatrist*? Titles that reflect the multidisciplinary nature of modern psychiatric practice were considered. But since the main readership will continue to be psychiatrists, it was thought appropriate to include this in some form. Indeed, it was argued that abandoning the term ‘psychiatry’ could be seen as a betrayal of the profession. Papers from other disciplines will continue to be welcomed, but we should not be ashamed to call ourselves psychiatrists or of what psychiatrists do.

Along with a new name, the journal received a makeover, with a change of format to A4 and a brand new design. Each issue features on its cover a photograph linked to one of that month’s papers. Since the May issue these have been selected (and often created) by a Visual Images Editor, Guy Undrill.

*The Psychiatrist* continues to publish research, reviews and comment on matters of current clinical relevance in psychiatric practice, as well as papers on education and training, reviews and obituaries. The scientific quality of the research papers is improving, and I hope to continue this trend without detriment to the readability of the journal. I would like *The Psychiatrist* to be held in as much affection as the *Bulletin* ever was, while making an important contribution to the evidence underpinning our practice as clinicians.
INTERPROFESSIONAL WORKING

Vanessa Cameron, Chief Executive

Many of the College’s activities involve collaborative working across professional boundaries. Such work varies from large-scale collaborations intended to influence national policy across a broad range of areas, to much more tightly focused projects to improve professional practice in specific areas. Here, I would like to highlight just a few examples.

Through the Future Vision Coalition – a group of 11 national mental health organisations – the College continues to influence mental health policy. In July the Coalition outlined the priorities we believe should underpin mental health policy for the next decade in a new report, A Future Vision for Mental Health. Since then, we have been working with the Department of Health on key issues, and have had a significant influence on the development of the new mental health strategy for England (due in January 2011).

We continue to work with other groups to secure better mental health legislation through the Mental Health Alliance, a powerful coalition of 75 organisations. In September, the Alliance published a report on the implementation and impact of the supervised community treatment arrangements, which included the results of a survey of over 500 College members’ views on the use of community treatment orders.

The College is part of the We Need To Talk Coalition – 14 leading organisations who are together campaigning for an increased investment in, and wider access to, psychological therapies in the NHS. In October, the Coalition published We Still Need To Talk, a new report showing that 1 in 5 people are still waiting over a year to access psychological therapies such as cognitive–behavioural therapy or counselling. Later that month, the Coalition welcomed the new investment in talking therapies announced as part of the government’s comprehensive spending review.

Also in October, the College’s joint report with the Royal College of Physicians, MARSIPAN: Management of Really Sick Patients with Anorexia Nervosa, was published, with endorsement by BEAT, the British Association for Parenteral and Enteral Nutrition, the Intercollegiate Group on Nutrition, and the Specialty Advisory Committee on Clinical Biochemistry of the Royal College of Pathologists. It contains comprehensive new guidelines for use in a range of clinical settings to improve the treatment of this condition and reduce the associated mortality.

November saw the launch of a new RCPsych Publications title, Abuse of the Doctor–Patient Relationship (see p. 24), a multi-author book with contributors from nursing, obstetrics and gynaecology, general practice and psychotherapy, as well as psychiatry. The aim of this book is to assist clinicians in their daily relationships with patients and to improve patient safety, and it was launched at a high-profile educational event at the Royal College of Nursing.
Congratulations to the winners of the 2010 RCPsych Awards

The Awards were generously sponsored by:

Diamond sponsor: anonymous donor
Silver sponsors: Priory Group
St Andrew's Healthcare
Other sponsors: Cambridge University Press
Oxford University Press
Wiley-Blackwell

Supported by: Department of Health
Core Psychiatric Trainee of the Year Dr Amanda Deren-Jones

30 members of the Flintshire Early Intervention & Prevention Team and Flintshire Child & Adolescent Team celebrate winning the Specialist CAMHS Provider of the Year Award

NHS Lothian’s Intensive Home Treatment Team scooped the award for Psychiatric Team of the Year

Professor Sir Michael Rutter, who was presented with the Lifetime Achievement Award, chats to ceremony presenter Libby Purves about his career

Two hundred people attended the ceremony at the Royal Society of Medicine
Dr Deenesh Khoosal is a consultant psychiatrist at the Brandon Mental Health Unit in Leicester and Chair of the College’s Trent Division. Here, he discusses his work as a College Trustee and explains how Council manages and controls College affairs.

