

**Minutes of the Mental Health Specialty Training Board meeting held on Monday 4
December 2017, at 10.45am, in Room 6, 2 Central Quay, Glasgow**

Present: Rhiannon Pugh (RP) Chair, Richard Athawes (RA), Marie Therese Allison (MTA), Daniel Bennett (DB), John Crichton (JCr), Euan Easton (EE), Rob Gray (RG), Rekha Hegde (RH), Ronald MacVicar (RMV), Alice McGrath (AMG), Seamus McNulty (SMN), Norman Nuttall (NN), Jackie Picket (JP), John Russell (JR), Karen Shearer (KS), Andrea Williams (AW)

Apologies: Andrew Bailey (AB), Fiona Drimmie (FD), Nick Hughes (NH), Dianne Morrison (DM), Stuart Ritchie (SR), John Taylor (JT), Shona Walker (SW)

In attendance: Partha Gangopadhyay (item 2 only), Dawn Mann (DM), Paola Solar (PS), Katherine Vlitos (KV)

Item	Lead
<p>1. Welcome and apologies The group introduced themselves and the apologies were read. Particularly welcome were Dawn Mann, new QI Manager for Mental Health, and Katherine Vlitos, new Scottish Clinical Leadership Fellow.</p>	
<p>2. Simulation Collaborative – Partha Gangopadhyay Dr Gangopadhyay had been invited to speak to the Board as he is the only Psychiatry rep at the NES Simulation Collaborative group created by Prof Clare McKenzie. Dr Gangopadhyay reported that the Collaborative have met several times, and a Mental Health Short Life Working Group has been created. They will look at current ongoing Simulation initiatives in Psychiatry in Scotland, what can be shared, development priorities, etc.</p> <p>The Board were invited to let Dr Gangopadhyay know of any such initiatives they are aware of. He will get back to this Board if there is any action that is required from them.</p>	
<p>3. Mental Health STB Minutes 18.09.17 The minutes of the previous meeting were approved as a correct record.</p> <p>Action points from the previous meeting:</p> <ul style="list-style-type: none">• 2. CASC exam for BBT trainees. JR had been told that this would not be a problem as BBT trainees will get a special dispensation.• 3. Externality at ARCPs. JR had mentioned this at ETC but there was no easy solution.• 3. Automatic Outcome 5 email from Turas. To leave on agenda.• 4.6. ETC distinction between Psychiatry Supervisors and ES. No update.• 4.8. TPD approval for trainees doing locum. RP had circulated this paper to the group.• 5.2. R1 “non-appointable” trainee applying for R2. It has been confirmed that trainees who have been deemed “non-appointable” in Round 1 are allowed to apply to Round 2 straight away.	Agenda

- 5.3. To get more information about the IMTF scheme. RP will invite John Colvin to attend the next meeting to talk about IMTFs.
- 5.5. Origin of the Pers Spec 2018 document. RP indicated that the paper had come from MDRS Recruitment Subgroup. This group has representatives from all nations so the document was approved by all four nations.
- 9.3. Mandatory Training on Turas. Turas is currently under development so this may have been added already.
- 10.1. WPBA training model. AW had distributed the WPBA slides from the College. This can be taken off the agenda.
- 10.2. WPBA ST4 on deanery website. The group were happy that the information on the website is accurate.

RP

It was noted that OAP follows the curriculum but they do not insist that trainees do SAPE. AMG noted that they send a letter to CAP trainees with things for them to do and amongst other things they indicate that, although not mentioned on the curriculum, it is important for trainees to do SAPE. AMG will send the letter to RP and Rosie Baillie. The Board agreed to leave things as they are, as the curriculum is currently under review.

AMG

4. **Matters Arising**

4.1. **CASC Exam for BBT trainees**

As above. This can be taken off the agenda.

4.2. **Externality at ARCPs – update from ETC**

As above. This can be taken off the agenda.

4.3. **Outcome 5 on Turas – generic email issues**

As above.

4.4. **Shape of Training update**

All Ministers have now accepted the Shape of Training recommendations. The Academy of Medical Royal Colleges is undertaking a mapping exercise. RP and JCr are meeting with the College and Prof Finlay to discuss, amongst other things, post-CCT accreditation, and GP in Mental Health. They will feed back to the STB.

