

**Minutes of the Mental Health Specialty Training Board meeting held on Monday 03 June
2019, at 10.45am, Room 3, Westport, Edinburgh**

Present: Seamus McNulty (SMN), John Crichton (JC), Nupur Gandhi (NG), Helen Goode (HG), Duncan Gray (DG), Darragh Hamilton (DH), Wailan Imrie (WI), Amjad Khan (AK), Claire Langridge (CL), Dawn Mann (DM), Marina McLoughlin (MML), Jennifer Makenzie (JM), Norman Nuttall (NN), Chris Pell (CP), Rhiannon Pugh (RP), Stuart Ritchie (SR), John Russell (JR), Les Scott (LS), Karen Shearer (KS), Chris Sheridan (CS)

Apologies: Daniel Bennett (DB), Euan Easton (EE), Rekha Hegde (RH), Ihsan Khader (IK), Alice McGrath (AMG), Helen Millar (HM), Dianne Morrison (DM), Rowan Parks (RPa), Ganesan Rajagopal (GR), John Taylor (JT)

In attendance: Paola Solar (PS)

Item	Lead
<p>1. Welcome and apologies The attendees were welcome to the meeting and the apologies were noted. A special welcome was given to Marina McLoughlin, new TPD rep for Medical Psychotherapy.</p>	
<p>2. Mental Health STB Minutes 01 April 2019 The minutes of the previous meeting were approved as a correct record.</p> <p>From the actions points it was noted:</p> <ul style="list-style-type: none">• 3.3 Foundation trainees in Psychiatry. SMN will invite Duncan Henderson to the next STB.• 3.5 Recognition of Trainers Whilst it is recognised that Recognition of Trainers status is the remit of the DMEs, there are a variety of parallel processes across the country for having training posts approved. AK highlighted that this needs to be a standard process across all specialties in Scotland. SMN and JC will email AK with the views of the Board and a diagram of the process. AK will take to MDET for their support. If MDET agrees to this change, approval from the DMEs will also have to be sought. <p>Currently, APGDs are emailing to TPDs about trainers, rather than the Service – it is felt that this creates miscommunication.</p> <p>Recognition of Trainers guidance indicates that the ultimate responsibility for appointment of Educational Supervisors lays with the DME, or the Associate DME of the employing Board. The Board felt that, apart from DME’s approval, the appointment of a new trainer also should have the input of the TPD or Associate Dean regarding trainers being appointed to Core or Higher or even students only.</p> <p>There were several accounts of mismatches between GMC RoT and trainers listed as recognised on Turas. There are trainees who have demitted from Educational Supervisor roles and they do not appear as Clinical Supervisors.</p>	<p>SMN</p> <p>SMN/JC AK</p>

There had also been a glitch on SOAR, on the DME side, regarding RoT. WI is working with Fiona Anderson to solve the issue, which has affected all specialties.

- 8.1 ARCPs and externality

Externality will be discussed at the College this week. JR will feed the discussion back to the Board.

- 9 Heads of School – Run-through CAMHS

DB had indicated on his report email that there was no appetite for this in Scotland.

The pilot of run-through CAMHS in England has a very good percentage of fill rate. JR noted that this will also come up at the College meeting this week.

- 11.2 Specialties updates – Moving an ID number to Tayside

AK and SMN have a meeting this afternoon to discuss.

- 11.2 Specialties updates – CAP compressed hours request

This had been solved and the trainee advised that it is not possible to do.

3. **NHS Tayside**

This item had been put in the agenda for discussion at the request of Prof Stewart Irvine in light of the publication of the preliminary report and media attention.

The preliminary report confirms that the Health Board is in enhanced monitoring and that there are a number of challenges in the provision of General Adult Psychiatry in Tayside.

CP noted that there are serious concerns about the number of consultants in GAP leaving Tayside. They have currently just about enough trainers to ensure all trainees have Educational Supervisors, but at the end of the year there will only be 6 WTE consultants. There is one ID trainee with no ES at the moment, but it seems that this is in the process of being solved.

It was felt that the media reflects just public perception, as the clinical work seems to be average. JC noted that, although the challenges in Tayside appear more exacerbated than in other regions, the issues are not unique to Tayside.

The interim report says that the Scottish Government is setting up a Safety Board. There is a lot of ongoing work trying to fill management roles.

The Scottish Government has funded events to attract trainees to Psychiatry. JC has a meeting with them to discuss international recruitment.

The Board expressed their unanimous support for trainees and trainers in Tayside.

4. **Matters Arising**

4.1. Shape of Training update

AK reported that Foundation numbers will be increasing, and the majority will go to Psychiatry and GP placements. An announcement from the Scottish Government is expected in the next few weeks.

The STB will have to decide where to put the slots. In the future there will be monitoring of the impact of the new slots on Psychiatry and GP.

- 4.2. Mental Health ID and Dementia
No update.
- 4.3. Recognition of Trainers update – trainers’ appointment
As discussed above.
- 4.4. Reference checking for Trainees
This continues to be an issue. The employing Board has to check the references of appointed trainees and take action when required.

The TPD does not get sight of the references unless the employing Board feels that there is an issue that needs to be checked by the TPD. MML noted that she is aware of an issue with a new trainee but has not received copy of the references.

JM will take to the HR Subgroup to seek clarification.

JM

- 4.5. Run-through CAHMS

5. Recruitment

- 5.1. National Recruitment Board
SMN was not able to attend the Board.
- 5.2. CT Recruitment
The table distributed shows that the central belt gets the majority of trainees.

JC suggested to increase the budget for study leave for trainees in the North of Scotland, as an incentive, perhaps funding the uplift from unfilled training posts in the region.

Another initiative could be to create a scheme for trainees to work two years in the central belt and one in the North.

