

Minutes of the Mental Health Specialty Training Board meeting held at 10:45 on Friday, 2nd June 2023

Present: Seamus McNulty (SMcN) [Chair], Natalie Bain (NB), Daniel Bennett (DB), Deborah Brown (DBr), Stephen Byers (SB), Adam Daly (AD), Neera Gajree (NG), Pujit Gandhi (PGa), Rekha Hegde (RH), Wai Lin Imrie (WI), Stephen Lally (SL), Claire Langridge (CL), Katy Lewis (KL), Jen Mackenzie (JMck), Nina MacKenzie (NMck), Ashling Mooney (AM), Dianne Morrison (DM), Norman Nuttall (NN), Gordon Wilkinson (GW) & Quadrat Ullah (QU)

Apologies: Julie Arthur (JA), Alastair Campbell (AC), Hollie Craig (HC), Jonathan Cavanagh (JC), Euan Easton (EE), Judith English (JE), Ian Fergie (IF), Linda Findlay (LF), Tom Fardon (TF), Partha Gangopadhyay (PG), Rosemary Gordon (RG), Nick Hughes (NH), Ian Hunter (IH), Michael Jamieson (MJ), Ihsan Kader (IK), Edward Kelly (EK), Emma Lewington (EL), Jane Morris (JM), Christopher Pell (CP), Dee Rasalam (DR), Susan Richardson (SR), John Russell (JR), Ganesan Rajagopal (GR), Neelom Sharma (NS), Priti Singh (PS), Chris Sheridan (CS), Laura Sutherland (LS), Colin Tilley (CT) & Michael Turner (MT)

In attendance: Rachel Brand-Smith (RBS)

Item No	Item	Comment	Action
1.	Welcome & Apologies	The chair welcomed the following new member: <ul style="list-style-type: none"> • Dr Qudart Ullah (Learning Disability Psychiatry, NHS Greater Glasgow & Clyde) • Me Stephen Lally (Deputy Manager, Recruitment, NES) 	
2.	Minutes of meeting held on 17/02/2023	The meeting notes of 17/02/2022 were accepted by the members.	
3.	Matters Arising	There were no matters arising.	
3.1	Addictions Tutor Network	<ul style="list-style-type: none"> • SMcN confirmed that this was discussed at the TPD Training Day, and all regions (apart from Greater Glasgow & Clyde) have work based assessment arrangements in place. SB confirmed that meetings have been held with Education Supervisors and local leads have been identified. 	
4.	Action Points from 17/02/2023		

4.1	NG to share slides to TPDs for use at induction.	<ul style="list-style-type: none"> NG stated that slides will be sent out for the August Induction. 	
4.2	RCPsych Guidance for Recognition of Trainers	<ul style="list-style-type: none"> See Item 6.4 	
4.3	Academic report	<ul style="list-style-type: none"> An academic rep was not available 	
5.	Main Items of Business		
5.1	Eating Disorder Credentials	<ul style="list-style-type: none"> SNcM stated that the Royal College of Psychiatrists (London) have produced an Eating Disorders Credentialing course. SMcN noted that Scottish based doctors are unable to apply as funding is from HEE. It has been suggested therefore that the Scottish Deanery develop a similar course (with some amendments regarding assessment, educational governance, appeals procedure etc.) which trainees can take pre-CCT'ing. SMcN stated that this proposal has been referred to English APGDs and GMC. 	
6.	Standard Business Issues		
6.1	Deanery Issues		
6.1.1	Learning Disability Pilot Run-Through Proposal	<p>Various issues related to Learning Disability run-through pilot were discussed including:</p> <ul style="list-style-type: none"> Run-through Pilot: QU confirmed that a pilot has been run in the England. QU noted that this may encourage recruitment to learning disability psychiatry in Scotland. The members approved the use of the run-through pilot in Scotland. Additional Posts: SMcN confirmed that a request has been submitted for two additional posts to support the run-through project for 2024. SMcN confirmed that one post will be in the South-East Region and one in the West region. 	<p>STB members approve the roll out of the Learning Disability Run-Through Pilot across the Scottish Deanery</p>

