

Minutes of the Mental Health Specialty Training Board meeting held on 1st December 2023 at 10:45

Present: Seamus McNulty (SMcN) [Chair], Mithun Barik (MB), Daniel Bennett (DB), Alisa Bruce (AB), Stephen Byres (SB), Lisa Conway (LC), Adam Daly (AD), Andrew Donaldson (ADo), Pujit Gandhi (PGa), Partha Gangopadhyay (PG), Rekha Hegde (RH), Greg Jones (GJ), Ihsan Kader (IK), Katy Lewis (KL), Stephen Lally (SL), Claire Langridge (CL), Ewan Mahony (EM), Dianne Morrison (DM), Jane Morris (JM), Dianne Morrison (DM), Norman Nuttall (NN), Chris Sheridan (CS), Gordon Wilkinson (GW) & Sam Wilson (SW)

Apologies: Julie Arthur (JA), Natalie Bain (NB), Deborah Brown (DBr), Hollie Craig (HC), Jonathan Cavanagh (JC), Alastair Campbell (AC), Euan Easton (EE), Ian Fergie (IF), Linda Findlay (LF), Tom Fardon (TF), Neera Gajree (NG), Nitin Gambhir (NG), Rosemary Gordon (RG), Vicky Hayter (VH), Nick Hughes (NH), Ian Hunter (IH), Michael Jamieson (MJ), Edward Kelly (EK), Emma Lewington (EL), Ashling Mooney (AM), Jen Mackenzie (JMck), Nina MacKenzie (NMck), Scott McGlynn (SMcG), Christopher Pell (CP), Dee Rasalam (DR), Susan Richardson (SR), John Russell (JR), Ganesan Rajagopal (GR), Neelom Sharma (NS), Priti Singh (PS), Laura Sutherland (LS), Colin Tilley (CT), Michael Turner (MT), & Quadrat Ullah (QU)

In attendance: Rachel Brand-Smith (RBS)

Item No	Item	Comment	Action
1.	Welcome & Apologies	<p>The chair welcomed the following new members:</p> <ul style="list-style-type: none"> • Dr Alisa Bruce (CT3 Trainee Representative) • Dr Ewan Mahony (CT3 Trainee Representative) • Dr Andrew Donaldson (Consultant Psychiatrist, NHS Lanarkshire) • Mr Stephen Lally (Deputy Manager, Medical) 	
2.	Minutes of meeting held on 05/10/2023	<p>The following corrections were requested:</p> <ul style="list-style-type: none"> • Item 5.1.3 - Posts with an Academic Component: Change to ‘RH suggested that consultant job plans should have adequate support in terms of SPA time and sessional payments. This will support research as part of a clinical post. AD stated that there were considerable Service issues related to this.’ 	RBS to change the meeting notes of 05/10/2023.

3.	Matters Arising		
3.1	Royal College of Psychiatrists in Scotland - State of the Nation paper	<p>IK gave the members a summary of the Royal College of Psychiatrists State of the Nation paper. Various issues were discussed including:</p> <ul style="list-style-type: none"> • Foundation Doctors & Psychiatry Exposure: GJ confirmed that he has spoken to Duncan Henderson (Chair, Foundation Programme STB) regarding provision of psychiatry exposure for Foundation doctors. SMcN noted that this was a concern as Foundation programme is due to expand. GJ stated that new methods of providing exposure were required such as shorter training blocks, time in community psychiatry settings etc. RH suggested a SWLG to discuss methods. IK suggested meeting with KH, GJ and Royal College etc. to discuss approach. • RCoP and Exam Dates: SMcN stated that despite strong opinions on this issue it will be the Royal College who make the final decision regarding exam dates. • Expansion of Psychiatry Posts: SMcN confirmed that there will be 16 expansion posts next year. Two posts will be allocated to the CAMHS Run-Through programme, and two posts will be allocated to the ID Run-Through programme. The remaining posts will be weighted to the East and North regions. • Clinical Development Fellow Role: SMcN noted that the title Clinical Development Fellow should be used instead of the title FY3. 	<p>IK to contact GJ and RH and arrange meeting to discuss Foundation Programme Trainee psychiatry exposure.</p>
3.4	National PGMET Progression & Proforma & Outcome 3 issues	<p>Various issues relating to the PGMET data were discussed including:</p> <ul style="list-style-type: none"> • Quality Workstream Enquiry: SMcN stated that the Quality Workstream have asked for information related to the allocation of Outcome 2s and 3s by the Psychiatry programme. 	

