SUPPORTERS

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
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We received a generous bequest from the late Dr J R Emerson.

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 H Akimoto
Dr M Z Al-Qassim
Professor L A Ancona
Dr M Anil
Dr LN Azoo
Dr G Bandyopadyhay
Dr S Brest
Dr E A Brown
Dr A E Buck
Dr N S Capstick
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Dr J I Timothy
Dr M Tonnesmann
Dr T P S Watts
Dr J J Westwater
Dr J N Williams
Dr C E Yeates
Professor I Zador

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 Sue Bailey

As I reach the mid-point of my presidency, this Review provides an opportunity to reflect on the challenges and achievements of the past year. Across the UK and the International Divisions there are many successes we can be proud of, but we face major changes at a time of cuts to some services.

I was pleased that our work to promote parity of esteem for mental health bore fruit with the Mandate to the NHS Commissioning Board explicitly acknowledging parity (p. 7). And time spent building effective relationships and partnerships with politicians, charities and others also yielded results as the Mental Health (Discrimination) Bill now stands on the brink of becoming law (p. 8).

Our work as psychiatrists needs to be based on evidence and best clinical practice and throughout the year the College Centre for Quality Improvement (CCQI) continued to help providers, users and commissioners to assess and improve the quality of care (p. 4).

We continue to extend our influence abroad through our international work (p. 15) and endeavour to attract the best young doctors into psychiatry, with our new Pathfinder Fellowships (p. 10) drawing a good response.

Whenever times get tough, I always take heart from our mission, which stands proud on the homepage of our smart new website: ‘Improving the lives of people with mental illness’. That’s what our role, ultimately, is all about – but we can’t do it on our own. We work closely with other professional and membership organisations representing others who work in mental healthcare and treatment. And our work with the service users’ and carers’ forums is crucial in this respect; you can read about their vital contribution to the work of the College on page 9.

I was proud that our fourth annual RCPsych Awards featured categories for service users and carers for the first time, and as I congratulated the winners of all of the categories, I felt privileged to be President and heartened by the wealth of talent and humanity of our members. High-quality mental healthcare is a reality, despite the problems and occasional failings.

As we prepare for a move to new premises in 2013, it feels like the end of an era, but I’m optimistic about our fresh start. Now is our time, the time in which mental health is gaining greater prominence. It’s up to us all to make the case for investment and demonstrate the crucial role of psychiatry in improving public health.

Finally, I wish to thank everyone for their continued support. I encourage Members and Fellows to become involved in the work of the College, support the faculties and sections, and promote the benefits of psychiatry to commissioners, the public and other medical colleagues at every opportunity.

Professor Sue Bailey
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 2012

The College and its members promoted its core purposes (p. 1) with a broad range of activities throughout 2012.

**Recognising excellence**

Now in their fourth year, the RCPsych Awards bring national recognition to individuals, teams and services delivering the highest-quality care, and to academic researchers and educators advancing the understanding of mental illness (pp. 12–13). Seven President’s medals were also awarded to individuals who made outstanding contributions to the promotion of mental health services (p. 16). Professor Dinesh Bhugra (Past-President) and Dr Eileen Vizard were made CBEs, and Dr Lesley Hewson was awarded an OBE, in the New Year’s Honours List.

**Working with service users and carers**

Two new categories of RCPsych Awards were created in 2012, to celebrate the contribution made by service users and carers in developing and improving mental health services – Carer Contributor of the Year and Service User Contributor of the Year (p. 13). User and carer involvement in all significant strands of the College’s work continued to increase, with activities such as facilitating sessions at College conferences around the country and input to many College committees. The Annual meeting of the College’s Service Users’ and Carers’ Forums focused on ‘Resilience and Recovery’.

**Working with government**

The College has worked with other leading mental health organisations and Parliamentarians to secure cross-party and government support for the Mental Health (Discrimination) Bill. This Private Member’s Bill will amend the law that currently excludes people with mental health problems from areas of public life such as serving on a jury, working as an MP and becoming a company director.

**Parity of esteem**

The College was successful in lobbying with other mental health charities for mental health to have parity with physical health in the Health and Social Care Act 2012 (p. 7). Our President was joined by her counterparts abroad in marking World Mental Health Day by calling on governments to ensure that mental health is given the prominence it deserves.

**Influencing policy**

The College has given input to over 40 consultations this year, including the Call to Action for the Mental Health Implementation Framework, the Equal Civil Marriage consultation, the Health Committee Inquiry into the Alcohol Strategy, and the consultation on the new Adult Safeguarding Power.

**Around the country**

An annual meeting for all College Regional Advisers, Deputy Regional Advisers and Regional Representatives has been set up, to enable these important local representatives to share commonalities and discuss nationwide issues.

**Leadership and management**

Continued improvement in this area has been embedded in our core work with the appointment of an Associate Registrar with special responsibility for this area, and the evolution of the Special Interest Group into a Special Committee reporting to Council.

**Working with other organisations**

The College worked with the Royal Colleges of General Practitioners, Physicians and Paediatrics and Child Health to set up a new website on ‘improving physical and mental health’. The site provides links to resources for supporting the physical health of people with mental health problems and learning difficulties and the mental health of people with physical health problems.
HIGHLIGHTS OF THE YEAR 2012

The College and its members promoted its core purposes (p. 1) with a broad range of activities throughout 2012

Education and training for psychiatrists
A very generous bequest and an anonymous donation enabled us to establish Pathfinder Fellowships (see p. 10) for medical students interested in a career in psychiatry. The introduction of bursaries provides an outstanding opportunity for medical students to attend our International Congress. College representatives have visited medical careers fairs throughout the country, to raise awareness of psychiatry as a career choice. A new seminar series on liaison psychiatry supported the College’s engagement with commissioners, who are increasingly recognising the importance of this area of psychiatry.

Supporting young people
The College contributed to setting up the first Children’s and Young People’s Health Outcomes Forum, an important opportunity for professionals, users and carers across all of children’s services to develop an outcomes framework and set of principles. The College was also involved with setting up a consortium which successfully tendered for over £2m in funding from the Department of Health to develop e-learning in children and young people’s mental health for the entire children and young people’s workforce.