Other SoT work currently ongoing: Improving Surgical Training (IST), replacing Core Surgical Training from August 2018; Core Medical Training will also be replaced; GP 3+1. Core Psychiatry Training is likely to evolve but at a later date.

4.5. **AMP Training Update**

JCr informed the Board that they are still waiting for a meeting date. Resources are being developed. Keep this item on the agenda.

4.6. **Foundation trainees in Psychiatry**

There is a meeting next week between RMV, RP and Duncan Henderson, Chair of the Foundation Programme Board, to start discussions about how to take this forward. JCr noted that the College is also working on this and there will be a meeting about workforce numbers soon.

4.7. **Mentoring for trainees**

This can be taken off the agenda.

4.8. **Communication amongst regions**

Trainees can contact their TPD or the TP Administrator directly, to find information about specific training. The STCs can distribute the information available.

This item can be taken off the agenda.

4.9. **The role of Supervisors (GMC letter) – ETC update**

As above. This can be taken off the agenda.

4.10. **Associate Dean for National programmes**

DB – CAP and ID

SMcN – OAP

RP – Forensic Psychiatry and Psychotherapy

These will be left as they are.

5. **Recruitment**

5.1. **CPT Recruitment**

CT 1 Recruitment will take place on 29 and 30 January in Dundee. It will be a similar process as past years, but using digital marking. iPads will be distributed for the day and training will be provided. Digital marking had been piloted in the autumn and had received very positive feedback.

There were 707 applicants across the UK, where last year there had been 590.

There are talks about a bypassing system. Looking at all ARCPs, a 98% of trainees are offered posts when they obtain more than 495 in their SJT. The proposal is that trainees who obtain a score of more than 541 in their SJT will receive automatic offers, without the need for interviews. This has already been agreed at College level.

5.2. **ST Recruitment**

The interviews will take place in the spring, in Manchester. There will be two stations, one for ePortfolio where all trainees will self-mark and explain why. And a communication station, with some questions at the end.

There had been some anxiety about scoring in Forensic Psychiatry as there were some odd discrepancies between the sessions. The Board hoped that this was just a one-off. There had been issues at the communication station as the scenario was not refreshed and there had been discussions out-with the station.

The run-through CAP piloted in HEE had reported 94 applicants for 6 posts.

5.3. **International Medical Training Fellowship**

One OAP in the North region had been approved by the Board.

6. **Workforce**

Ihsan Khader would be the College Workforce representative. Dr Khader will be invited to join STARG and this STB.

ISD have figures on specialties and age of consultants, indicating that on average, Psychiatry have older consultants than other specialties.

The new College data analyst is going to create quarterly data updates of workforce in Scotland, which will be very well received.

7. QM/QI

Dawn Mann is the new Quality Manager for the Mental Health specialties, and Dr Geraldine Brennan is the new Quality Lead. A new Associate Dean for Quality in Mental Health Specialties is required.

The QRP for Psychiatry took place on the 29 September. They have requested more information from a few sites and scheduled some visits already. Triggered visits to Argyle and Bute in January and St John's Edinburgh in February, as well as the whole CAP specialty in May 2018.

RMV noted that there are ongoing concerns regarding NHS Tayside and their General Adult services. The team have visited the Health Board with focus on the General Adult services training. They have decided against putting the whole Board in enhanced monitoring as they have seen some slight improvement already. There is widespread concern about the Mental Health services in NHS Tayside. RMV is participating in visits on behalf of NES.

7.1. GMC Visit 2017

The GMC have visited the 8 Health Boards and 5 Medical Schools as scheduled. They will be visiting the deanery on 11 and 12th December.

7.2. SCLF

RMV noted that the new recruitment round for appointment of Scottish Clinical Leadership Fellows is open. This has been particularly successful with Psychiatry trainees.

8. Cost of Training

The link distributed listed all the mandatory training per specialty. The Board noted that they all looked correct but the MRCPsy courses. Medical Psychotherapy is under-represented on the report. RP will feed back to the Heads of School.

9. Deputy Psychotherapy TPD

SMN reported that Core Psychiatry in the West region has 83 trainees, half of the trainees in Scotland, and six different Health Boards. The TPD struggles to coordinate trainees to complete the Psychotherapy competencies within the timescales required.

The STB were sympathetic to the issue and would support a business case for a deputy TPD, but it is understood that NES will not have funding for this. RP will take up to MDET.