**Q: How long have you been a Trustee of the College?**
Since 2007. When I was elected Chair of the Trent Division, I automatically became a member of Council and a Trustee of the College.

**Q: What is the role of a Trustee?**
The role is extremely varied. Most importantly, a Trustee’s role is to ensure that the good standing of the College is not compromised. We also need to ensure that the criteria and requirements of the Charity Commission are fulfilled and that robust governance standards are maintained. Trustees participate in all discussions about the future direction of the College, and advise on policies and procedures.

**Q: Can you describe a typical Council meeting?**
We meet six times a year. It is a large meeting, with full representation from the Faculties, Sections, Special Interest Groups and Divisions, as well as service users, carers and College Officers. The day is usually split into two halves. In the morning, we hold a full debate about a topic that has been of particular concern or interest within the College – a recent example is professionalism in psychiatry. In the afternoon, we go through the main agenda.

**Q: What do Council meetings achieve?**
Council is the overarching body that coordinates the work of all parts of the College and makes decisions at the highest level. This decision-making process can be cumbersome at times, but it is important to be democratic. Council members consult their representative bodies about agenda items in advance of the meeting, so their views can be brought to Council to inform their decisions.

**Q: What changes have you seen as a Trustee?**
There have been an awful lot of changes. The College has diversified into several new areas, in response to what is happening nationally as well as internationally. For example, we now have a powerful parliamentary lobby within the College: Tony Zigmond did a sterling job leading the College’s initiative on the Mental Health Act and major pieces of work involving other stakeholders have been done on unemployment, the economic downturn and mental health.

**Q: What do you enjoy about your work for the College?**
It is hard work, but it is worthwhile as there are real opportunities to promote our profession while safeguarding education and training. The College has successfully incorporated the views of service users and carers, which brings a sense of reality to our work. Every Council member has an opportunity to contribute to all discussions, and we do so passionately. This is the most democratic membership College I am aware of. The members are the College, and the RCPsych is greatly enriched by the contribution made by fellows, members, trainees, users and carers.
In August the College launched Portfolio Online, a web-based system to help psychiatry trainees keep track of their professional activities and achievements. It was developed with extensive input from trainees and heads of school, and piloted in three Schools of Psychiatry: East of England, Wessex and Northern.

**Dr Michael Maier, Head, London School of Psychiatry**

“The e-portfolio has been an excellent piece of work that the College can feel proud of. It makes it possible to link the trainee’s progress through the workplace-based assessments with the curriculum – something that has been lacking to date. I am also happy that trainees will no longer have to come to the ARCPs with suitcases-on-wheels containing their paper portfolios. Finally, it gives us the opportunity to easily share information about trainees, making it possible to be more reactive to performance issues and support trainees at an earlier stage.”

**Dr Larissa Ryan, ST4 Old Age Psychiatry and trainee representative on the Portfolio Development Group**

“This has been a very exciting project. The challenge was to build a system which allowed trainees to create an electronic portfolio with essentially the same content as their paper portfolios, but greater accessibility and a capacity to more easily demonstrate curriculum coverage. As a trainee, my aim was for Portfolio Online to be as simple and quick to use as possible, while fulfilling these requirements. We are continuing to develop Portfolio Online in response to trainee feedback. I have been using Portfolio Online this year. I have found spending 10 minutes at the end of the day creating entries reasonably easy, and I hope it will save me a lot of time at the end of the year preparing for ARCP.”

To complete specialty training, trainees are expected to meet the competencies set out in the relevant curriculum – and provide evidence to support this. The e-portfolio aims to replace the old-style paper portfolios, making it simpler for trainees to collate and update all their educational activities, and show documented evidence of how they are developing key skills and meeting required competencies.