International activities
The College’s International Volunteer scheme now has over 120 registered volunteers. The scheme aims to facilitate contact between hospitals, clinics, projects and communities in need of psychiatric expertise and training, and psychiatrists who are willing to offer their time and support. Completed placements in 2012 have included the Department of Psychiatry in Ethiopia, a WHO Pacific Island Mental Health Network placement in the Solomon Islands and a Challenges Worldwide placement at Pantang Hospital in Ghana. The College has also proposed pilot schemes under the Medical Training Initiative, to enable doctors from overseas to enter the UK for up to 24 months, to benefit from training and development in NHS psychiatric services before returning to their home countries.

Encouraging higher standards
Membership of projects run by the College Centre for Quality Improvement continued to grow and new programmes aimed at improving the quality of eating disorder and rehabilitation services were started. National audits of general hospital care for people with dementia and of psychological treatment services were completed.

Supporting mental health commissioning
As co-chair with the Royal College of General Practitioners of the Joint Commissioning Panel for Mental Health, the College has worked with a broad range of stakeholders to produce best practice guidance for commissioners of mental health services. Guides for primary care, liaison, dementia, CAMHS transitions, perinatal, rehabilitation, and drug and alcohol services will be joined by more titles in 2013 at www.jcpmh.info.

Informing people
Our website has had a major redesign, further improving access to a huge range of resources for doctors, students, and members of the public. Print-based publishing is still a strong part of our work – the RCPsych Publications Department issued seven new titles in 2012 (p. 24). We continue to develop new translations of our growing range of free mental health information leaflets for the public – new this year are leaflets in Lithuanian and Somali.
EXCELLENCE: COLLEGE CENTRE FOR QUALITY IMPROVEMENT

Dr Adrian Worrall, Head, College Centre for Quality Improvement

One of the main aims of the College is to improve the standard of care that people with mental health problems receive. To this end, the College set up a Centre for Quality Improvement in 2007. Since then, the CCQI has worked with clinicians, managers, service users and carers to deliver a range of quality improvement initiatives, including audits, accreditation programmes and quality improvement networks. All mental health trusts and health boards in England and Wales now take part in this work, and services in Scotland and Northern Ireland are also involved.

National audits provide information about service quality that can be compared across different teams and organisations. The Prescribing Observatory for Mental Health is the largest subscription-based clinical audit in Britain. In 2012, audits of prescribing for people with dementia and people with personality disorder were completed. Last year, the Centre also oversaw the first round of a new national audit of schizophrenia and follow-up audits of care received by people with dementia in general hospitals, and psychological treatments for people with anxiety and depression.

Accreditation programmes and quality improvement networks involve external examination of services by teams of clinicians and service users. Services are then given feedback about their strengths and weaknesses and are helped to develop action plans for improving the standard of care they provide. The Centre runs 16 programmes for services for children, working age and older adults. Membership of programmes increased in 2012 and participating organisations demonstrated higher levels of service quality than in previous years.

In 2012, the CCQI set up two new accreditation programmes for eating disorder services and home treatment teams. We also extended two quality networks to cover community-based perinatal services and low secure forensic units.

In response to repeated concerns about the quality of care that people with dementia receive we have worked with colleagues from the Royal College of Nursing and Royal College of Physicians to launch a new Quality Mark that will recognise in-patient wards that demonstrate a commitment to continuously improving the quality of care they provide to older, frail patients.
EXCELLENCE: COLLEGE CPD RESOURCES USED AND VALUED WORLDWIDE

Dave Jago, Director, Publications and Website

The College’s e-learning resource, CPD Online, is now well established among the RCPsych members. Since 2010 we have been working with the Royal Australian and New Zealand College of Psychiatrists (RANZCP) and have provided their members with full access to a RANZCP version of CPD Online. In addition, RANZCP members receive access to Advances in Psychiatric Treatment online – completing the full suite of the Royal College of Psychiatrists’ CPD resources. There is a RANZCP representative on each of the Editorial Boards (CPD Online and Advances) to help broaden the range of modules commissioned.

Following the success of this agreement we have been working with psychiatric associations worldwide to set up arrangements whereby each member of an association can access CPD Online to carry out their own medical and professional education. Danish, Swedish and Estonian psychiatrists can ‘click through’ to CPD Online from their Association websites. In addition, CPD Online has been formally accredited in The Netherlands, where CPD is mandatory, and CPD Online is also available to members of the Argentinian Psychiatric Society. We are working with a number of other professional associations worldwide to set up similar arrangements.

In just 5 years, CPD Online has gained a reputation for excellence with our own membership, and this reputation now is spreading across the psychiatric community worldwide. One of the College’s aims is to promote excellence in psychiatry and we are certainly supporting the global move to further continuing medical education for all psychiatrists. CPD Online offers national associations an opportunity to offer their members a ready-made e-learning resource. CPD Online is self-funding and therefore a resource that they can rely on in terms of quality and independence. CPD Online has been, and continues to be, developed in collaboration with psychiatrists and mental health professionals in academic and clinical practice. It is tailored to the needs of its users. The online environment offers users active, self-directed learning which has a greater impact and is more likely to be effective. Professionals are carrying out their (online) CPD activities at a time of their choosing and the College’s educational material is being used and valued by psychiatrists from the Arctic Circle to Tierra del Fuego.

CPD ONLINE

The online learning resource for mental health professionals
LEADERSHIP: JOINT COMMISSIONING PANEL FOR MENTAL HEALTH

Chris Fitch, Research Fellow

The Joint Commissioning Panel for Mental Health (JCP-MH) represents a practical response to:

- the NHS reforms that continue to shape the commissioning and provision of mental health and learning disability services in England
- the need for the College to strongly communicate members’ concerns about, and priorities for, commissioning
- the needs of existing and new commissioners to know ‘what good looks like’ with regard to mental health and learning disability services
- the need for the College to work in partnership with other organisations so that the mental health sector speaks with one voice, while keeping psychiatrists, service users and carers at the centre of the debate.

The JCP-MH is co-led by the Royal College of Psychiatrists (Dr Neil Deuchar, Specialist Adviser for Commissioning) and the Royal College of General Practitioners (Professor Helen Lester, Lead for Mental Health Commissioning). Bringing together more than 17 leading organisations that aim to inform high-quality commissioning in England, the work programme of the JCP-MH is managed, developed and delivered by the College’s Policy Unit, and part-supported by funding from the Department of Health.

Successes: 2012

In 2012, the JCP-MH published eight commissioning guides for existing and new commissioners. Each guide is developed by an expert reference group (chaired by a College member) and aims to provide commissioners with a description of what a ‘good’ service should look like, bringing together scientific evidence, service user and carer experience, and case studies of best practice. The guides produced in 2012 were:

- primary mental healthcare
- liaison mental health services (acute hospitals)
- dementia care
- services for young people in transition from child and adolescent to adult services
- rehabilitation services
- perinatal services
- drug and alcohol services
- public mental health interventions.