		<ul style="list-style-type: none"> • Issues Regarding Funding: NMacK asked if the Core Learning Disability budget came from higher training or whether this was additional funding. SMcN confirmed that this was additional funding. SMcN stated that he did not want to use unfilled ST4 posts to fund pilot. SMcN stated that adverts for post should indicate that there is no permanent funding stream. • Pilot Start Date: GW asked if it was appropriate to start at the February recruitment date. GW noted that quality of trainees may vary. SMcN stated that trainee quality had improved regarding ST4s. • Run-through Pilot & ST1s: GW asked whether this could be open for ST1s who could then progress to the run-through programme. SMcN stated that this could be the case. • Training & Study Budget: PG asked if trainees could attend training at Royal collage and whether this could be funded from trainee study budget. SMcN stated that he would have to confirm this. QU asked whether study budget could be increased. SMcN stated that this would have to be investigated. • Discussions with Faculty: RH asked if funding issues has been discussed with Learning Disabilities Faculty. PG confirmed that this was not the case. • Training Responsibilities: PG stated that there has been a request by NES to move some training responsibilities from West region to South-East region. PG stated that this may impact funding. 	
6.2	Quality	<p>NB gave the members the following update including:</p> <ul style="list-style-type: none"> • Quality Visits: NB stated that the following Quality visits have been completed: <ul style="list-style-type: none"> • Strath Eden Hospital – Report finalised and with DME • State Hospital – Report still to be finalised with DME • Royal Edinburgh Hospital - Report finalised and with DME 	

		<ul style="list-style-type: none"> • Visits to be completed: NB stated that the following visits are to be completed: <ul style="list-style-type: none"> • Inverclyde Hospital – Will be carried out in October • Dykebar Hospital – Will be carried out in June 	
6.3	Training Management	<p>Various issues were discussed relating to ARCP panels including:</p> <ul style="list-style-type: none"> • ARCP & External Advisors: DM stated that external advisors were required on ARCP panels however there was a difficulty in sourcing royal college representatives. DM stated that external advisors were required when assessing trainee training time. • ARCP & LAT Posts: DBr asked how LATS posts were assessed. DM confirmed that any trainee who wants recognition for time spent as a LAT must have this approved by the college ahead of any ARCP and noted that an external advisor is not required. 	
6.4	Professional Development	<ul style="list-style-type: none"> • DB stated that discussions are ongoing, and courses should be available in August. PG asked if the number of Trainers’ workshops had been increased. DB confirmed that this was the case. DB stated that the long-term aim was to have all trainees be approved by a DME at the time of CCT. 	
6.5	MDST	<ul style="list-style-type: none"> • No rep was available. 	
6.6	Equity, Diversity & Inclusion	<p>RH gave the members the following update related to Equity, Diversity & Inclusion:</p> <ul style="list-style-type: none"> • STEP Programmes: RH confirmed that Psychiatry would prefer to carry on running a separate course. RH noted however that it was difficult to identify IMGs when they move ST4 to C1. • Psychiatry STEP Budget Issues: RH suggested a more centralised budget could be used for the Psychiatry STEP programme. 	