The portfolio can support deaneries during the Annual Review of Competence Progression (ARCP), by demonstrating how and what the trainee is learning. It also allows educational supervisors, clinical tutors, training programme directors, college tutors, heads of school and directors of medical education to share information and support a trainee’s progress. In the longer term, Portfolio Online could be a platform for all College members to support their professional development.
President’s Medals were awarded for the first time this year. This new initiative was introduced by Professor Dinesh Bhugra to honour individuals who have made, and continue to make, significant contributions to improving the lives of people with mental illness. In 2010, medals were presented to eight individuals who were chosen for their outstanding contributions in varied fields—research, education, clinical work, advocacy, the media and public policy:

Dr Salih Al-Hasnawi, psychiatrist and Minister for Health in Iraq
Paul Farmer, Chief Executive, Mind
Paul Jenkins, Chief Executive, Rethink
Lynne Jones, former MP and Chair of the All-Party Parliamentary Group on Mental Health
Lord Richard Layard, national advisor, Improving Access to Psychological Therapies
Baroness Molly Meacher, Board Chairman of East London NHS Foundation Trust
Sathnam Sanghera, author and journalist
Dr R. Thara, Director, Schizophrenia Research Foundation, India

The Rt Hon The Lord Adebowale CBE
Professor German Berrios FRCPsych
Professor Sir Ian Gilmore
Professor John Gunn FRCPsych
Professor Robin Murray FRCPsych

Lord Richard Layard

The Rt Hon The Lord Adebowale

Baroness Molly Meacher

Baroness Molly Meacher
IN MEMORIAM

The following members and associates of the College died between December 2009 and December 2010

Abel, William Jonathan (b. 1915)
Affleck, Robert Cameron (b. 1980)
Alderton, Harvey Randall (b. 1927)
Antun, Fuad Tawfik (b. 1940)
Ballinger, Constance Barbara (b. 1941)
Caracciolo, Albert (b. 1956)
Cazzullo, Carlo Lorenzo (b. 1915)
Chaudhri, Muhammad Asghar (b. 1939)
Chaudhry, Haroon Rashid (b. 1955)
Clark, David Hazell (b. 1920)
Collings, Paul Anthony James (b. 1957)
Corboy, Catherine Bernadette (b. 1924)
Cronin, Denis Patrick (b. 1924)
Davidian, Harutiun (b. 1924)
Davies, David Robert (b. 1951)
Desai, Navnitlal Madandas (b. 1934)
Dmitrieva, Tatiana (b. 1951)
Duffy, John Peter (b. 1930)
Edelman, Natasha (b. 1936)
Elmhirst, Susanna Isaacs (b. 1921)
Evans, Ann Christine (b. 1945)
Fernandez, Margaret Dorothy (b. 1936)
Forti, Alexander Donald Augustine (b. 1943)
Gillmer, Ralph Ellis (b. 1923)
Gittelsohn, Benjamin Leon (b. 1940)
Gladstone, Gerald Sewell (b. 1915)
Gledhill, Raymond Clive (b. 1918)
Gobikrishnan, Brahman Nallanathan (b. 1964)
Hall, Digby William (b. 1932)
Henderson, John Hope (b. 1929)
Inglis, Margaret Rose (b. 1925)
Jones, Kenneth Simpson (b. 1922)
Jones, Kathleen (b. 1922)
Lomas, Peter Eric Samuel (b. 1923)
Lynch, Sophie Joanne (b. 1973)
Mace, Christopher John (b. 1956)
Markillie, Ronald Eric Douglas (b. 1917)
McConnell, Pamela (b. 1960)
McDonald, Graeme Harding (b. 1958)
Murphy, Denis John (b. 1950)
Pedder, Jonathan Richard (b. 1937)
Sandison, Ronald Arthur (b. 1916)
Scott-Brown, Alastair William (b. 1934)
Smith, Stanley (b. 1918)
Sutherland, Eric Lynton (b. 1927)
Thaya-Paran, Rasakesari (b. 1937)
Tripathi, Bankteshwar Mani (b. 1954)
Whittet, Martin Matthew (b. 1918)
Wing, John Kenneth (b. 1923)
Yesufu, Adekunle Bayode (b. 1970)
Zeelie, Sean Pierre (b. 1970)
TREASURER’S REPORT

It is my pleasure to report on the financial year ending 31 December 2009.