Critically, each JCP guide not only represents a written output, but also provides a mechanism for the College and its members to influence local and national activity.

Moving forward: 2013

Looking ahead, the JCP-MH will publish a further nine guides before April 2013: community mental health services, acute care services, older people’s services, forensic services, neuropsychiatric services, learning disability (mental health services), autism spectrum disorder services, eating disorder services, and CAMHS (all services).
LEADERSHIP: PARITY OF ESTEEM

Deborah Hart, Director, Communications and Policy

The College has for many years promoted the parity of esteem for mental health – to government, politicians and fellow health professionals. The slogan ‘no health without mental health’ has been the outward symbol of a great deal of work behind the scenes. In November 2012 this bore fruit when a commitment to value mental and physical health equally was enshrined in the Mandate to the new NHS Commissioning Board. The Mandate also committed the NHS to improving access to mental health services and reducing waiting times.

This was the culmination of months of lobbying with officials and ministers, with the support of colleagues in mental health charities. Welcoming this major step forward, the College’s President, Sue Bailey, stressed that parity is not just an issue for the NHS – it has to involve education, welfare reform and criminal justice.

The College’s policy team has analysed how parity might work in practice, including closing the funding and treatment gaps and taking action on:

• stigma and discrimination
• waiting times and choice
• reducing the premature mortality of people with mental health problems
• long-term conditions and addressing co- and multi-morbidity
• safe prescribing
• early intervention
• measurement, audit and inspection.

This work is ongoing, as the College continues to promote the distinctive contribution of psychiatry to public mental health.

The JCP-MH is also due to publish a ‘mental health and wellbeing commissioning pack’ in 2013, in collaboration with the Strategic Health Authority Mental Health Leads’ Group. This will include tools for needs assessments, contract inserts, cost–benefit calculators, and other tools.
ENGAGEMENT: EXTENDING OUR INFLUENCE

Deborah Hart, Director, Communications and Policy

AN END TO MENTAL HEALTH DISCRIMINATION

An effective campaign to encourage MPs, policy makers and the public to ‘back the bill’ via Twitter and other social media helped the Mental Health (Discrimination) Bill to gain support in the House of Commons. As we go to press, the Bill has been approved by the Commons and awaits a final debate in the Lords.

The Bill, sponsored by Gavin Barwell MP, will end archaic laws that interfere with the rights of people with mental health problems from sitting on a jury or remaining a company director. It will also change a law stating that MPs will lose their seats if sectioned under the Mental Health Act, regardless of recovery.

The College worked closely with mental health charities and others to support the Bill, which will end one of the last bastions of legalised discrimination.

- Lord Stevenson of Coddenham, CBE, who worked with the College to first introduce the Bill into the Lords in 2011, was awarded the President’s Medal for his contribution to improving the lives of people with mental illness at the RCPsych Awards 2012 (see p. 12).

POLITICAL ENGAGEMENT

The College was active in political circles throughout the year, meeting with politicians from all parties, including ministers, shadow ministers, peers, backbench MPs and leaders from the mental health and wider health and social care sectors.

The government’s health and welfare reforms and the effect on patients and clinicians in the NHS were key themes for discussion at the each of the three main party conferences. The College also lobbied on parity of esteem, public mental health, alcohol and medical education and training.

At the party conferences we staged round tables on the theme ‘Making mental health everyone’s business’ in partnership with the Centre for Mental Health and NHS Confederation. This supported our strategy of engagement with professional and voluntary organisations to maintain coalitions around our priorities.

Opposition Leader’s keynote speech at the College

After a productive meeting with the Leader of the Opposition, Ed Miliband MP, we agreed to host his keynote speech on mental health in October. This set out Labour’s policy and approach, with Mr Miliband describing mental ill health as ‘the biggest unaddressed health challenge of our age’. The speech was well attended and gained extensive media coverage.

Mental health guide for MPs

Together with Rethink Mental Illness and Mind, the College produced a booklet for MPs and their staff, which provides advice on how best to support constituents with mental health problems.

MPs and staff regularly come into contact with people with mental health problems, but receive little guidance on how to ensure that they support...
people’s mental health and wellbeing. The booklet gives an overview of mental health and sets out the local groups that can help.

BUILDING MEDIA PROFILE
The College’s communications team continued to promote psychiatry and psychiatrists by engaging with the media throughout 2012.

In addition to responding to more than 1500 enquiries from print, broadcast and online media, the office promoted the latest research findings from the *British Journal of Psychiatry* and *The Psychiatrist*.

Highlights of the year included proactive campaigning and PR around:
- minimum alcohol pricing
- suicide prevention
- parity of esteem
- the National Audit of Schizophrenia.

SERVICE USERS’ RECOVERY FORUM (SURF) AND CARERS’ FORUM
Our Service Users’ Recovery and Carers’ Forums continued to thrive in 2012, coming together at the end of the year to focus on the President’s ‘Recovery and Resilience’ campaign.

Members of both forums sit on divisional, faculty and section executives and on 12 College committees, including Council and the Central Policy Committee, as well the Academy of Royal Medical Colleges Patient Lay Group.

Each forum has 30 members and includes representatives from across the UK, tapping into a wider network of 1500 service users and carers for consultation. This network enables people to contribute on an *ad hoc* basis to issues that they care about.

Throughout the year, forum members were consulted on all new or revised public education resources produced by the College and undertook a wide range of activities, including:
- joining the judging panel for Psychiatrist of the Year
- a session at the International Congress
- developing our NHS care objectives – a consultation on the draft mandate to the NHS Commissioning Board, and work on parity of esteem
- consultation on new adult safeguarding powers
- consultation on the future of the independent living fund
- representation on the expert reference groups for the joint commissioning panel on mental health.
PATHFINDER FELLOWSHIPS: A NEW COLLEGE RECRUITMENT INITIATIVE

Dr Tom Brown, Associate Registrar for Recruitment

As part of the ongoing recruitment strategy, the Royal College of Psychiatrists has a number of initiatives aimed at supporting and encouraging medical students interested in a career in psychiatry. The latest of these is an exciting new programme called ‘Pathfinder Fellowships’ (www.rcpsych.ac.uk/pathfinderfellowships). These have been advertised widely, with our first Pathfinder Fellows taking up the Fellowships from February 2013. As part of the application process, candidates will have to demonstrate an interest in psychiatry.