		<ul style="list-style-type: none"> • STB Response: DB, PS and SB stated that Outcome 3s are often used in a supportive manner. AB noted that some trainees are awarded Outcome 2s and 3s due to delays in achieving Psychotherapy competencies. 	
3.5	FY2 Taster Days in Psychiatry Research	<ul style="list-style-type: none"> • SMCN stated that there has been no consultation or scoping exercise regarding this suggestion. JM suggested discussing issues with Danny Smith. SMCN noted that a decision is required by 15/12/2023. GJ highlighted that all research related activities must be based within Scotland. DB suggested this issue be raised with UK Council so that STB is properly engaged with process. 	JM to discuss FY2 Taster Days in Psychiatry research with Danny Smith
3.6	Increase in Core Psychiatry NTN	<p>SMcN gave the members an update regarding Expansion posts including:</p> <ul style="list-style-type: none"> • Allocation of Core Psychiatry Posts: SMCN confirmed that programme will receive an additional 16 expansion posts. The following have been suggested for allocation: <ul style="list-style-type: none"> • Two posts for run-through ID: one to West, one to SE, based on population need, hard to fill specialty. • Two posts for CAP run through: one to SE, one to North, based on population need, hard to fill specialty. • Of the remaining 12 Core Psychiatry posts, the suggested allocation was as follows: <ul style="list-style-type: none"> • Two posts to Inverness: Based on population need, DGH focus, hard to fill specialty with large numbers of Consultant Vacancies • One post to Elgin: Based on population need, DGH focus, hard to fill specialty with large numbers of Consultant Vacancies 	

		<ul style="list-style-type: none"> • Two posts to Grampian: Based on population need hard to fill specialty with large numbers of Consultant Vacancies • One post to Murray Royal, Tayside Based on population need DGH focus, hard to fill specialty with large numbers of Consultant Vacancies • One post to Kingsway Care Centre, Tayside: Based on population need DGH focus, hard to fill specialty with large numbers of Consultant Vacancies • One post to Carseview, Tayside Based on population need hard to fill specialty with large numbers of Consultant Vacancies • One post to Stracathro, Tayside Based on population need, DGH focus, hard to fill specialty with large numbers of Consultant Vacancies • One post to NHS Borders Based on population need, DGH focus, hard to fill specialty with large numbers of Consultant Vacancies • One post to NHS Forth Valley Based on population need, DGH focus, hard to fill specialty with large numbers of Consultant Vacancies • One post to NHS GG&C, Dykebar Hospital Based on population need, hard to fill specialty with high numbers of consultant vacancies, fragile rota • Issues related to Scottish Borders Hospital: PGa raised concerns regarding trainer availability at Scottish Borders Hospital. PGa noted that there are issues related to requirement for trainers to be on the specialist register, 	
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		<p>being substantively employed and having ROT status. SB noted that the Royal College have relaxed requirements related to the specialty register.</p> <ul style="list-style-type: none"> • Confirmation of Post at Scottish Borders Hospital: SMcN stated that a decision is required by 19/12/2023 for remaining posts. If trainees cannot be accommodated, then post can be transferred to Stracathro Hospital. NN suggested discussing issue with PGa offline. • CAMHS Run-Through Programme: GW confirmed that one CAMHS post will be located in South-East region, and one will be located in North Region. 	<p>PGa to discuss Trainer availability at Scottish Borders Hospital with NN</p>
3.7	Increase in Higher Training NTN	<p>Various issues related to additional NTN numbers were discussed including:</p> <ul style="list-style-type: none"> • Fill Rate Requirements: SMcN confirmed that additional NTN numbers will not be offered for Psychiatry ST5 and ST6 posts unless there is 100% fill at ST3 and ST4 in all sub-specialties. • Fill Rates 2024: SMcN confirmed that that Psychiatry will have a 100% fill rate in Core Psychiatry by February or August next year however Psychiatry will not have a 100% fill rate in other sub-specialties. SMcN suggested that an expansion request could still be sent to Scottish Government based on successful Core programme numbers. • Fill Rate Requirement and other Programmes: DB asked if the same rule was being applied to other programmes. GJ confirmed similar discussions are ongoing in other specialties. 	
3.8	Core Psychiatry in West Region: new TPD	<ul style="list-style-type: none"> • SMcN confirmed that TPDs numbers in the West Region had been increased to three and Dr Martin Carlin will be the new Core Psychiatry TPD covering NHS Dumfries & Galloway, NHS Lanarkshire, and Gartnavel Hospital. 	