2009 Financial overview

The College’s income amounted to £15 m with expenditure totalling £14.4 m. We concluded the year with an operational surplus of £598 k before unrealised gains on investments of £111 k were included.

A long-term challenge for the College continues to be securing premises beyond the expiry of the lease of 17 Belgrave Square in 2034. Consultants Tilney Shane were appointed in 2008 to carry out an accommodation review and presented their detailed findings in 2009. The College is currently in the process of formulating a strategy taking into account the advice from the consultants and its own research. Purchasing a property would inevitably necessitate a higher cash commitment. Based on the current pricing of the space requirements an estimated £30 m would need to be raised. Consequently, the College must identify means of raising sufficient funds. Although the College has not allocated resources to the New Building Fund for the past 2 years, it has compensated for this by allocating £500 k in 2009.

RCPsych Awards

Following the President’s initiative, the inaugural ceremony of the RCPsych Awards was held in 2009. The College is extremely grateful to the late Helen Margaret Stevenson who bequeathed it £116 k this year; £25 k per year of this bequest will contribute to the funding of the RCPsych Awards for the next 2 years.

Hitherto the College has been a limited beneficiary of bequests but it should take action so that this may change in the future.

Growth in membership of the College

Overall membership of the College has continued to grow, albeit at a slower rate of 6.5% (2008 – 8.5%) increasing to 15,097 (2008 – 14,180). The total number of members includes 2,668 from overseas across grades. The uptake of the new Specialist Associate grade has seen an increase from 57 to 104 members in 2009.

Income

Income from membership subscriptions has increased by 8.2% generating approximately £4.25 m.

In 2009 the Development Fund raised a total of £795 k compared with £482 k in 2008. Income from the Annual Meeting and Faculties Sections and Divisions and Special Interest Groups (FSDSIGs) events as well as income from the College Centre for Quality Improvement (CCQI), the College Education and Training Centre (CETC), Examinations and other College activities has contributed to the Development Fund.

The network subscription income from CCQI has increased by 28% (£315 k) compared with the same period in 2008. The CETC generated an overall surplus of £206 k (2008 – £65 k) before overheads and Development Fund contributions were taken into account. The College will continue to monitor this trend following the transfer of CETC into the Professional Standards department. Net income from Continuing Professional Development Online has nearly doubled to approximately £131 k (2008 – £68 k). Income from the MRCPsych Examinations has reversed the previous year’s losses. The net income generated from FSDSIGs conferences has decreased by circa £129 k despite an increase in support.
Expenditure

The Divisional offices have continued to expand. Direct support to Divisions is funded by general funds and has not been recharged to the Divisions to date. The cost of this support in 2009 was £871k (2008 – £741k). The cost for the Divisional staff totalled approximately £438k in 2009 (2008 – £382k) excluding the former Irish Division. Additional staff have been recruited for the Eastern, London, Northern Ireland, South Eastern and South West Divisions in 2009. The Welsh Division will also gain additional staff in 2010.

The direct support for the Faculties and Sections has also increased from £214k to £235k. Details of Division, Faculty and Section finances may be obtained by College members through the links on the College’s relevant web pages (http://www.rcpsych.ac.uk/members/divisions.aspx and http://www.rcpsych.ac.uk/specialties/faculties.aspx).

The costs of the Policy Unit in 2009 were £383k compared with £238k in 2008. The Service Users’ Recovery Forum (SURF) and the Carers’ Forum representatives have made valuable contributions to College policy work and consultations. This year total expenditure on these forums was approximately £50k.

The College continues to grow in other areas with staff costs amounting to £6.5m in 2009 (2008 – £6m). Although some staff leaving the College have not been replaced, the total number of staff has increased from 166 (excluding the former Irish Division) to 172.