The Pathfinder Fellowships are aimed at medical students in their penultimate year of study and will be worth up to £5000 over 3 years. Pathfinder Fellows will be able to use part of the funding (up to £1500) to support a research project or an elective or a student-selected component in psychiatry. Furthermore, a network of Pathfinder Fellowships will be created on Facebook and events will be held at the Royal College of Psychiatrists to support the newly appointed Pathfinder Fellows. Other benefits include free registration at the International Congress, free access to CPD online and print copies of all the Royal College of Psychiatrists’ journals. Pathfinder Fellows will be appointed a mentor to help them maximise the opportunities afforded by what we anticipate will be a first-rate programme.

New
Pathfinder Fellowships
of the Royal College of Psychiatrists

The Royal College of Psychiatrists will be awarding new fellowships, each worth up to £5000 over 3 years, to medical students in their penultimate year of study who are interested in pursuing a career in psychiatry.

The Pathfinder Fellowship award includes mentoring, funding for an elective or research project, free journal subscriptions, free conference attendance and much more – for further details see www.rcpsych.ac.uk/pathfinderfellowships

We are seeking the next generation of psychiatrists to lead the profession into the future. Make a difference. Improve lives. Choose a career in psychiatry.

Deadline for applications
14 December 2012

Advertisement for Pathfinder Fellowships – many applications had been received at the time of going to press
The Psychiatric Trainees’ Committee (PTC) gives psychiatrists in training a strong representative voice in the College. The key aim of our work is to promote excellent psychiatric training. We believe that high-quality training results in high-quality services and patient experiences both today and for the future NHS. Through our members, all of whom are elected by Trainees across the UK, we have representation on every College committee. Our presence throughout the College gives us an oversight of the College’s work and enables us to bring people and ideas together.

In 2012, we drafted a Psychiatric Trainees’ Charter, which will set out the rights and responsibilities of Trainees. We are now actively seeking user and carer voices as well as advice from other College colleagues to ensure that the Charter best reflects training needs in a changing NHS.

Building on its success last year, 2012 saw the second Medfest event, a national film festival run by PTC members. This year’s event, ‘Healthscreen: Understanding Illness through Film’, expanded to more universities and attracted larger audiences. Work is already in progress for our third event, in 2013, which will be hosted at even greater numbers of universities and will engage even more trainees and students.

As NHS services change and adapt to new structures and pressures, we will be looking carefully at how training is affected. Although there will be risks to training, there will also be opportunities to make positive changes. Working to improve the quality of our training is where the PTC will be focusing its attention.

Looking ahead we have identified four key areas of work:

- engaging and communicating with Trainees
- promoting excellent training, looking particularly at out-of-hours training, MRCPsych course standards and psychotherapy training
- working with the Examinations Committee to improve our examinations
- promoting recruitment and retention in psychiatry.

The PTC is an integral part of the College and we have projects across all faculties, divisions and College committees. We look forward to a busy and active year ahead building on our current successes and working on new issues on behalf of trainees.
Journalist and author Allison Pearson hosted the ceremony. She spoke of her own experience of depression and of mental ill health as ‘the last taboo’

Celebrating excellence and achievement

Professor Sue Bailey awarded a President’s Medal to Lord Stevenson of Coddenham, in recognition of his work on the Mental Health (Discrimination) Bill

Dr Himanshu Tyagi received the award for Advanced Psychiatric Trainee of the Year from Dr Wendy Burn, the College Dean

Allison Pearson congratulates Dr Rory Conn, Core Psychiatric Trainee of the Year

Dr Sean Cross, Psychiatric Trainer of the Year, presented with his award by Dr Iona Heath, President of the Royal College of General Practitioners

Professor Carmine Pariante was named Psychiatric Academic/Researcher of the Year. Two colleagues accepted the award from Professor Peter Woodruff on his behalf

Congratulations to the winners of the 2012 RCPsych Awards

The Awards were generously sponsored by:

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1  Royal College of Psychiatrists
2  celebrating excellence and achievement
3  professor sue bailey awarded a president's medal to lord stevenson of coddenham, in recognition of his work on the mental health (discrimination) bill
4  dr himanshu tyagi received the award for advanced psychiatric trainee of the year from dr wendy burn, the college dean
5  allison pearson congratulates dr rory conn, core psychiatric trainee of the year
6  dr sean cross, psychiatric trainer of the year, presented with his award by dr iona heath, president of the royal college of general practitioners
7  professor carmine pariante was named psychiatric academic/researcher of the year. two colleagues accepted the award from professor peter woodruff on his behalf
Mind CEO Paul Farmer presented Dr Ejaz Nazir with the Public Educator of the Year award.

The new award category Service User Contributor of the Year was presented jointly to Graham Morgan and Maurice Arbuthnott; Professor Sue Bailey presented the award to Graham Morgan.

The new award category Carer Contributor of the Year was awarded to Valerie Minns.

Service User Contributor of the Year Maurice Arbuthnott invited Patricia Kapellar to accept the Award from Professor Sue Bailey on his behalf.

The Adult Cognitive Assessment and Intervention Team, Cheshire and Wirral Partnership NHS Foundation Trust, Psychiatric Team of the Year.

Psychiatrist of the Year, Dr Geraldine Strathdee, praised service users and the voluntary sector.

Professor Eve Johnstone was presented with the College’s prestigious Lifetime Achievement Award.
The NHS is committed to reducing its carbon footprint by 80% between 2010 and 2050. In many areas mental health services are being reconfigured, in part as a response to the recession. It is critical that any service evaluation should include the carbon cost as part of the overall cost-effectiveness.

In the NHS overall, it is known that the carbon cost breakdown is 19% spent on buildings energy use (such as heating, lighting and electrical equipment), 16% on transport (including staff and patient travel) and 65% on procurement, of which by far the largest category is pharmaceuticals. It was unclear whether this was the case in mental health services, with less use of equipment and a greater emphasis on community care. To explore this issue, the General and Community Faculty Executive jointly commissioned a piece of work with Nottinghamshire Healthcare NHS Trust, from the Centre for Sustainable Healthcare, with advice from the NHS Sustainable Development Unit. The data were provided by the Nottingham Energy Partnership. Nottinghamshire Healthcare has the full range of mental health services, including a high secure unit. The aim was to look at overall data use but also to analyse it by service pathway.

