



The College of Psychiatry of Ireland
Coláiste Síciatrachta na hÉireann

Consultation Process with Members & College Development Day 2011

A Report

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Summary

A Consultation process and review of the current activities/functions of the College of Psychiatry of Ireland began in June 2011. Members (circa 750 informed, 16% response rate) were asked to fill out an online-survey providing feedback on how well the College was functioning, what they saw as the Core purpose of the College and the issues to focus on over the next two years. A College Development Day also took place in September 2011 with Faculty chairs and the College Executive committee members to brainstorm (including a briefing on results of the survey) and develop a list of priority functions.

The following is a summary of some of the recommendations as a result of the two processes.

Increase & encourage Member involvement

Highlight involvement in College activities as highly beneficial, both in ensuring members remain informed and also in combating the negative features of working in an extremely fulfilling but demanding job. For trainees it is an excellent opportunity to gain training in Health Service Policy and management. Benefits to members should be further & continuously highlighted particularly in relation to the value to current practice and professional development.

The involvement of faculties should be enhanced. The functions and responsibilities of all College groups need to be clearly defined including development of frameworks for each group to provide clear business & action plans with timeframes & budget allocation (where appropriate). Induction training for new chairs, vice chairs and College officers at the beginning of their term needs to be introduced. Regional activity needs to be put in place by holding College meetings outside Dublin by videoconferencing; by faculties & committees providing support for CPD regional meetings.

Strategic Planning & Business Plans

All Faculties will be encouraged to prepare a business plan to be approved and reviewed periodically by the Faculty and Council. The plan should outline any possible budget requirements. These can then be incorporated into the overall College business plans & financial projections.

Postgraduate Training

It was recognised that recruitment into the specialty is difficult therefore the College should promote the quality of training and career paths that are currently available. Self-governance of the training scheme is important. It is crucial that the governance of the accreditation of schemes is robust and can stand up to scrutiny. All Educational Supervisors and Tutors should be members of the College - this gives a College imprimatur to the trainer and also allows the trainer to keep up to date with College training news; engage with University Departments to enhance training in research; develop more prizes and bursaries to engage trainees.

Public Education about psychiatry

Educate the public about psychiatry in a number of ways including running events and projects under an annual theme (E.g. the homeless for 2012); a campaign to 'promote' the profession highlighting the value of doctors in treating mental illness; break down barriers by maintaining and increasing liaison with other organisations in the mental health arena; develop a mini 'psych' school; use positive patient experiences as good news stories; explore media projects.

Introduction

In June 2011, a Consultation process and review of the College of Psychiatry of Ireland was commenced. This is the report from that review.

The Consultation process included an online-survey of all 750 members of the College, this survey asked for members' feedback on how well the College was functioning, what members saw as the Core purpose of the College, and which issues members wished to focus on over the next two years. Alongside this, feedback was obtained, through questionnaires, email and discussions with chairs of college committees, academic psychiatrists and psychiatrists in management. Finally, a College Development Day was held on 16th September 2011. This day was attended by representatives from all the Faculties, representatives from psychiatrists in management, representatives from academics in psychiatry, and members of the executive and staff of the College.

Background

1. The College of Psychiatry of Ireland was formed in 2009; it was an amalgamation of three Irish bodies, the Irish College of Psychiatrists, the Irish Psychiatric Training Committee and the Irish Psychiatric Association. The name reflects the work of the three organisations, and when formed it was emphasized that the aim of the College is to address not only relevant Irish issues for its members but issues for psychiatry in general, for mental health services and ultimately for services users in Ireland. The hope was to learn from other organisations both in Ireland and abroad with the broader aim of promoting good mental health and mental ill health practice for all those involved in the mental health services both service users and care professionals alike. The College constitution states that the main objects for which the College is constituted are the advancement of education in Psychiatry through the following:

- a) The formation and training of doctors in psychiatry;
- b) The continuation of the professional development, education and well-being of trained psychiatrists;
- c) The promotion, development and furtherance the College's engagement and collaboration with others concerned in the development of best practice in mental health services for the purpose of alleviating the suffering of persons with mental illness.

The constitution allowed for the setting up of three Pillars, in order to achieve these aims. These are the Postgraduate Training Pillar, the Continuing Professional Development Pillar and the External Affairs and Policy Pillar. The Constitution also recommended the College should have a Council, an Advisory Board, Specialist Faculties and Functional Professional Development and Support Groups. The Council shall be the Executive body composed of elected members and those otherwise validly appointed to the Council by the bye -laws. The Council shall have a President, Vice-President and Treasurer. The CEO and Directors of Pillars shall report to Council and attend its meetings. The Advisory Board shall be appointed by Council and must meet with Council at least twice a year to

advise Council on how to progress the aims of the College and its members. Appointees to the Advisory Board will be suitable persons of high standing as decided by Council. Specialist Faculties will so organise itself so as to constitute a democratically functioning body of specialist members addressing by its actions the objectives of its specialist members through and to the pillars of the College. Faculties will be represented on the Council in agreement with the bye-laws. The Functional Professional Development and Support Groups were to be regional (or otherwise functional) groupings of members which can facilitate the objectives of the Postgraduate Training pillar.

Current Situation

Since 2009, all three pillars and the Specialist Faculties have been active. The College Advisory Board has met on two occasions, and at present its function is under review. The Regional Development and Support Groups have not been introduced. Council is made up of the CEO, the President, Vice President, Treasurer, Directors of the Pillars, Chairs and vice chairs of the large Faculties, and Chairs of the small faculties, representative of ECD group, representative of ECD group, representative of Academic Psychiatry, and regional representatives.

The Continuing Professional Development Pillar, has been renamed the Professional Competence Pillar. This Pillar has introduced the Professional Competence Scheme for the College. This scheme has been highly praised by the Medical Council, and it is identified by the medical council as being one of the best Professional Competence Schemes among the postgraduate professional bodies in Ireland.