4.	Action Points from 05/102/2023		
4.1	Minutes of meeting held on 02/06/2023	<ul style="list-style-type: none"> SMcN confirmed that this had been actioned. 	
4.2	National Resource - Psychogenic Polydipsia	<ul style="list-style-type: none"> See Item 6. 	
4.3	Recruitment Report - 2024 Interviews	<ul style="list-style-type: none"> See Item 7.8 	
4.4	Recruitment Report - Provision of Academic Research for Trainees - Lack of Access to Academic Research	<ul style="list-style-type: none"> JM confirmed that she has been discussing issues with Danny Smith however no firm decisions have been agreed yet. 	
4.5	Recruitment Report - Provision of Academic Research for Trainees - Psychiatry Research Network	<ul style="list-style-type: none"> GJ suggested that discussions include NES. JM suggested she contact GJ to arrange further meeting 	JM to contact GJ to arrange meeting to discuss Psychiatry Research Network
4.6	National PGMET Progression & Proforma - Outcome 3s & EQ&I	<ul style="list-style-type: none"> See Item 3.4 	
4.6	National PGMET Progression & Proforma - Outcome 3s & EQ&I	<ul style="list-style-type: none"> See Item 3.4 	
5.	Access to Higher Training	AB and EM gave a presentation regarding trainee's access to higher training. The following issues were discussed:	

		<ul style="list-style-type: none"> • South-East Region Response: SMcN suggested results could be influenced by rates of trainee discontent in the South-East Region. AB stated that other areas were well represented in the survey. • West Region Response: SMcN suggested that results could be skewed by trainees in the West being less dissatisfied than those in other regions. AB stated that there wasn't a significant difference in responses from the West region. GJ suggested that ascertainment bias might account for increased responses indicating trainee discontent in East Region. • Low Trainee Response rate from West Region: AB noted that research team were mainly Core Psychiatry trainees from the South-East region which may have influenced the number of responses from this area. • Unfilled Posts in General Adult Psychiatry: AB noted that the most popular posts sought by trainees are in General Adult psychiatry however all vacancies in Scotland are in this sub-specialty. AB suggested further investigation is required on why trainees are not applying for these posts. • Trainees moving to England: SMcN asked why trainees were suggesting they would move to England if they were not able to obtain a training number in their chosen geographic area in Scotland. AB and EM stated that this requires additional investigation. • Reasons for not applying for a post: GJ asked whether there had been any attempt to identify the difference between trainees not wanting to apply for a job because it is not in their area or not being appointed to a job because they were not suitable. AB confirmed that trainees are not applying for jobs because there are no posts in their geographic area. • Map of Regions: SW questioned regions use on map. EM confirmed that the map had been taken from NES resources. 	
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		<ul style="list-style-type: none"> • Recommendation 4: SW asked what evidence was used to inform the suggestion that a restriction of posts in areas with higher fill rates was unlikely to encourage trainees to apply for posts in areas with lower fill rates. AB confirmed recommendation was based on trainees stating they would move to England if they did not get a training number in their chosen geographic area. • Trainee Destinations: SW asked if the survey could provide information related to where trainees would go after CCT-ing. AB stated that this was not part of the survey. SB noted the survey only looked at the lower to higher training transition stages. • Dual Training: RH asked why trainees are requesting dual training. JM suggested that those who develop ST posts should be asked to create flexible posts with a dual element or credentialing opportunities. SMcN stated that open ended dual posts are not sustainable. 	
6.	National Resource - Psychogenic Polydipsia	<ul style="list-style-type: none"> • SMcN stated that he has been approached by Gillian Davies (Principal Educator, NMAP) who has asked for support in developing teaching materials related to Psychogenic Polydipsia. JM stated that she would like to contribute to this. SMcN stated he would contact Gillian Davies on JM's behalf. 	SMcN to contact Gillian Davies on behalf of JM regarding development of teaching materials on Psychogenic Polydipsia
7.	Standard Items of Business		
7.1	Deanery Issues		
7.2	Quality	<ul style="list-style-type: none"> • SMcN confirmed that Inverclyde Hospital has been removed from Enhanced Monitoring and congratulated the Quality Team on the work that has been done to achieve this. 	