The carbon footprint analysis showed that overall, 59% of the carbon emissions were due to procurement, 38% to buildings and 3% to work-related travel. There were significant differences between the directorates (see graph). It was possible to break this down to high, medium and low secure and community care for forensic services and adult and older people within local services. The data can then be used more specifically, for example to identify the cost per patient, per contact and per admission.

An attempt was made to compare these data with those from another mental health trust. However, service line data were not collected in a way that allowed such comparisons to be made. Therefore, the next step is to determine whether a common approach to collecting data on carbon use can be agreed so that future clinical service comparisons can include carbon data.
THE COLLEGE INTERNATIONALLY

Vanessa Cameron, Chief Executive

International Advisory Committee

The International Advisory Committee (IAC), chaired by the President, Professor Sue Bailey, continued to oversee all the international work of the College, such as establishment of Memoranda of Understanding, the Volunteer Programme, the work of the Iraq Subcommittee and links with international associations and organisations.

Highlights from 2012 include:

• The College has agreed to run a pilot Medical Training Initiative (MTI) across three NHS Trusts with the first cohort likely to start in 2013. The Education, Training and Standards Committee has recently responded positively to the College’s MTI eligibility criteria.

• The College Memorandum of Understanding template was redrafted.

• The Iraq Subcommittee is now in its seventh year of improving the quality agenda in mental services in Iraq. Through workshops such as Training the Trainer in Baghdad, the Subcommittee sees its activities become more partnership-focused and collaborative in nature.

• Volunteering activity has included placements in The Gambia (new host institution), Ghana and Bangladesh (new host institution). The volunteer pages of the College website have also seen an increase in Web 2.0 technologies such as blogs written by our volunteers while overseas.

• The International Divisions meeting at our International Congress in Liverpool saw agreement on more College members carrying out short voluntary training sessions en route between UK and Australia. Divisions also submitted reports on their objectives for the next 2–3 years.

• International Psychiatry has been redesigned. This quarterly College journal, about to enter its 10th year of publication, is distributed to the entire membership. It is a platform for work that is generally underrepresented in the literature, especially psychiatry research and opinion from low- and middle-income countries. The Editorial Board has introduced a new series on Mental Health Law Profiles, each profile focusing on an individual country’s relevant legal frameworks. It is expected that this series will grow into a valuable compendium.

International divisions

Of the College’s 16,321 members, 2792 (over 17%) reside outside the UK. These members are distributed among the six International Divisions. Officers of the International Divisions travelled to Liverpool in June 2012 for the College’s International Congress and held a business meeting during the event. This allowed them an opportunity to discuss priorities and possible projects for the future. Sadly, the Chair of the European Division, Dr Kate Ganter, passed away in the autumn. Dr Ganter’s contribution to international psychiatry was key in developing relationships within Europe, and she will be greatly missed. The Vice-Chair of the European Division, Dr Athanassios Douzenis, will become Acting Chair until the College’s AGM in 2013.
PRESIDENT’S MEDALS

President’s Medals were awarded this year for the third time. The initiative was established by immediate Past-President Professor Dinesh Bhugra to honour individuals who have made significant contributions to improving the lives of people with mental illness. In 2012, medals were presented to seven people who were chosen for their outstanding contributions in varied fields.

Mr Raymond Brookes-Collins (now deceased)
Mr Jeremy Laurance
Ms Juliet Lyon CBE
Professor Eileen Munro
Dr David Shiers
The Rt Hon the Lord Stevenson of Coddenham CBE
Dr Amina Tareen MRCPsych

HONORARY FELLOWS

Professor Dinesh Bhugra CBE FRCPsych
Professor Dame Carol Black DBE FRCP FmedSci
Professor Mario Maj FRCPsych
Dame Philippa Russell DBE
Professor Eric Taylor FRCPsych
IN MEMORIAM
The following members and associates of the College died between December 2011 and December 2012

Adedun, Olusegun Adetayo (b. 1974)  
Bagg, Charles Ernest (b. 1900)  
Bindman, Ellis (b. 1921)  
Brenman, Eric (b. 1920)  
Brough, Douglas Ivor (b. 1926)  
Burford, Dion Christopher (b. 1945)  
Chamberlin, Andrew James (b. 1953)  
Clarke, Alan Douglas Benson (b. 1922)  
Cuthill, James Macrae (b. 1925)  
Doig, Robert Jules (b. 1930)  
Edwards, James Griffith (b. 1928)  
Eickhoff, Louise Frances Winifred (b. 1913)  
Gadhvi, Harish Mulraj (b. 1944)  
Ganter, Kathleen Elizabeth Mary (b. 1948)  
Gavin, Noel Alexander (b. 1969)  
Gillespie, Shaun Francis (b. 1964)  
Gillis, Aaron (b. 1915)  
Goldie, Lawrence (b. 1923)  
Greenberg, Harris Phillip (b. 1922)  
Haldane, Johnston Douglas (b. 1926)  
Hardwick, Peter John (b. 1945)  
Herst, Edward Richard (b. 1925)  
Horder, John Plaistowe (b. 1919)  
Hullin, Roy Powell (b. 1924)  
Jackson, Paul Montgomery (b. 1932)  
Kennedy, Peter Francis (b. 1941)  
Kumar, Shailendra (b. 1934)  
Labia, Joseph Benjamin (b. 1923)  
Madden, John Spencer (b. 1928)  
Maharaj, Harrinath D. (b. 1948)  
Mann, Alan Macdonald (b. 1924)  
McCubbin, James (b. 1976)  
McCulloch, James Allen Thomson (b. 1950)  
McDermott, David Francis (b. 1970)  
McDowall, Arthur Wynn Trebenheere (b. 1939)  
Menzies, Robin Paul Dickson (b. 1951)  
Moffatt, William Raymond (b. 1926)  
Moore, Charles Stuart (b. 1914)  
Morgan, Jennifer Gillian (b. 1957)  
Murugananthan, Nagalingam (b. 1937)  
O’Carroll, Louis Maria (b. 1951)  
O’Donnell, Hugh Anthony (b. 1946)  
Oswald, Ian (b. 1929)  
Pilowsky, Issy (b. 1935)  
Pritchard, Michael John (b. 1929)  
Purandare, Nitin Bhalchandra (b. 1965)  
Sandig, Raymond (b. 1916)  
Shepherd, Daphne Margaret (b. 1924)  
Skarbek, Andrew (b. 1925)  
Smith, Margaret A E (b. 1923)  
Ssekabembe, Ephraim Byekwaso (b. 1930)  
Stanley, William John (b. 1922)  
Tylden, Elizabeth (b. 1917)  
Walton, Henry John (b. 1924)  
Ward, Mark Robert (b. 1961)  
Webb, Eleanor Ryall (b. 1975)  
Wolfson, Paul Martin (b. 1951)  
Wright, Malcolm (b. 1927)
Treasurer’s report