The Postgraduate Training Pillar has continued the work of the Irish Psychiatric Training Committee, and has now introduced a blueprint for Basic Specialist Training. This provides a curriculum for Basic Training, along with an operational manual for trainers and trainees. This comprehensive document has been praised by both the HSE and the Medical Council. The postgraduate training pillar has also introduced e-learning, accreditation of training schemes, and a registration assessment for inclusion of Psychiatrists on the Specialist register. This Pillar includes the Trainee Committee, which is currently one of the most active committees in the College; this committee has taken an active role in informing trainees regionally of the work of the College, and has addressed the issue of recruitment in psychiatry.

The External Affairs and Policy Committee has increased the media presence for psychiatry, has developed the College website and the e-bulletin, and has established links with other key players in mental health services, including government, HSE, ICGP and service users.

The specialist faculties have all worked very effectively, with a number of position papers being prepared on a number of topics. At present the Faculties report directly to Council, and not through the three Pillars.

Fig. 1 shows the Structure of the College at present.

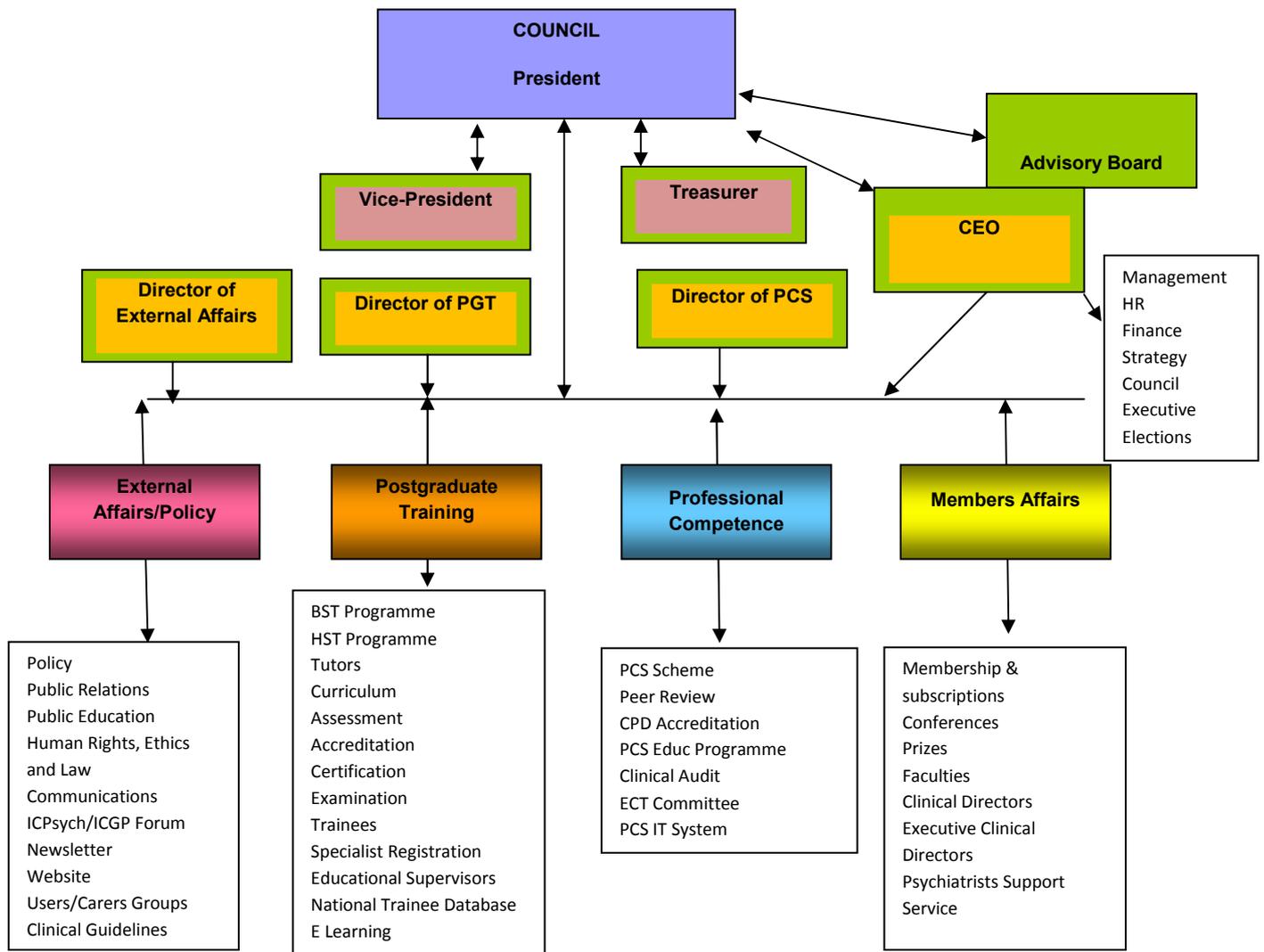


Figure 1 Organisational Structure of the College of Psychiatry of Ireland

Results of the Consultation

16% of members responded to the online survey. The survey included questions requiring both narrative responses, and tick box responses on a Likert scale. The first two questions required narrative responses, and these were placed before the tick box responses, in order to avoid responses being influenced. There are a number of possible reasons for the low response rate, members not having time to complete the survey, members feeling overburdened with emails, and the difficulty in starting a questionnaire, where the first question required a narrative response. Despite the low response rate, 125 people provided extremely informative responses which have been used to inform the College Development Day. The full results of the members' survey is included in Appendix 1.