This year the College has been able to maintain effectively the downward pressure on travel costs and capitalise on significant reductions achieved the previous year. Catering costs have come in significantly below budget. These savings must be maintained or enhanced where possible.

Governance

In 2009 two induction days were held for new Trustees and Financial Officers of the FSDSiGs. These emphasise that Trustees need to be clear at all times that it is their joint responsibility to ensure the financial governance of the College as a whole and not only specific constituencies or departments of the organisation. Representatives of Faculties, Divisions and directly elected members of the Council continue to sit on the Finance Management Committee.

College investment portfolio

Financial markets finished the year at close to highs reached at the end of the third quarter. At the end of December, the College’s investment portfolio had a value of £993k to give an annual return of 11% compared with a loss of 21% in 2008. Owing to the College’s prudent financial management most of the College’s assets were in cash (£5.3m) and as a result the College has been less affected by the adverse market conditions.

Conclusion

2009 has been a successful year financially. Charitable and other activities continue to be dependent on effective income generation. It is anticipated that there will be further growth in the coming year in a number of areas, including examinations and online publications. Despite some positive economic news, national recovery is likely to be long and slow. Furthermore, the post-election environment in which the College will be operating is likely to be one that will prove to be testing to its finances. The Trustees will continue to manage its finances with appropriate and obvious caution in the coming year.

Professor George Ikkos
Honorary Treasurer
9 April 2010
### Statement of Financial Activities – Year to 31 December 2009

<table>
<thead>
<tr>
<th>Unrestricted Funds £000</th>
<th>Restricted Funds £000</th>
<th>Total Funds 2009 £000</th>
<th>Total Funds 2008 £000</th>
</tr>
</thead>
</table>

#### Incoming Resources

**Incoming resources from generated funds**
- Voluntary income – donations and gifts: £133
- Investment income and bank interest: £97

**Incoming resources from charitable activities**
- Standard setting and research: £1,736
- Education and training: £5,425
- Member services and support: £4,263
- College campaign and public education: £48
- Central College development: £795
- Prize funds: –

**Total incoming resources**
- £12,507
- £2,493
- £15,000
- £13,540

#### Resources Expended

**Cost of generating funds**
- Activities for generating funds: £25
- Investment management costs: £8

**Charitable activities**
- Standard setting and research: £2,719
- Education and training: £5,509
- Member services and support: £2,310
- College campaign and public education: £1,081
- Prize funds: –

**Goverance costs**
- £346

**Total resources expended**
- £11,998
- £2,404
- £14,402
- £13,494

**Net incoming resources before transfers**
- £509
- £89
- £598
- £46

**Transfer between funds**
- £7
- (£7)

**Net incoming resources before other recognised gains and losses**
- £516
- £82
- £598
- £46

**Other recognised gains and losses**
- Gains/(losses) on investment assets: £111

**Net movement in funds**
- £627
- £82
- £709
- (£199)

**Reconciliation of funds**
- Total funds brought forward: £5,980
- £412
- £6,392
- £6,591

**Total funds carried forward**
- £6,607
- £494
- £7,101
- £6,392
### BALANCE SHEET AS AT 31 DECEMBER 2009

<table>
<thead>
<tr>
<th></th>
<th>2009, £000</th>
<th>2008, £000</th>
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<tbody>
<tr>
<td><strong>Fixed assets</strong></td>
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<tr>
<td>Tangible assets</td>
<td>2,303</td>
<td>2,070</td>
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<tr>
<td>Listed investments</td>
<td>993</td>
<td>890</td>
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<tr>
<td><strong>Total</strong></td>
<td>3,296</td>
<td>2,960</td>
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<td><strong>Current assets</strong></td>
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<tr>
<td>Stocks</td>
<td>86</td>
<td>117</td>
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<td>Debtors</td>
<td>2,036</td>
<td>1,829</td>
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<tr>
<td>Short-term bank deposits</td>
<td>2,000</td>
<td>3,000</td>
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<tr>
<td>Cash at bank and in hand</td>
<td>3,354</td>
<td>1,577</td>
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<tr>
<td><strong>Creditors: amounts falling due within one year</strong></td>
<td>7,476</td>
<td>6,523</td>
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<tr>
<td><strong>Net current assets</strong></td>
<td>4,065</td>
<td>3,432</td>
</tr>
<tr>
<td><strong>Creditors: amounts falling due after more than one year</strong></td>
<td>260</td>
<td>–</td>
</tr>
<tr>
<td><strong>Total net assets</strong></td>
<td>7,101</td>
<td>6,392</td>
</tr>
</tbody>
</table>