AK will ask Anne Dickson to attend the next meeting of the STB so these and other options can be raised with the TM team. Then the proposals would have to go to MDET.

AK

- 5.3. ST Recruitment
The Board noted the recruitment paper.

6. Workforce
No update.

7. Eating Disorders
This had been discussed briefly at MDET. The UK Faculty for Eating Disorders is one of the several organisms covering the subject. It is likely that this will be added to the Psychiatry curricula across specialties.

8. External Psychotherapy Training
MML explained that Psychotherapy is a very emotionally and physically strenuous training, as well as financially. External training is essential for Psychotherapy trainees and has to be on par with other UK Medical Psychotherapy trainees.

MML asked for support in the expansion of external Psychotherapy training, to give more flexibility for trainees.

RP noted that the curriculum does not specify what the trainee needs to do to meet requirements. In Scotland there has always been external medical psychotherapy training.

The STB agreed to support the broadening of the range of external training that can be recommended to this group of trainees. MML will take this to the STC.

JR was aware of Core Psychiatry getting an ARCP outcome 3 due to non-completion of Medical Psychotherapy. MML felt that this could be more related to service and other commitments rather than lack of trainers in the area. JR will look at figures to see where there are issues in Scotland. He will bring it up at the College meeting this week.

9. QM/QI

The sQMG meeting in the morning had been dominated by Tayside issues.

AK reported that the visit to the Borders had been positive.

10. BBT update

JR sits on the UK Governance group for BBT and has emailed EE with queries regarding the curriculum.

There will be 21 people from August in the Scottish programme, in various locations.

It was noted that going into Core Psychiatry 2 from BBT will almost certainly result in an Outcome 3 due to an inability to fulfil all Medical Psychotherapy competencies.

11. ARCP

11.1. Externality
As above.

11.2. WPBA
JR reported that the discussion around SAS doctors undertaking WPBA has been stalled until now, but it is on this week's College agenda.

12. Heads of School

There has been no meeting lately.

13. ETC update

JR informed the group that if a TPD has a trainee who has the competencies to obtain their CCT ahead of time, they have to inform the College. JR can help with this.

14. Updates

14.1. LDD / MDET highlights

AK reported that the Annual Review work with the Quality team had gone well.

Foundation numbers are an ongoing discussion.

14.2. Specialties

- GAP – CP will be working with the Faculty of GAP.
- CPT – the deanery had offered to use GPST vacancies to advertise CPT LATs.
- Psychotherapy – no further update.
- OAP – Only one gap currently.
- ID – there was an ID vacancy in Fife that was used for a GP post until August. JR will check with Anne Dickson that this can be put back to Psychiatry.
Only 1 out of 8 posts have been filled. This is a UK-wide issue and the UK Faculty is trying several strategies to tackle it.
- Forensic Psychiatry – no further update.
- CAP – no representative.
- Dual Training – no update.

14.3. DME

WI noted that there has been a lot of reshuffling and there is a new QI Associate DME

14.4. Academic

No representative.

14.5. College

No further update.

14.6. BMA

No update.

14.7. Trainee

CS noted that trainees are aware of the challenges in Tayside and some of them may be feeling disengaged.

14.8. Specialty Doctor

No representative.

14.9. STARG

One successful recruitment event, targeting difficult to recruit specialties. MS noted that trainees do not seem to travel to other regions for these events, so he will ask the Scottish Government for funding for more regional events.

There is another event coming up, for trainees in Core training moving into Higher training.

15. **Papers for information**

No additional papers received for information.

16. **AOB**

16.1. External training

Due to changed personal circumstances, a trainee has questioned whether they must undertake an external psychotherapy training, which is a part of Higher psychotherapy training in Scotland. However, the current curriculum does not state that an external psychotherapy training is mandatory. The STC decided to seek advice from the Specialty Training Board. The Board's opinion was that the trainee will be less prepared than their peers if they decided not to pursue external psychotherapy training, but because this is not specified in the curriculum, it cannot be mandated.

- 16.2. Trainee doing on call while LTFT due to health issues
 A trainee new to the psychotherapy training programme insists that they should not do on-call. This trainee is currently employed by a different programme working LTFT due to health issues. The latest occupational health report indicated that the trainee should not do night shifts. The psychotherapy curriculum specifies that "trainees must gain experience in the assessment and clinical management of psychiatric emergencies and trainees must document both time spent on-call and experience gained (cases seen and managed) and this should be signed off by their Clinical Supervisor. A number and range of emergencies will constitute relevant experience. Advanced trainees in Medical Psychotherapy must have opportunities to supervise others as part of their experience of emergency psychiatry... Experiences from this work should be assessed and will contribute to the Medical Psychotherapy trainee's advanced training." The Board's opinion was that the trainee should be involved in on-call and the necessary competencies could be gained by daytime weekend on-call work, for example, as a reasonable adjustment based on OH recommendation. MML will liaise with the Service.

- 16.3. West of Scotland training allocations
 To next agenda.

Agenda

17. Date of next meetings

Friday 13th September 2019, 10.45am – Room 5, 2 Central Quay, Glasgow

Friday 6th December 2019, 10.45am – Room 1, Westport, Edinburgh

Action points

Item No	Item Name	Action	Lead
2	Actions from previous meeting: Foundation trainees in Psychiatry	To invite Duncan Henderson to the next STB	SMN
2	Actions from previous meeting: RoT – approval of trainers	To write a draft paper with diagram of responsibilities re approval of trainers To take the draft paper to MDET for discussion and support	SMN/JC AK
4.4	Matters arising: Reference checking	To take to HR Subgroup to clarify	JM

5.3	CT Recruitment	To invite Anne Dickson to next STB to discuss options to increase attractiveness of Psychiatry	AK
16.3	West of Scotland training allocations	To next agenda	Agenda