Core Purposes of the College

100% of those consulted saw Training and Education as the core purpose of the College. While other core purposes were mentioned by over 80% of respondents, a number of members believe the College should only focus on training. Training should be for Psychiatrists in training, but also for qualified psychiatrists, and for other health and mental health practitioners. The College should be involved in educating the general public, and also educate and influence the Government and the HSE. Training should be scientific and evidence based, and the College and its members should ensure training and services should be of the highest standard, and should use a human rights framework.

Professional competence and professional support was seen as important by most respondents. The college needs to improve links with other medical professional bodies, in particular endocrinologists, neurologists and G.P.s. Most consulted believed the College should lobby the Government for better services, and should ensure that both the government and the HSE identified the College as the body to identify expert psychiatrists. Members wanted us to have a greater media presence in order to improve public awareness of the nature of psychiatric practice. Some respondents recommended that the college has a role in providing expert opinion where there might be a difference of opinion between members and administration in an area. Many mentioned the importance of identifying clinical guidelines for use in an Irish setting. The fact that there are already many international guidelines available was noted, and these can form the basis for the Irish Clinical programmes.

The College needs to involve all members in all parts of Ireland, some members believed it was too Dublin centric, and trainees expressed concerns that training outside the major centres was not as good. The College should have links with other Psychiatric bodies, in Europe and internationally. The Royal College of Psychiatrists has many excellent papers and procedures which the Irish College can emulate, but at the same time ensure the College is relevant to Ireland. Some members wanted the College to play more of a role in Research. For some there is a perception that the College could have more input from academics, the academics pointed out they are very much involved in training, particularly at the higher training level, and they would like to have more input into the development of the curriculum, but like all members their time is limited. The possibility of a special group, with administrative support from the College for Professors of Psychiatry might be a means to involve

academics more. Members identified the College as being the vehicle to ensure members were informed of legislative changes related to mental health, and also to ensure members had a forum to influence these changes.

Issues identified

The College is a unified Irish body for psychiatry, with 750 members. Our members have experience, expertise, and have completed research. Despite this members' sense of ownership of the College is poor. Despite a regular e-bulletin and an informative website, many members do not feel adequately informed, or consulted by the College. The College has failed to develop regional groups. A number of Faculty Executives are functioning extremely well, managing to involve members regionally and also making use of expert research. These include the Liaison Faculty, the Addictions Faculty and the Forensic Faculty. While other faculty executives have successfully produced very useful documents, they have not been as successful in ensuring all members of the Faculty are engaged. Suggestions have been made that video conferencing and regional meetings would improve member involvement. Ensuring all members informed the College executive of research they have completed would ensure there is a record of members' specific expertise. Members have praised the twice yearly conferences as being both informative and providing collegiate support. The staff and officers of the college are professional, committed and competent. The fact that most officers, members of the Faculty executive and College tutors do not have protected time to complete College work is seen as quite a disadvantage. There remains a difficulty in recruiting members to officer and tutor posts. The diminishing resources for mental health services and the recruitment difficulties for NCHDs are likely to increase this difficulty. The need to ensure high standards in both training and services has been repeated by many. There is a need to ensure the College remains independent of the HSE, and any Clinical guidelines or programmes that the College endorses need to emphasise the need for the highest standards. There is a perception that the College is not representative of all members, and there is a need to ensure all members have an equal right to sit on committees.

At present the greatest proportion of work in the College is concerned with **training and education**. The Blueprint for Basic Specialist Training identifies the curriculum, and has incorporated practices to ensure trainees and trainers fulfil the requirements identified. This is a considerable time commitment, and many trainees, and the trainee committee has identified the fact that training is not standardised throughout the country. Many trainees are not receiving the one hour, face to face supervision as recommended in the Blueprint, and in the training for the RCPsych examination. There is a remit to ensure the exam of the College is recognised internationally, and that we have the resources required to hold the exam. A suggestion has been made that the College would consider taking over any exam or course run by other colleges, such as the Diploma of Clinical Psychiatry. This is currently run by the psychiatrists but through the College of Physicians. The use of video for training courses has also been suggested.

The **Professional Competence Scheme** has been effectively set up by the college. It is the responsibility of the individual doctors to ensure they meet the requirements under the scheme. The college continues to develop training courses, and there is a need to develop more training opportunities for members. While the twice yearly conferences have been praised, there is a need for smaller regional activities, and links between the three pillars can facilitate this.

The image of Psychiatry continues to be poor. The External Affairs and Policy pillar is in the process of setting up a Service User and Family member of User Forum, and has also increased contacts with other groups within the mental health area. There is a difficulty in portraying complex ideas on the media, and professional ethics mean individual cases cannot be discussed. There is a need for a public awareness campaign on the nature and effect of Psychiatry and its practice.

Many academics in Psychiatry have expressed an interest in having a college group for professors of Psychiatry and senior lecturers. This group would need administrative support and would be available to work through and to the Pillars.

College Development Day

This day was attended by College administrative staff; The Executive, which includes, the President, the CEO, the Vice President, Treasurer, and Directors of the Pillars; Chairs of each Faculty and heads of special interest groups, which included Academics, ECD,s and CDs.