| Represented by:        |            |            |
| **Funds and reserves** |            |            |
| **Income funds**       |            |            |
| Restricted funds       | 494        | 412        |
| Unrestricted funds     |            |            |
| Designated funds       | 4,209      | 3,364      |
| General funds          | 2,398      | 2,616      |
| **Total**              | 6,607      | 5,980      |
| **Summarised accounts** | 7,101      | 6,392      |

**Incoming resources 2009: £15.0 m**

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<tr>
<td>Member services and support</td>
<td>29%</td>
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<tr>
<td>Education and training</td>
<td>36%</td>
<td></td>
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<tr>
<td>Other</td>
<td>8%</td>
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**Resources expended 2009: £14.4 m**

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<table>
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<tr>
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</thead>
<tbody>
<tr>
<td>Member services and support</td>
<td>16%</td>
<td></td>
</tr>
<tr>
<td>Education and training</td>
<td>39%</td>
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</tr>
<tr>
<td>Other</td>
<td>8%</td>
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</tr>
<tr>
<td>Standard setting and research</td>
<td>35%</td>
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**Respective responsibilities of Trustees and auditors**

The Trustees confirm that the summarised accounts on pages 20 and 21 are a summary of the information extracted from the full Annual Report and Accounts, which were approved on 9 April 2010. The summarised accounts may not contain sufficient information to allow a full understanding of the financial affairs of The Royal College of Psychiatrists. Copies of the full accounts on which the auditors have reported without qualification and which will be delivered to the Charity Commission may be obtained free of charge upon written request to the Finance Department, The Royal College of Psychiatrists, 17 Belgrave Square, London SW1X 8PG.

Approved on behalf of the Trustees and signed on their behalf by: Professor D. Bhugra, President; Professor G. Ikkos, Treasurer – 9 April 2010

Report of the independent auditors to the members of The Royal College of Psychiatrists

We have examined the annexed summarised accounts (comprising Statement of Financial Activities and Balance Sheet) of The Royal College of Psychiatrists for the year ended 31 December 2009.

Buzzacott LLP, Chartered Accountants and Registered Auditors, 12 New Fetter Lane, London EC4A 1AG – 12 April 2010

These summarised accounts were circulated to the membership of the College and were approved at the Royal College of Psychiatrists’ AGM, 22 June 2010.
# COUNCIL MEMBERSHIP

**President†**
Professor D K M L Bhugra

**Treasurer†**
Professor G Ikkos

**Dean†**
Professor R J M W Howard

**Registrar†**
Dr L M Mynors-Wallis

**Editor†**
Professor P J Tyrer

**Chairs of Faculties†**

<table>
<thead>
<tr>
<th>Faculty</th>
<th>Chair</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic</td>
<td>Professor N Craddock</td>
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<tr>
<td>Addictions</td>
<td>Dr O Bowden-Jones</td>
</tr>
<tr>
<td>Child and Adolescent</td>
<td>Dr M A C Murphy</td>
</tr>
<tr>
<td>Forensic</td>
<td>Dr J M Parrott</td>
</tr>
<tr>
<td>General and Community</td>
<td>Dr M E Hampson</td>
</tr>
<tr>
<td>Liaison</td>
<td>Dr I Hall</td>
</tr>
<tr>
<td>Old Age</td>
<td>Dr P V Gill</td>
</tr>
<tr>
<td>Psychotherapy</td>
<td>Dr P Connelly</td>
</tr>
<tr>
<td>Rehabilitation and Social</td>
<td>Dr K Healy</td>
</tr>
<tr>
<td></td>
<td>Dr H T Killaspy</td>
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</table>