RP

10. NES Contribution to Mental Health

Judy Thomson, NES Director of Psychology, had been asked to provide a summary of what NES do for Mental Health in Scotland.

11. ARCP

11.1. Cross-region working

The five national programmes are already working nationally. There have not been any problems with externality until this year.

The cross-region working model could be trialled with GAP, taking 10% of all trainees across regions and do their ARCPs centrally. RP will email the GAP TPDs to suggest this for next year.

RP

11.2. ARCP Outcomes comparison

EE had been working comparing ARCP outcomes 3, 4 and 5 across regions. It is perhaps possible to obtain a report with this information from Turas. RP will discuss with Anne Dickson and will feed back.

RP

12. WPBA

12.1. Training for WPBA

The substitution of WPBAs with SLEs is imminent.

12.2. WPBA at ST4 level

This had been addressed and it can be taken off the agenda.

13. Heads of School

- Applications are up thanks to the College recruitment drive. The College has received very positive anecdotal feedback. The group were uncertain of whether the initiative had been done with HEE funding.

RMV noted that it is expected that in 2018/19 NES will have even less resources, but they need to understand the source of support in HEE and whether the devolved nations are expected to provide the same funding. The main expense for the College's recruitment initiative is room hire, which is something that NES could easily provide. College staff will be asked to contact RP and PS to secure rooms in NES venues. JCr will let them know.

JCr

- Accreditation of Transferable competencies. Trainees are allowed to declare at the point of application any transferable competencies, but then it is up to the TPD to decide how much time to take off from their training.

14. ETC update

JR had distributed a summary report, with the following main items:

- Shape of Training
- Curriculum. The RCPCH has a new curriculum that has just been approved by the GMC. This may be used as a base for the new RCPsy curriculum.

15. Updates

15.1. LDD / MDET highlights

No further update.

15.2. Specialties

- GAP – no representative present.

- CPT – the four CPT TPDs have started to meet regularly.
- Psychotherapy – no further update.
- OAP – 2 new ST4 dual training in the North region
- ID – One person will start in February. There will be several vacancies from August: 4 in the West, 2 in the South East and 1 in the East.
- Forensic Psychiatry – no further update.
- CAP – there is a visit coming up. One person recruited in the South East for February start.
- Dual Training – no further update.

15.3. **DME**
No representative present.

15.4. **Academic**
No representative present.

15.5. **College**
RP noted that, as a follow up to the GMC's Medical Licensing Assessment survey, the College are considering changes to the undergraduate exam system. For the undergraduate exam, the College is trying to have all Schools follow the same curriculum.

The RCPsy requires to have a regional rep.

JR's role with the College as ISTC is an elective role.

15.6. **BMA**
No further update.

15.7. **Trainee**
No representative present.

15.8. **Specialty Doctor**
No representative present.

15.9. **STARG**
There have been no further meetings.

16. **Papers for information**

- The Board had been distributed a survey regarding their access to journals, books and databases. They were asked to respond to the survey and circulate as widely as possible.

17. **AOB**

- MRCPsy courses – to make sure that they are funded equitably, as some come out of the study leave budget and others do not.

18. **Date of next meetings**
26 February 2018, 10.45am, Room 3, Westport, Edinburgh
14 May 2018, 10.45am, Room 6, 2 Central Quay, Glasgow
03 September 2018, 10.45am, Room 2, Westport, Edinburgh
03 December 2018, 10.45am, Room 5, 2 Central Quay, Glasgow

Action points

Item No.	Item Name	Action	Lead	Deadline
2	MA: Automatic Outcome 5 email	To defer to next meeting	Agenda	
2	MA: IMTFs	To invite John Colvin to the Board to speak about IMTFs	RP	
2	MA: WPBA in ST4	To send the letter to CAP trainees to Rosie Baillie and RP	AMG	
9	Deputy Psychotherapy TPD	RP to take to MDET	RP	
11.1	ARCP: Cross-region working	To liaise with GAP TPDs to suggest cross-regional ARCP	RP	
11.2	ARCP: Outcomes comparison	To speak with Anne Dickson to see if it is possible to get ARCP outcomes comparison from Turas	RP	
13	HoS	To let the College know that they can contact RP or PS to book rooms in NES for Recruitment initiatives	JCr	