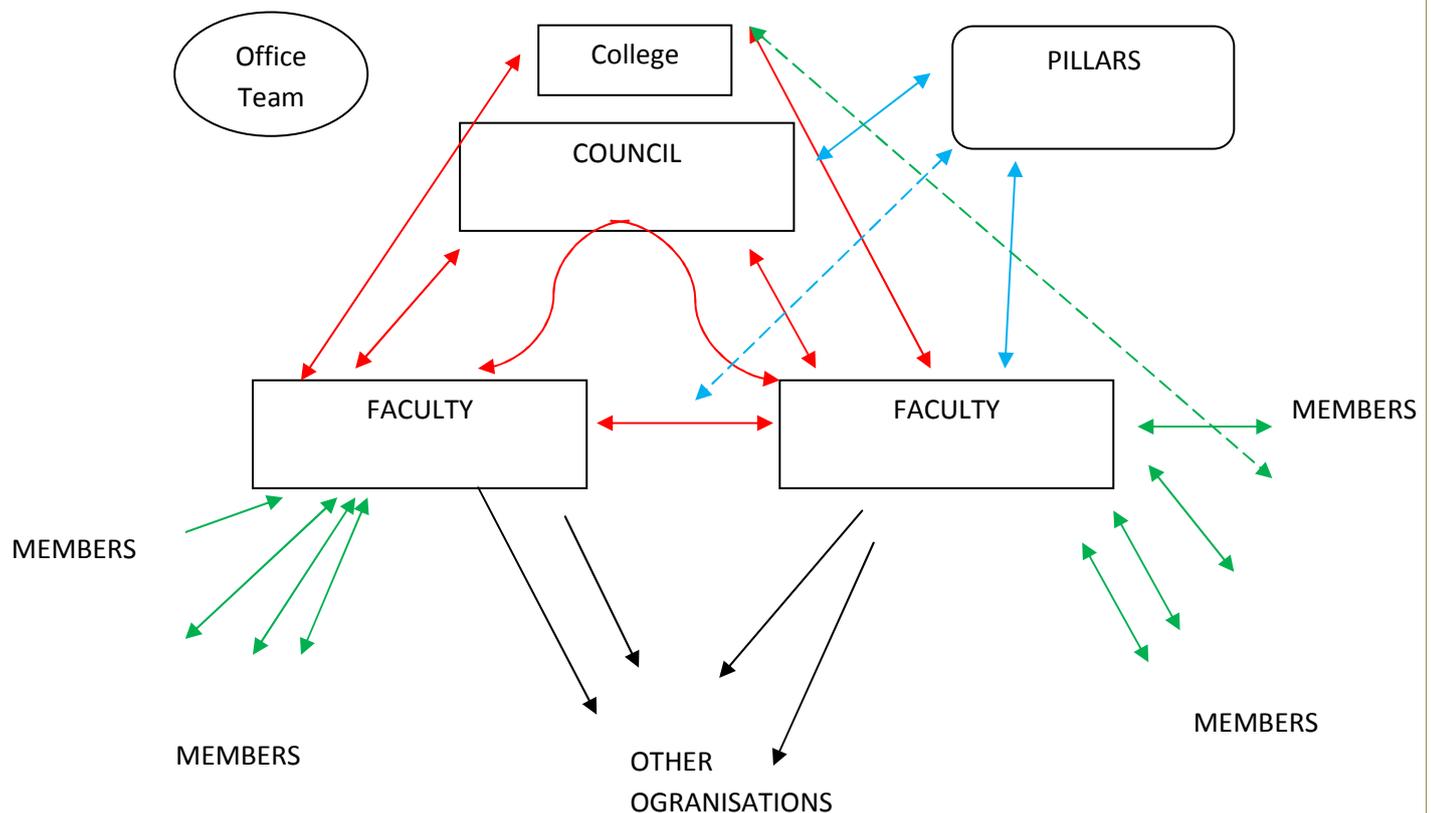
Session 1

A presentation on the members' survey was given and discussed and the group then looked at four areas in detail. These are outlined below.

1. How can the voice of the Faculties be heard at Council and Pillar level at the College and how can inter-communication between Faculties be enhanced?

The faculties are independent of the Council, and as members of the council can provide direction to the College. The faculties should be able to link with all members and provide feedback into the College. Faculties need to link with each other, and outside agencies. Induction for new Chairs and vice chairs will support the Faculties. There is a need to define the role and function of the faculties. Each faculty should prepare a strategic plan. Council could provide a framework for this. There should be more of an emphasis on the role of the Faculties into the Council and the faculties involve the members.

A suggested format would include the following:



2. How can the relationship between the College and the regions be enhanced?

Should provide one map for all functions, CPD, training and external affairs. It is in the constitution that there should be regional developments; this should be included in bye laws. How do we define a region, and since training is so important can the universities be the hub of the regions, or should we use the four HSE regions. The College needs to ensure the principle of equal opportunities for training countrywide. Funding to support the regional structure needs to be identified and made available. College business could be discussed at CPD meetings, with four to six regional meetings a year. There could be a regional representative, who would organise the regional groups, to include all faculties, CPD representative, PTC representatives and trainee representative.

3. Is the College relevant? Can we be more so?

The College is relevant to all psychiatrists in that it is the main body supporting professional development and post graduate training. The general adult group is such a large group geographic rotation of the meetings would help make the college more relevant. Ensuring all communication is brief, will help members remain informed, all members are busy and have an influx of emails and correspondence. Regional one day conferences would help improve regional involvement.

The College has a role in ensuring our services remain patient centred. Both the College and members have a role in advocacy for those with mental illness. The College needs to set standards for care and practice and these should be the highest standards. The website ensures there is reliable information available for the general public. The service user forum will ensure the College and members are well informed by the experiences of those who use the services.

The College has a role in ensuring the Public are informed on the role of Psychiatry within the mental health services. This will help to reduce stigma. The College has a role in the media to ensure a balanced view of Irish psychiatry is presented. The College also has a role in lobbying Government in order to ensure mental health services are developed.

Overall it was felt the best means of improving relevancy for members is to enhance the role of the Faculties, ensure faculty representation is regional and more activities of the college are regional.

4. How can the College further develop and drive higher standards within psychiatry?

The more we can improve member participation in College activities, the greater opportunity to influence practice. This can be done by developing the regions, and finding some means to reward activity within College.