It is with great pleasure that I present my first report as Honorary Treasurer on the financial year ending 31 December 2011. I am indebted to my predecessor as Treasurer, Professor George Ikkos, for his prudent financial stewardship of the College and for his help and patience during the handover of the role. The Treasurer’s report for 2010 noted that ‘the future remains uncertain and austerity is necessarily high on the agenda’. I am working closely with the Chief Executive and the new Director of Finance and Operations to tackle these issues head on.

Value for money and accountability to College members

The College recognises that members face major financial challenges, with salaries frozen and increasing costs. The aim is to keep any annual membership fee increases in line with member salary increases, to ensure that examination fees represent good value for money and to reduce the costs of College meetings. We are taking action to reduce costs, focus activities on those of highest priority, deliver better value to members, and develop additional income sources. Over the coming year, we will be introducing further improvements to College budgeting and financial modelling to increase efficiency and effectiveness and to make resource use more transparent and accountable to College members.

Financial overview of 2011

The College’s income amounted to £17,034k (2010: £17,446k) with expenditure totalling £16,184k (2010: £15,874k). We concluded the year with an operational surplus of £850k (2010: £1,572k) before unrealised losses on investments of £96k (2010: unrealised gain £134k) were included.

Bequests

The College is grateful to the late Dr P J H Gosling who bequeathed £20k for research into neuropsychiatric disorders. The Neuropsychiatry Section has identified a use for the money in accordance with Dr Gosling’s wishes. The College is also thankful to the late Mary Margaret Slack who bequeathed a final sum of £62k towards an endowment to fund a travelling fellowship.

New building to replace 17 Belgrave Square

The College continues to explore the most effective options to secure an appropriate London headquarters that can provide better facilities for members as well as for College staff. As in previous years, College Trustees agreed to allocate a proportion of the 2011 surplus totalling £730k (2010: £929k) to the New Building Fund. This includes the first 2% of the 5% increase in membership fees for 2011.

Fundraising

In order to increase the funding available for important initiatives such as enhancing recruitment into psychiatry, a College Development Office is being established to attract donations and legacies. This initiative will be continued only if key performance indicators are met.

College budgeting, financial models and value for money

The senior management team has been asked to scrutinise all College activities to identify opportunities for making cost savings, increasing quality and improving the value for money provided to members. Over the coming year the budgeting and financial models used within the College will be modified to increase transparency and make it easier to ensure that activities and resources follow the priorities of the members.

Internal audit to challenge and improve procedures

Council agreed to the appointment of a firm of internal auditors, Crowe Clark Whitehill LLP, who will report to the Treasurer and Chief Executive through the Finance Management Committee. This will enhance the College’s governance structure and internal controls, and reflects the sector’s best practice.

Growth in membership of the College

Overall membership of the College has grown at a rate of 2.7% (2010: 2.3%), increasing to 15,860 (2010: 15,445). The total number
of members includes 2,784 (2010: 2,690) from overseas across grades.

**Income**

Income from membership subscriptions of £4,866k (2010: £4,551k) has increased by £315k (2010: £308k) owing to the growth in membership numbers and a 5% (2010: 4%) increase in subscription fees. Total income generated from Examinations is £2,416k (2010: £2,631k). The decrease in examinations income is a result of a decrease in candidates sitting the MRCPsych exams: the total number of candidates in 2011 was 4,398 (2010: 4,834). This is mainly because in 2010 there was an additional sitting of Paper 3 (320 candidates). The surplus generated from Examinations is £604k (2010: £768k) after accounting for operating expenditure and transfer to the development fund.

This year the National Collaborating Centre for Mental Health (NCCMH) has been operating under challenging circumstances with its funder, the National Institute for Health and Clinical Excellence (NICE), requiring more work for similar funding. Total funds received amounted to £1,566k for concurrent development of six guidelines (2010: £1,505k five concurrent guidelines). This represents £40k less per guideline while delivery timescales have tightened. Faculties, Sections, Divisions and Special Interest Groups (FSDSIGs) have continued to contribute to income generation – £1,034k (2010: £1,120k). Though most FSDSIGs contribute income, Faculty and Division Conferences continue to receive significant support through membership fees and other general funds, in the form of the direct costs of the Conference Unit and the Division Offices. The International Congress in Brighton generated a net surplus of £228k (2010: £186k), before contributing to College overheads and the central development fund.

The College Centre for Quality Improvement (CCQI) generated less surplus before College overheads than expected – £342k (2010: £588k). The College Education and Training Centre (CETC) performed below budget this year, generating a net deficit of £87k (2010: net surplus £56k) before contributing to College overheads and the central development fund. In response to this, CETC has been amalgamated with the Conference Unit to form a new department, Centre for Advanced Learning and Conferences (CALC). Performance will be monitored closely.

**Expenditure**

Staff costs amounted to £7,569k in 2011 (2010: £7,214k). The average number of staff has increased from 194 to 197. This was due to three leavers in 2010 being replaced in 2011. Despite the increase in prices of travel, the College’s overall travel and subsistence expenditure has decreased to £1,055k (2010: £1,168k) as a result of the senior management team’s efforts to reduce costs. A new CCQI information management system has been purchased and is being implemented at a cost to date of £315k; it is anticipated a further £116k will be spent in 2012 (total budget £450k). In 2011, the Joint Commissioning Panel for Mental Health was launched to address concerns regarding future commissioning of mental health services and public mental health interventions. The Royal College of General Practitioners agreed to share the funding with the College, agreeing to contribute £30k; a further £30k has been secured from the NHS Confederation.

**Governance**

Induction days were held for new Trustees and Financial Officers of the FSDSIGs, emphasising the joint responsibility of Trustees to ensure the financial governance of the College as a whole. The Finance Management Committee has been scrutinising closely specific areas of College activity. The new internal audit function will enhance governance. I would like to express my thanks to Drs Jan Falkowski, Ian Hall and Philip McGarry for their dedicated and insightful contributions as members of the Finance Management Committee. Their contribution is invaluable and I am very grateful to them indeed for their wise counsel.