		<ul style="list-style-type: none"> • Trainee Portfolio: RH stated that Psychiatry is bidding for a new trainee portfolio. RH stated that she has suggested that consultants and trainees from the neurodiversity panel be invited to this group. 	
6.7	Recruitment		
6.7.1	Learning Disability Run-Through Pilot	<p>The following issues were discussed relating to Expansion posts including:</p> <ul style="list-style-type: none"> • Recruitment Information: JMack confirmed that information on timelines and fill rates have been circulated to the members. JMack confirmed that all sub-specialties have 100% fill apart from General Adult Psychiatry at ST4. Round 3 recruitment will be in at the end of July. SMcN noted that there were some regional variations especially in North and East regions. • Learning Disability Run-Through Post: DM asked if the Learning Disability run-through post should be added to the Core Psychiatry list. JMack confirmed that this will be added to Round 3 list as a separate programme entry. 	
6.7.2	Recruitment Unfilled Posts &	<p>The following discussion were held relating to unfilled posts including:</p> <ul style="list-style-type: none"> • Issues related to General Adult Psychiatry: DM and SL confirmed that the General Adult Psychiatry have been impacted by some trainees deciding to remain in the West region and taking second choices in other sub-specialties. AD stated that numbers have declined over the past few years and asked what how this will be addressed. SMcN suggested that NTN could be moved to under sub-scribed areas. • Re-Cycling of Unfilled Posts: AD asked if the unfilled posts will be re-cycled. SMcN confirmed that this was the case. DM stated that the number of filled posts was impacted by the number of trainees on LTFT and CCT'ing out of synch. • Combining Training in Regions: NMack suggested that training could be merged/expanded in South and South-East regions to encourage trainees to remain in region. SMcN noted that this was suggested last year but was rejected by General 	

		<p>Psychiatry TPDs. DB noted that expansion might not fit the new NES management structure. GP noted that there are not enough Trainers in the East region.</p> <ul style="list-style-type: none"> • Higher Training Posts: DB stated that the programme requires additional ST4 higher posts. SMcN noted that funding for this would not be provided if programme still has unfilled ST3 posts. GP noted elevated costs due to use of locums. • CSER Route: SMcN stated that the NHS Grampian are providing fellowships for trainees who are completing training through CSER route however noted that this was a more onerous training pathway. 	
6.7.3	Expansion Posts	<p>The following discussion were held relating to expansion posts including:</p> <ul style="list-style-type: none"> • Expansion Post Submission: SMcN confirmed that a request has been submitted for five expansion posts in February 2024 and ten posts in August 2024. SMcN predicted that two of the five posts requested for the February intake will be reserved for the Learning Disability run-through programme. • Recognition of Trainers: SB noted that this would be in conjunction with the recognition of Trainers in terms of staff or specialty grading. SMcN noted that the Heads of Schools and Education Training Committees are discussing this issue. • Accommodation of Expansion Posts: SMcN noted that various adjustments would be required, such as re-arranging TPD cover to accommodate these posts. SB stated that adjustments to TPD numbers and PA hours could be accommodated. RH noted that there are issues regarding such as Trainers who have been moved to Foundation training, requirements for additional consultation spaces etc. The members agreed that expansion posts could be accommodated. • WTE & LTFT: PG asked if expansion posts were equivalent to Whole Time Equivalent (WTE) numbers and noted that increased Less than Full Time (LTFT) is becoming difficult to manage. PG noted that there may be issues with CT2 and CT3 trainees. NMcK noted 	

		<p>that rates of WTE and LTFT change year to year. AD noted that there is a particular issue with LTFT in Paediatrics. SMcN stated that this was still to be discussed at MDST.</p> <ul style="list-style-type: none"> • Impact on Supervisors: SMcN stated that there may be issues related to supervisors have more than one trainee. DBr highlighted the importance of the Psychiatric Supervisor report and the fragmented nature of some posts. 	
7.	Reports		
7.1.1	General		
7.1.2	Service (DME) Report	<p>Various issues were discussed relating to Service issues including:</p> <ul style="list-style-type: none"> • Workforce Update: AD stated that the new Medical Mangers Group are still finalising their Terms of Reference. AD stated that the National Care Service have resumed meetings. AD stated that they have still to meet with the new Health Minister. • SWCC Group: NMacK confirmed that this group is addressing workforce issues relating to psychiatry. NMacK stated that this group has agreed Terms of Reference and will look at issues relating to transitions moving from Core Training to Higher training, retention of consultants etc. 	
7.1.2	DME Report	<ul style="list-style-type: none"> • No rep was available. 	
7.1.3	Royal College Report - Flexibility in Training & Reduction of Training Time	<p>Various issues were discussed relating to faster CCT including:</p> <ul style="list-style-type: none"> • Different Guidance: SMcN noted that there may be a miss match in advice between the Royal College of Psychiatry policy and Scottish Deanery policy. SMcN noted that there is an increase in trainee requesting a reduction of training time. • External Supervision: SB noted that external supervisors were required for trainee's ARCP. SB stated that if this was the case it would be difficult to source external supervisors for trainees especially for those who are who are out of sync. 	