Quality services will come about if we can ensure training and professional development is of a high standard. More involvement of Academic expertise in training courses needed. Development of an MSc

in Psychiatry may be an option, and finding means to use the training grant to complete Masters courses. Specific skills courses for Consultant in running quality services would be of value. There is a need for greater intellectual rigour in mental health services. The BST blueprint is excellent, however it will only affect services if there is availability of supervision, a training grant, time for the trainers to train, and all this is adequately policed. Ensure the accreditation of training has teeth, in that many schemes are identified as having mandatory requirements prior to approval, and yet these schemes appear to be given approval. The Clinical Directors need to recognise the importance of training, and allow for this in using manpower.

Training in Psychotherapy is key to developing high standards. This is needed in order to improve communication and to develop psychological models of care. Time for supervision and teaching is needed.

As a College we could develop better links with other medical Colleges. There is a need for greater psychological approach within medicine generally.

Standards would improve if there is a clear definition of the role of the Psychiatrist. The mental health services in many areas need to change and psychiatrists play a major role in this. There needs to be a public awareness of the work carried out by the Psychiatrist within the mental health team, and the need to ensure teams are fully resources with multidisciplinary professionals. Links with service users and carers are needed. Their input in informing training and service development is well recognised. The College is currently setting up a Service user and Family member of service user Forum.

Session 2

The entire group identified the main issues the College should focus on over the next year; these are shown in Appendix 2. From the many issues raised the following four were chosen in order to identify more specific actions required.

- **How can the College ensure members benefit from involvement in the college and how can members' involvement be increased?**
- **How can the College address business planning issues?**
- **How can the College develop training with greater focus on governance and sanctions?**
- **How can the College improve the image of psychiatry?**

➤ **How can the College ensure members benefit from involvement in the college and how can members' involvement be increased**

All present agreed that greater involvement in College activities, while requiring a time commitment, was highly beneficial, both in ensuring the member remained informed and current in practice, and also in combating the negative features of working in an extremely fulfilling but demanding job. For trainees it is an excellent opportunity to gain training in Health Service Policy and management.

Recommendations:

- Ensure all members are informed of the benefits of College activities to current practice and professional development - ensure employers are aware of this in order to facilitate members, including trainees, attending meetings.
- Review the allocation of CPD points for College activities.
- Include College activities in learning opportunities for trainees.

For Faculties, the dynamism is within the membership, but unless there are clearly defined roles this may not be realised. The work of the faculties can inform all three pillars, and improve the regional development of the college.

Recommendations:

- Ensure the functions and responsibilities for members of Council, faculties, and special interest groups are clearly defined.
- Ensure a framework in place for all Faculties and interests groups to develop a clear strategic plan, identifying what specific tasks will be completed, how they will be completed and a timeframe for these.
- Ensure a framework is in place for all Faculties & Special interest groups to write a business plan.
- Ensure all officers, chairs and vice chairs of Faculties and Special interest groups, receive an induction within two weeks of commencing in post.

Members' fees can be paid through the training grant for Consultants, but not for trainees. Ensuring that trainees are members of the College from the start of their career is important.

Recommendations:

- Inform all Consultants of use of grant.
- Consider reducing the fee for trainees to a minimum.

Members working outside of Dublin need to be facilitated.

Recommendations:

- Arrange some College meetings outside Dublin.
- Use videoconferencing.
- Faculties and special interest groups to provide support for regional meetings for CPD.

➤ **How can the College address Business planning issues?**

All Faculties will be encouraged to prepare a business plan (using a standard template provided) to be approved and reviewed periodically by the Faculty and Council. The plan should outline any possible budget required when necessary. These can then be incorporated into the overall College business plans & financial projections.

Recommendations:

- Determine the annual budget, incorporating long-term plans to be reviewed annually.
- Each Faculty to follow a template to plan their activity on an annual basis, requests for funding for specific projects to be included in this annual plan.
- Budget to be allocated to core and specific priorities
- Set up a business planning committee.
- All College activities should have a business plan attached before approval for expenditure is given.
- Long-term infrastructure such as IT and building to be planned for.

➤ **How can the College develop training with greater focus on governance and sanctions?**

It was agreed that recruitment into the specialty is difficult and that the College should 'sell' the career path and the quality of training that is available. Self-governance of the training scheme is important and it is crucial that the governance of the accreditation of schemes is robust and can stand up to scrutiny. If the Medical Council is not happy with the standard of training, the College may well lose its ability to deliver the training. The College now has a powerful sanction in that it can remove a trainee from a scheme/post if necessary.

Recommendations:

- All Educational Supervisors and Tutors must be members of the College - this gives a College imprimatur to the trainer and also allows the trainer to keep up to date with College training news.
- Develop an Irish Examination as soon as possible.
- Engage with University Departments to enhance training in research.
- Develop prizes and bursaries to engage trainees.

➤ How can the College improve the image of psychiatry?

It was agreed that the 'external' audience being the general public is the audience to address. A lot of people don't know what 'psychiatry' is, often confused with counselling or psychology. Raising standards of training and practice will improve the image.

Recommendations:

- Educate the public about psychiatry - start a two year marketing campaign to 'sell' the profession and to teach people about the value of doctors in treating mental illness.
- Have an annual theme. E.g. the homeless; alcohol; etc.
- Join forces with other organisations such as AWARE, Shine etc and break down barriers.
- Use positive patient experiences as good news stories. Exploit in a positive way to drive the development of services.
- Set up 'Film Nights', public lectures to encourage public interest.
- Explore a television programme like 'In the Psychiatrists Chair'.
- Have a mini 'psych' school.

Future Plans

In September 2011 Council reviewed the results of the consultation process. The following has been requested by Council.

1. The Executive committee will draw up recommendations for Council on reviewing the College structure, reviewing the role of Council, the role of the Faculties and improving regional involvement.
2. The Directors of each pillar and the Faculty executives will review how they can use the information from the Consultation process to improve activities of the college.