**College investment portfolio**

In 2011 £1,000k was transferred from College general funds to the investment firm Brewin Dolphin and a further £1,000k to Barclays Wealth. At the end of December the College’s investment portfolio had a value of £4,009k (2010: £2,118k). Trustees will keep investments under review to ensure optimal spread of risk and return for the College.

**Conclusion**

2011 has been a successful year financially but there are major challenges ahead. College Trustees and staff will continue to work towards controlling spending, enhancing income, striving for better value for money and seeking to ensure that activities and resources are focused on those areas of highest priority. Finally, I would like to express my gratitude to Vanessa Cameron (Chief Executive), Kumaresan Padmanathan (Director of Finance and Operations), the senior management team and the Finance team for their counsel and determined efforts to ensure that the College remains financially sound. I am grateful to my fellow College Officers and Trustees for their support and advice.

Professor Nick Craddock, Honorary Treasurer
27 April 2012
## Statement of Financial Activities for the Year Ended 31 December 2011

<table>
<thead>
<tr>
<th></th>
<th>Unrestricted Funds £000</th>
<th>Restricted Funds £000</th>
<th>Endowment Funds £000</th>
<th>Total Funds £000</th>
<th>Total Funds £000</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Incoming resources</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Incoming resources from generated funds</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Voluntary income – donations and gifts</td>
<td>48</td>
<td>–</td>
<td>62</td>
<td>110</td>
<td>279</td>
</tr>
<tr>
<td>Investment income and bank interest</td>
<td>143</td>
<td>–</td>
<td>2</td>
<td>145</td>
<td>94</td>
</tr>
<tr>
<td>Prize funds</td>
<td>–</td>
<td>25</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td><strong>Incoming resources from charitable activities</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Standard setting and research</td>
<td>2,147</td>
<td>2,843</td>
<td>–</td>
<td>4,990</td>
<td>5,195</td>
</tr>
<tr>
<td>Education and training</td>
<td>6,552</td>
<td>52</td>
<td>–</td>
<td>6,604</td>
<td>7,035</td>
</tr>
<tr>
<td>Member services and support</td>
<td>4,963</td>
<td>65</td>
<td>–</td>
<td>5,028</td>
<td>4,743</td>
</tr>
<tr>
<td>Communications and policy</td>
<td>112</td>
<td>20</td>
<td>–</td>
<td>132</td>
<td>82</td>
</tr>
<tr>
<td><strong>Total incoming resources</strong></td>
<td>13,965</td>
<td>3,005</td>
<td>64</td>
<td>17,034</td>
<td>17,446</td>
</tr>
<tr>
<td><strong>Cost of generating funds</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Activities for generating funds</td>
<td>26</td>
<td>–</td>
<td>–</td>
<td>26</td>
<td>27</td>
</tr>
<tr>
<td>Investment management costs</td>
<td>24</td>
<td>–</td>
<td>–</td>
<td>24</td>
<td>11</td>
</tr>
<tr>
<td><strong>Charitable activities</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Standard setting and research</td>
<td>3,551</td>
<td>2,912</td>
<td>–</td>
<td>6,463</td>
<td>6,018</td>
</tr>
<tr>
<td>Education and training</td>
<td>5,738</td>
<td>52</td>
<td>–</td>
<td>5,766</td>
<td>5,869</td>
</tr>
<tr>
<td>Member services and support</td>
<td>2,437</td>
<td>39</td>
<td>–</td>
<td>2,476</td>
<td>2,462</td>
</tr>
<tr>
<td>Communications and policy</td>
<td>1,054</td>
<td>–</td>
<td>–</td>
<td>1,054</td>
<td>1,126</td>
</tr>
<tr>
<td>Prize funds</td>
<td>–</td>
<td>10</td>
<td>–</td>
<td>10</td>
<td>9</td>
</tr>
<tr>
<td><strong>Governance costs</strong></td>
<td>365</td>
<td>–</td>
<td>–</td>
<td>365</td>
<td>352</td>
</tr>
<tr>
<td><strong>Total resources expended</strong></td>
<td>13,195</td>
<td>2,989</td>
<td>–</td>
<td>16,184</td>
<td>15,874</td>
</tr>
<tr>
<td><strong>Net incoming resources before transfers</strong></td>
<td>770</td>
<td>16</td>
<td>64</td>
<td>850</td>
<td>1,572</td>
</tr>
<tr>
<td><strong>Transfer between funds</strong></td>
<td>5</td>
<td>(3)</td>
<td>(2)</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td><strong>Net incoming resources before other recognised gains and losses</strong></td>
<td>775</td>
<td>13</td>
<td>62</td>
<td>850</td>
<td>1,572</td>
</tr>
<tr>
<td><strong>Other recognised gains and losses</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gains/(losses) on investment assets</td>
<td>(96)</td>
<td>–</td>
<td>–</td>
<td>(96)</td>
<td>134</td>
</tr>
<tr>
<td><strong>Net movement in funds</strong></td>
<td>679</td>
<td>13</td>
<td>62</td>
<td>754</td>
<td>1,706</td>
</tr>
<tr>
<td><strong>Reconciliation of funds</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total funds brought forward</td>
<td>7,470</td>
<td>1,137</td>
<td>200</td>
<td>8,807</td>
<td>7,101</td>
</tr>
<tr>
<td><strong>Total funds carried forward</strong></td>
<td>8,149</td>
<td>1,150</td>
<td>262</td>
<td>9,561</td>
<td>8,807</td>
</tr>
</tbody>
</table>
## BALANCE SHEET AS AT 31 DECEMBER 2011