7.3	Simulation Training	<ul style="list-style-type: none"> This item was not discussed. 	
7.4	Training Management	<ul style="list-style-type: none"> SMcN confirmed there were no items to discuss. 	
7.5	Professional Development	<ul style="list-style-type: none"> DB confirmed there were no issues to discuss 	
7.6	MDST	<ul style="list-style-type: none"> GJ confirmed there were no issues to discuss 	
7.7	Equality, Diversity & Inclusivity	<p>RH gave the members the following update regarding Equality, Diversity and inclusivity including:</p> <ul style="list-style-type: none"> General Update: RH confirmed that a meeting will be held with Psychiatry STEP Group in preparation for the February intake and work on neurodiversity materials is ongoing. Merger with GP STEP: RH stated that it has been suggested that Psychiatry STEP could merge with GP STEP. RH stated that this was possible for the February intake however the group would remain separate. 	
7.8	Recruitment Reports	<ul style="list-style-type: none"> SL stated that the UK lead recruiter has concluded their offers and Paper 10 contains the final numbers for Round 3. 	
8.	Reports – General		
8.1	Service (MD) Report	<ul style="list-style-type: none"> No representative was available. 	
8.2	DME Report	<ul style="list-style-type: none"> AD stated that there were no items for discussion. 	
8.3	Royal College Report	<ul style="list-style-type: none"> JM thanked IK for development of the Workforce Action Tracker. JM stated that she would update members on progress at the next meeting. 	

8.4	Heads of Schools Report	<ul style="list-style-type: none"> SMcN confirmed that he attended Heads of Schools meeting in London. SMcN informed the members that EMIS is now the chosen ePortfolio provider. AB confirmed that this has not been discussed by the PTC group yet. 	
9.	Specialty & STC Reports		
9.1	GAP	<ul style="list-style-type: none"> SW and LC confirmed there were no issues to discuss. 	
9.2	CPT	<ul style="list-style-type: none"> This item was not discussed. 	
9.3	Psychotherapy	<ul style="list-style-type: none"> KL stated that there were issues with trainees achieving minor modalities and noted that there were specific issues regarding the South-East and West regions. KL identified Systemic and CBT training as problem areas. GJ confirmed that DB would be investigating this. 	
9.4	OAP	<ul style="list-style-type: none"> RH confirmed that issues relating to recruitment in East Region will be discussed with DB. 	
9.5	ID	<ul style="list-style-type: none"> A representative for ID was not available. 	
9.6	Forensics Psychiatry	<ul style="list-style-type: none"> PG confirmed there were no issues to discuss. 	
9.7	CAP	<ul style="list-style-type: none"> GW confirmed that CAP post has been filled and there were no other issues to discuss. 	
9.8	Dual Training	<ul style="list-style-type: none"> DB confirmed that there will be a dual Old Age post created in the North region for August 2024 	
10.	SAS Report	<ul style="list-style-type: none"> MB stated that there have been requests from SAS doctors to access higher Psychiatric training. MB stated that a survey will be carried to assess demand he will submit results to the STB when available. 	

11.	Academic Report	<ul style="list-style-type: none"> An academic representative was not available 	
12.	Lay Member Report	<ul style="list-style-type: none"> The lay representative was not available 	
13.	BMA Report	<ul style="list-style-type: none"> CS confirmed that there were no issues to discuss. 	
14.	AOB		
14.1	Trainee Resignation Guidelines	<ul style="list-style-type: none"> SMcN stated that NES has developed a protocol to identify reasons for trainee resignations. SMcN asked for members to e-mail him with comments. DB stated that clarity is required on how data will be used. 	
14.3	Higher Trainees OOPR	<ul style="list-style-type: none"> LC outlined that a process is required for trainees who are applying for Out of Programme for research purposes. GJ suggested this process could be used for other workstreams. 	RBS to circulate trainee OOPR process to members
14.2	Date of Next meeting	<ul style="list-style-type: none"> SMcN noted that the February 2024 should be re-scheduled. RBS to change meeting date. 	RBS to change February 2024 meeting date
15.	Date of Next Meeting	<p>Date of meetings in 2024:</p> <ul style="list-style-type: none"> 23/02/2024 (10:45 – 13:00) 07/06/2024 (10:45 – 13:00) 04/10/2024 (10:45 – 13:00) 06/12/2024 (10:45 – 13:00) 	