Appendix 1. Members' Online survey (surveymonkey.com)

Please note: The survey contained open comment questions which are summarised in the report and are available on request.

Q1. What do you think the core functions of the College are?

Answered question 110 skipped question 19

Q2. What do you think are the achievements of the College since it began in 2009?

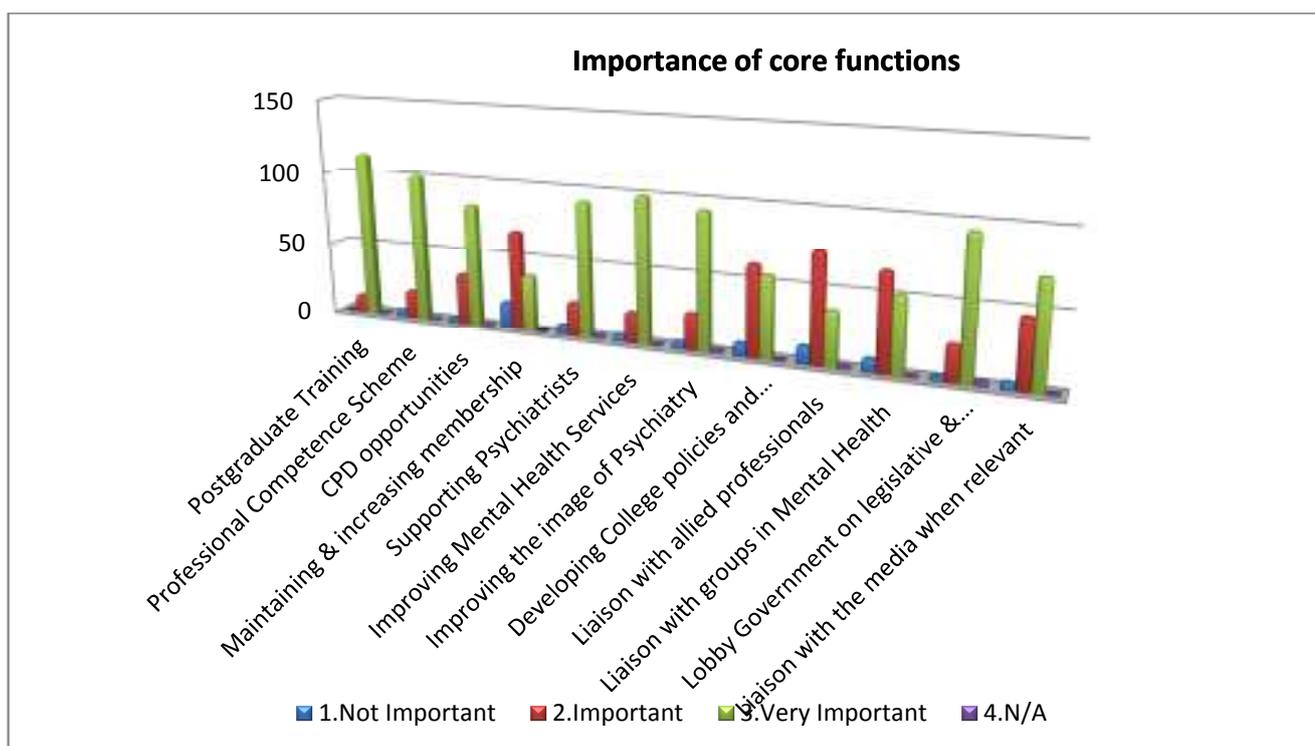
Answered question 111 skipped question 18

Q3. What areas would you like the College to focus on over the next two years?

Answered question 108 skipped question 21

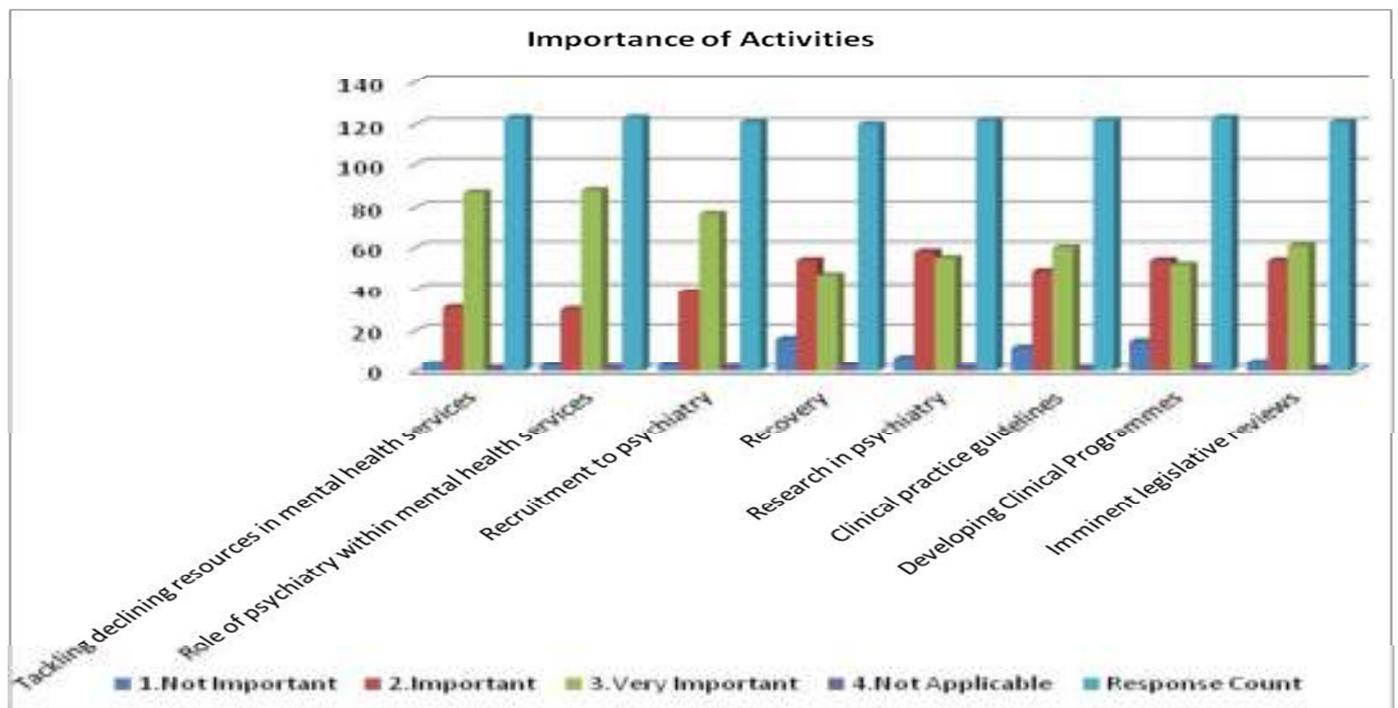
Q4. Rate the importance of these core functions of the College and suggest others not listed.