		<ul style="list-style-type: none"> • Clarification of Terms: RH stated that circumstances for 'exceptional' trainees requires clarification. RH noted that this could be open to interpretation. • Maximum time allowed for CCT: AD highlighted issues related the maximum amount of time allowed for a trainee to CCT early (12 months) and training not being time based. • Impact of LTFT: PG stated that many trainees are now planning to work part time and finish earlier. WLI confirmed that this is unrealistic especially at CT1. SMcN stated that reduction should be only considered in CT3. NN stated that trainees require clarification so they can make appropriate decisions regarding LTFT. QU and RH highlighted how much time a trainee requires to spend on quality consultations. • GMC Approval: DB asked if the guidance documents had approval from the royal college and GMC. DB highlighted the possibility of trainees being granted an early CCT but subsequently being rejected by the GMC. SMcN stated that the document has been approved by the Psychiatric Education Training Committee and Heads of School however could not confirm if the college have given approval. 	
7.14	Heads of School Report	<ul style="list-style-type: none"> • SMcN confirmed there were issues to discuss. 	
7.2	Specialty & STC Reports	<ul style="list-style-type: none"> • WLI stated that Judith has resigned as TPD for North and East area and will be replaced by Sam Wilson. 	
7.2.1	GAP	<ul style="list-style-type: none"> • This item was not discussed 	
7.2.2	CPT	<ul style="list-style-type: none"> • This item was not discussed 	
7.2.3	Psychotherapy	<ul style="list-style-type: none"> • KL confirmed there were no issues to discuss 	
7.2.4	OAP	<ul style="list-style-type: none"> • DBr confirmed there were no items to discuss 	

7.2.5	ID	<ul style="list-style-type: none"> • QU stated that there were no items to discuss. 	
7.2.6	Forensic Psychiatry	<ul style="list-style-type: none"> • There was no rep available. 	
7.2.7	CAP	<ul style="list-style-type: none"> • GW stated that there were no items to discuss. 	
7.2.8	Dual Training	<ul style="list-style-type: none"> • SMcN confirmed there were issues to discuss. 	
7.3	SAS Report	<ul style="list-style-type: none"> • AM has been asked if there was a list of specialty leads (who organise higher teaching) could be made available for SAS doctors. SMcN suggested e-mailing TPDs for info. 	
7.4	Academic Report	<ul style="list-style-type: none"> • No rep was available. 	
7.5	Lay Member Report	<ul style="list-style-type: none"> • No rep was available. 	
7.6	BMA Report	<ul style="list-style-type: none"> • No rep was available. 	
7.7	AOB		
7.8	Simulation Programme	<p>NG gave the members the following update regarding Simulation Training including:</p> <ul style="list-style-type: none"> • Changes to Funding: NG stated that funding for simulation has been reduced and simulation projects will have to bid for funding. This will impact the following courses: <ul style="list-style-type: none"> • CT1 – Psychiatric Emergency Simulation • CT2 – Medical Emergency Simulation • CT3 – Mental Health Tribunal Simulation • Local Training: DB stated that some courses can be incorporated into local training. 	

8.	Date of Next Meeting	<ul style="list-style-type: none">• 22/09/2023 (10:45 – 12:45) via TEAMS• 01/12/2023 (10:45 – 12:45) via TEAMS	RBS to send out a revised date for September meeting
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