<table>
<thead>
<tr>
<th></th>
<th>2011 £000</th>
<th>2010 £000</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Fixed assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tangible assets</td>
<td>2,018</td>
<td>2,083</td>
</tr>
<tr>
<td>Listed investments</td>
<td>4,009</td>
<td>2,118</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>6,027</td>
<td>4,201</td>
</tr>
<tr>
<td><strong>Current assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stocks</td>
<td>89</td>
<td>92</td>
</tr>
<tr>
<td>Debtors</td>
<td>1,418</td>
<td>1,689</td>
</tr>
<tr>
<td>Short-term bank deposits</td>
<td>4,000</td>
<td>2,000</td>
</tr>
<tr>
<td>Cash at bank and in hand</td>
<td>2,669</td>
<td>5,317</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>8,176</td>
<td>9,098</td>
</tr>
<tr>
<td><strong>Creditors:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Amounts falling due within one year</td>
<td>4,528</td>
<td>4,345</td>
</tr>
<tr>
<td><strong>Net current assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>3,648</td>
<td>4,753</td>
</tr>
<tr>
<td><strong>Creditors:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Amounts falling due after more than one year</td>
<td>114</td>
<td>147</td>
</tr>
<tr>
<td><strong>Total net assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>9,561</td>
<td>8,807</td>
</tr>
<tr>
<td><strong>Represented by:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Funds and reserves</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Capital funds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Endowment fund</td>
<td>262</td>
<td>200</td>
</tr>
<tr>
<td><strong>Income funds</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Restricted funds</td>
<td>1,150</td>
<td>1,137</td>
</tr>
<tr>
<td>Unrestricted funds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Designated funds</td>
<td>5,943</td>
<td>5,113</td>
</tr>
<tr>
<td>General funds</td>
<td>2,206</td>
<td>2,357</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>8,319</td>
<td>7,470</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>9,561</td>
<td>8,807</td>
</tr>
</tbody>
</table>

### Summarised accounts

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 27 April 2012. 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 S. Bailey, President; Professor N. Craddock, Treasurer – 27 April 2012.

### 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 2011.

### Respective responsibilities of Trustees and auditors

The Trustees of the College are responsible for the preparation of the summarised accounts in accordance with applicable law and the recommendations of the charities SORP. Our responsibility is to report to you our opinion on the consistency of the summarised accounts with the full Annual Report and Accounts.

**Basis of opinion**

We conducted our work in accordance with the Bulletin 2008/3 ‘The auditors’ statement on the summary financial statements’ issued by the Auditing Practices Board for use in the United Kingdom.

**Opinion**

In our opinion the summarised accounts are consistent with the full Annual Report and Accounts of The Royal College of Psychiatrists for the year ended 31 December 2011.


These summarised accounts were circulated to the membership of the College and were approved at the Royal College of Psychiatrists’ AGM, 12 July 2012.
COUNCIL MEMBERSHIP

President†
Professor S Bailey
Treasurer†
Professor N Craddock
Dean†
Dr W Burn
Registrar†
Dr L M Mynors-Wallis
Editor†
Professor P J Tyrer

Associate Deans†
Dr V Banks
Dr H M Bruce
Dr S M Carney
Dr G T Pinner

Associate Registrars†
Dr T M Brown
Dr J G F Bolton
Dr F L Mason
Dr E J Wilkinson

Chairs of Faculties†
Academic
Professor P Woodruff
Addictions
Dr O Bowden-Jones
Child and Adolescent
Dr M A C Murphy
Forensic
Professor T A Fahy
Learning Disability
Dr N Kosky
Liaison
Dr I Hall
Old Age
Dr P V Gill
Psychotherapy
Dr J P W Warner
Rehabilitation and Social
Dr K Healy

Chairs of Sections†
Eating Disorders
Dr J Morgan
Neuropsychiatry
Dr R A Faruqui
Perinatal
Dr E M P McDonald

Chairs of Divisions†
Eastern
Dr D Girling
London
Dr O Raji
Northern & Yorkshire
Dr J Whaley
Northern Ireland
Dr P McGarry
North West
Dr M Campbell
Scottish
Dr P Rice
South East
Dr H G Series
South West
Dr C Fear
Trent
Dr D Chaloner
Welsh
Professor R G Poole
West Midlands
Dr S Edwards

Elected members
Dr J Falkowski (F)
Professor J R Geddes (F)
Dr A N N Ramakrishnan (M)

Co-opted members
Dr S M Carney
Professor M Crawford (College Centre for Quality Improvement)
Dr S Datta (Chair, BMA CCSC Psychiatry Subcommittee)
Dr E Fellow-Smith (for the National Director of Mental Health)
Professor T J G Kendall (Director, National Collaborating Centre for Mental Health)

Chair of Professional Practice & Ethics Committee†
Professor S Benbow

Director of Conferences†
Dr H Miller

Affiliate Representative
Dr I Ahmad

Chair of the Psychiatric Trainees’ Committee†
Dr M Husain

Patients’ and Carers’ Representatives
Mr A Birch
Mrs E Bitcon
Mr A Fisher

Information reflects committee membership as at 1 December 2012. Further enquiries should be sent in writing to the Registrar.
†member ex officio; F, Fellow; M, member
FACULTY, SECTION AND DIVISION EXECUTIVE AND OTHER COMMITTEE MEMBERSHIP

EDUCATION, TRAINING AND STANDARDS COMMITTEE
Dr N K Agrawal
Dr F Ahmad
Dr V M Aziz
Professor S M Bailey (President)
Dr J S Bamrah† (Director, CPD)
Dr A Banks
Dr A B Biswas
Dr P C W Bowie
Dr A M Boyle
Dr A D Brittlebank (Specialist Advisor)
Dr D H Brown
Dr N S Brown (Specialist Advisor, Chief Examiner)
Dr W M Bruce
Dr W K Burn† (Dean)
Dr H Cappleman (PTC representative)
Dr S M Carney† (Associate Dean)
Dr A F Clark
Dr S P Dave
Dr H E De Waal
Dr P F Gallagher
Dr G M Garry
Professor J Hayden
Dr M Husain (PTC representative)
Dr B W Jacobs
Dr J G Johnston
Dr I R Jones
Dr J H Kent
Dr M A Ledger
Dr D Longson
Dr K F Lovett
Dr M Maier
Dr N J Margerison (observer)
Dr H E J Miller
Dr G L Milner
Dr T Morris
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NEW BOOKS 2012

Clinical Topics in Personality Disorder
Edited by Jaydip Sarkar and Gwen Adshead

A Clinician’s Brief Guide to the Mental Health Act (2nd edn)
By Tony Zigmond

Firesetting and Mental Health
Edited by Geoffrey L. Dickens, Philip A. Sugarman and Theresa A. Gannon

Where There is No Psychiatrist
By Valsamma Eapen, Philip Graham and Shoba Srinath

Essentials of Physical Health in Psychiatry
Edited by Irene Cormac and David Gray

Madness at the Theatre
By Femi Oyebode

Seminars in Liaison Psychiatry (2nd edn)
Edited by Elspeth Guthrie, Sanjay Rao and Melanie Temple

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