Answer Options	1. Not Important	2. Important	3. Very Important	4. N/A	Response Count
Postgraduate Training	0	12	114	1	127
Professional Competence Scheme	5	19	101	1	126
CPD opportunities	4	35	84	2	125
Maintaining & increasing membership	19	69	39	0	127
Supporting Psychiatrists	8	24	93	2	127
Improving Mental Health Services	5	22	100	1	128
Improving the image of Psychiatry	5	26	94	2	127
Developing College policies and position statements	9	62	56	1	128
Liaison with allied professionals	12	74	38	2	126
Liaison with groups in Mental Health	9	66	52	1	128
Lobby Government on legislative & mental health service issues	3	24	95	3	125
Liaison with the media when relevant	5	47	71	1	124
Comments					22
answered question					128
skipped question					1



Q5. Rate the importance of these activities for the College to focus on in the next 2 years.

Answer Options	1. Not Important	2. Important	3. Very Important	4. Not Applicable	Response Count
Tackling declining resources in mental health services	4	31	87	1	123
Role of psychiatry within mental health services	3	30	88	2	123
Recruitment to psychiatry	3	39	77	2	121
Recovery	16	54	47	3	120
Research in psychiatry	7	58	55	2	122
Clinical practice guidelines	12	49	60	1	122
Developing Clinical Programmes	15	54	52	2	123
Imminent legislative reviews	5	54	61	1	121
Comments					13
answered question					123
skipped question					6



Q6. How can the College involve members more in its activities?

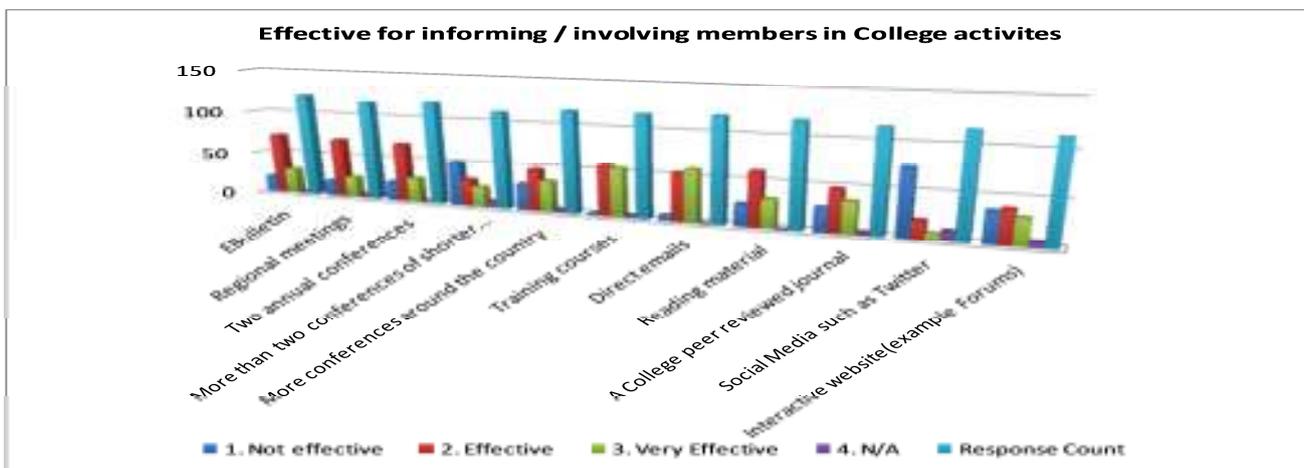
Answered question 85 skipped question 44

Q7. How can the College ensure members are adequately consulted?