**Chairs of Sections†**

<table>
<thead>
<tr>
<th>Section</th>
<th>Chair</th>
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</thead>
<tbody>
<tr>
<td>Eating Disorders</td>
<td>Professor U Schmidt</td>
</tr>
<tr>
<td>Neuropsychiatry</td>
<td>Dr J M Bird</td>
</tr>
<tr>
<td>Perinatal</td>
<td>Dr R Cantwell</td>
</tr>
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</table>

**Chairs of Divisions†**

<table>
<thead>
<tr>
<th>Division</th>
<th>Chair</th>
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</thead>
<tbody>
<tr>
<td>Eastern</td>
<td>Dr D Girling</td>
</tr>
<tr>
<td>London</td>
<td>Dr O Raji</td>
</tr>
<tr>
<td>Northern &amp; Yorkshire</td>
<td>Dr R D Adams</td>
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<tr>
<td>Northern Ireland</td>
<td>Dr P McGarry</td>
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<tr>
<td>North West</td>
<td>Dr M Campbell</td>
</tr>
<tr>
<td>Scottish</td>
<td>Dr P Rice</td>
</tr>
<tr>
<td>South East</td>
<td>Dr P S Davison</td>
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<td>South West</td>
<td>Dr A James</td>
</tr>
<tr>
<td>Trent</td>
<td>Dr D Khoosal</td>
</tr>
<tr>
<td>Welsh</td>
<td>Dr S H M Matthews</td>
</tr>
<tr>
<td>West Midlands</td>
<td>Dr S Edwards</td>
</tr>
</tbody>
</table>

**Associate Deans†**

- Dr A D Brittlebank
- Dr B S Lunn
- Dr G T Pinner
- Dr M R Rao

**Deputy Registrars†**

- Dr P Byrne
- Dr N H Deuchar
- Dr O Junaid
- Dr P R Snowden

**Elected members**

- Professor S M Benbow (F)
- Professor R N Chithiramohan (F)
- Dr S R Nimmagadda (M)
- Dr P A Sugarman (M)

**Co-opted members**

- Dr J S Bamrah (Chair, BMA CCSC Psychiatry Sub-Committee)
- Dr D A Coia (link to Scottish Government)
- Dr E Fellow-Smith (for the National Director of Mental Health)
- Dr P Lelliott (Director, College Research Unit)

**Chair of Professional Practice & Ethics Committee†**

Professor S Benbow

**Director of Conferences†**

Dr H Miller

**Director of Public Education†**

Dr P Byrne

**Affiliate Representative**

Dr I Ahmad

**Chair of the Psychiatric Trainees’ Committee†**

Dr J U Jenkinson

**Patients and Carers Representatives**

Mr R Brooks-Collins
Mrs C Young

---

*Information reflects committee membership as at 1 December 2010. Further enquiries should be sent in writing to the Registrar.*

†member ex officio; F, Fellow; M, member
EDUCATION, TRAINING AND STANDARDS COMMITTEE MEMBERSHIP

OFFICERS OF FACULTIES AND SECTIONS

<table>
<thead>
<tr>
<th>Faculty</th>
<th>Chair</th>
<th>Secretary</th>
</tr>
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<tbody>
<tr>
<td>Academic</td>
<td>Professor N J Craddock</td>
<td>Professor P W R Woodruff</td>
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<tr>
<td>Addictions</td>
<td>Dr O Bowden-Jones</td>
<td>Dr F Keaney</td>
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<tr>
<td>Child and Adolescent</td>
<td>Dr M A C Murphy</td>
<td>Dr C Lamb</td>
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<tr>
<td>Forensic</td>
<td>Dr J Parrott</td>
<td>Dr H Stone</td>
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<tr>
<td>General and Community</td>
<td>Dr M E Hampson</td>
<td>Dr N Kosky</td>
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<tr>
<td>Learning Disability</td>
<td>Dr I Hall</td>
<td>Dr H Boer</td>
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<td>Liaison</td>
<td>Dr P V Gill</td>
<td>Dr P Aitken</td>
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<td>Old Age</td>
<td>Dr P Connelly</td>
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<td>Psychotherapy</td>
<td>Dr K Healy</td>
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<td>Rehabilitation and Social</td>
<td>Dr H T Killaspy</td>
<td>Dr P Wolfson</td>
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<td>Section</td>
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<tr>
<td>Eating Disorders</td>
<td>Dr U Schmidt</td>
<td>Dr S P Dave</td>
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<tr>
<td>Neuropsychiatry</td>
<td>Dr J M Bird</td>
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OFFICERS OF SPECIAL INTEREST GROUPS

<table>
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<th>Group</th>
<th>Chair</th>
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<td>Adolescent Forensic</td>
<td>Dr P Collins</td>
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<td>Forensic Psychotherapy</td>
<td>Dr C Minne</td>
<td>Dr D Reiss</td>
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<tr>
<td>Gay and Lesbian</td>
<td>Professor M King</td>
<td>Dr H Killaspy</td>
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<tr>
<td>Mental Health Informatics</td>
<td>Dr J Marley</td>
<td>Dr P Kukkadapu</td>
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<tr>
<td>Management</td>
<td>Dr V Majiiga</td>
<td>Dr S P Dave</td>
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<tr>
<td>Philosophy</td>
<td>Dr M Broom</td>
<td>Dr S R Nimmagadda</td>
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<td>Private and Independent Practice</td>
<td>Dr D Baldwin</td>
<td>Dr K Aitchison</td>
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<tr>
<td>Psychopharmacology</td>
<td>Professor C Cook</td>
<td>Dr S Dein</td>
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<tr>
<td>Spirituality and Psychiatry</td>
<td>Dr R Amin</td>
<td>Dr I K Ali</td>
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<tr>
<td>Transcultural</td>
<td>Dr F Mason</td>
<td>Dr H Ananthanarayanan</td>
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<td>Women</td>
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OFFICERS OF STANDING COMMITTEES

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<tr>
<th>Committee</th>
<th>Chair</th>
<th>Secretary</th>
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<tbody>
<tr>
<td>Policy Coordination</td>
<td>Dr L M Mynors-Wallis</td>
<td>Dr M Iqbal</td>
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<tr>
<td>Conference and Training</td>
<td>Dr H Miller</td>
<td>Dr G Rands</td>
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<td>Psychiatric Trainees</td>
<td>Dr J U Jenkinson</td>
<td>Dr J Whaley</td>
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<td>Publications Management Board</td>
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<td>Public Education</td>
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<td>Westminster Liaison</td>
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OFFICERS OF SPECIAL COMMITTEES

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<td>Dr A M E Easton</td>
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<td>Professional Practice &amp; Ethics</td>
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<td>Dr L Watt</td>
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<td>Human Rights</td>
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<td>Dr L Roy</td>
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OFFICERS OF DIVISIONS

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<td>Dr S Edwards</td>
<td>Dr D Watts</td>
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NEW BOOKS 2010

Abuse of the Doctor–Patient Relationship
Edited by Fiona Subotsky, Susan Bewley and Michael Crowe

Clinical Topics in Cultural Psychiatry
Edited by Rahul Bhattacharya, Sean Cross and Dinesh Bhugra

Mental Health Outcome Measures (3rd edn)
Edited by Graham Thornicroft and Michele Tansella

Social Inclusion and Mental Health
Edited by Jed Boardman, Alan Currie, Helen Killaspy and Gillian Mezey

Four new or updated NICE guidelines, in collaboration with the National Collaborating Centre for Mental Health and the British Psychological Society
Call for membership data

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The Royal College of Psychiatrists is grateful to the following organisations for their support of College research projects and academic activities, the mental health information programme and RCPsych Awards during the past year:

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