Answered question 74 skipped question 55

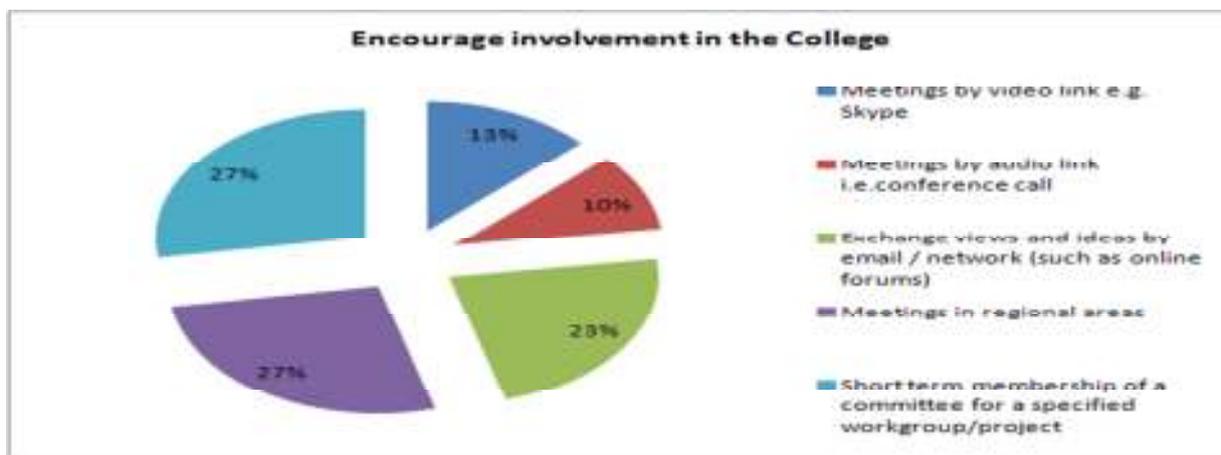
Q8. How effective are these items for informing / involving members in College activities?

Answer Options	1. Not effective	2. Effective	3. Very Effective	4. N/A	Response Count
EBulletin	19	72	29	1	121
Regional meetings	18	70	24	4	116
Two annual conferences	22	69	28	0	119
More than two conferences of shorter duration	51	31	23	7	112
More conferences around the country	30	48	35	4	117
Training courses	2	57	55	3	117
Direct emails	6	54	59	0	119
Reading material	25	61	32	0	118
A College peer reviewed journal	27	48	36	4	115
Social Media such as Twitter	75	21	8	12	116
Interactive website(example Forums)	36	39	31	7	113
Comments					21
answered question					121
skipped question					8



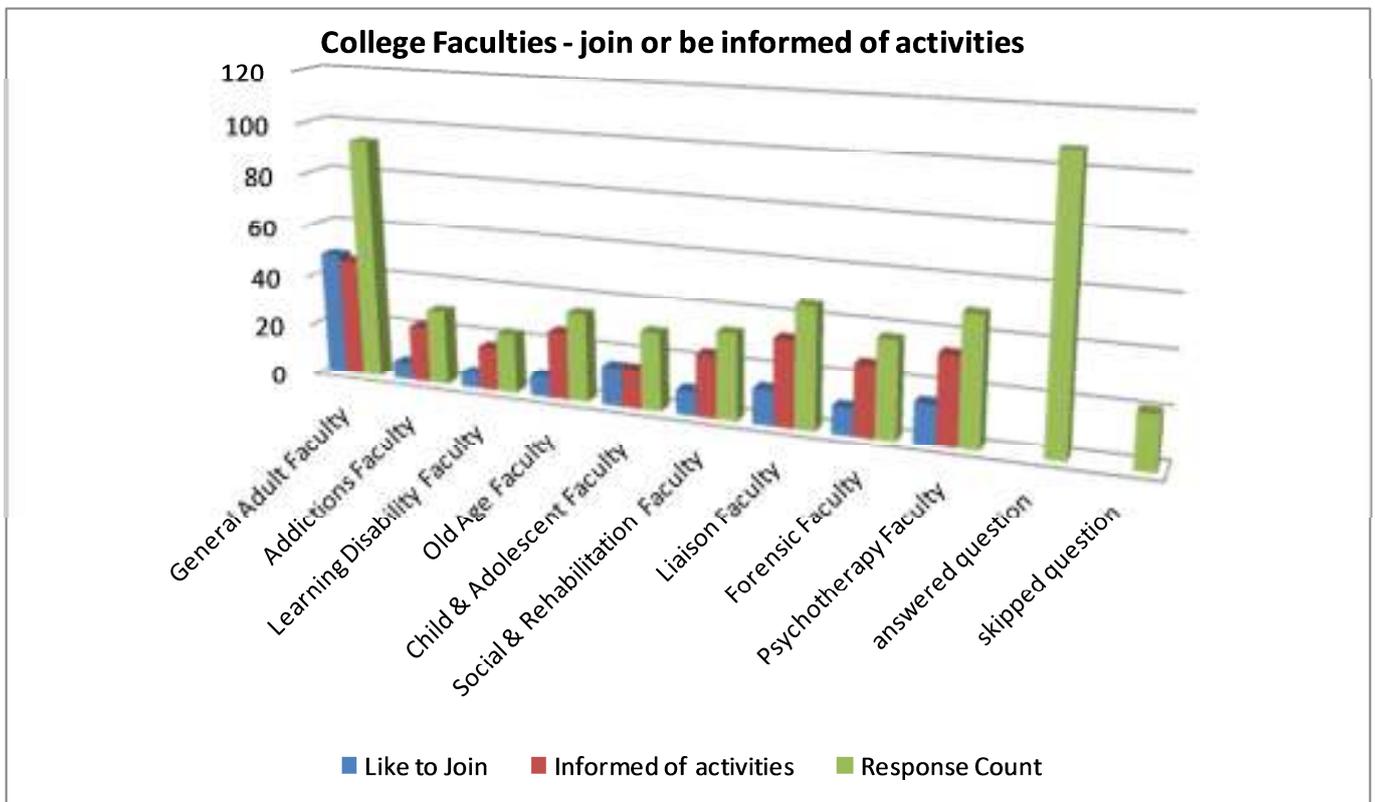
Q9. Which of the following would encourage you to become / stay involved in College Committees and Faculties?

Answer Options	Response Percent	Response Count
Meetings by video link e.g. Skype	34.20%	39
Meetings by audio link i.e.conference call	25.40%	29
Exchange views and ideas by email / network (such as online for	59.60%	68
Meetings in regional areas	70.20%	80
Short term membership of a committee for a specified workgrou	71.90%	82
Comments		10
answered question		114
skipped question		15



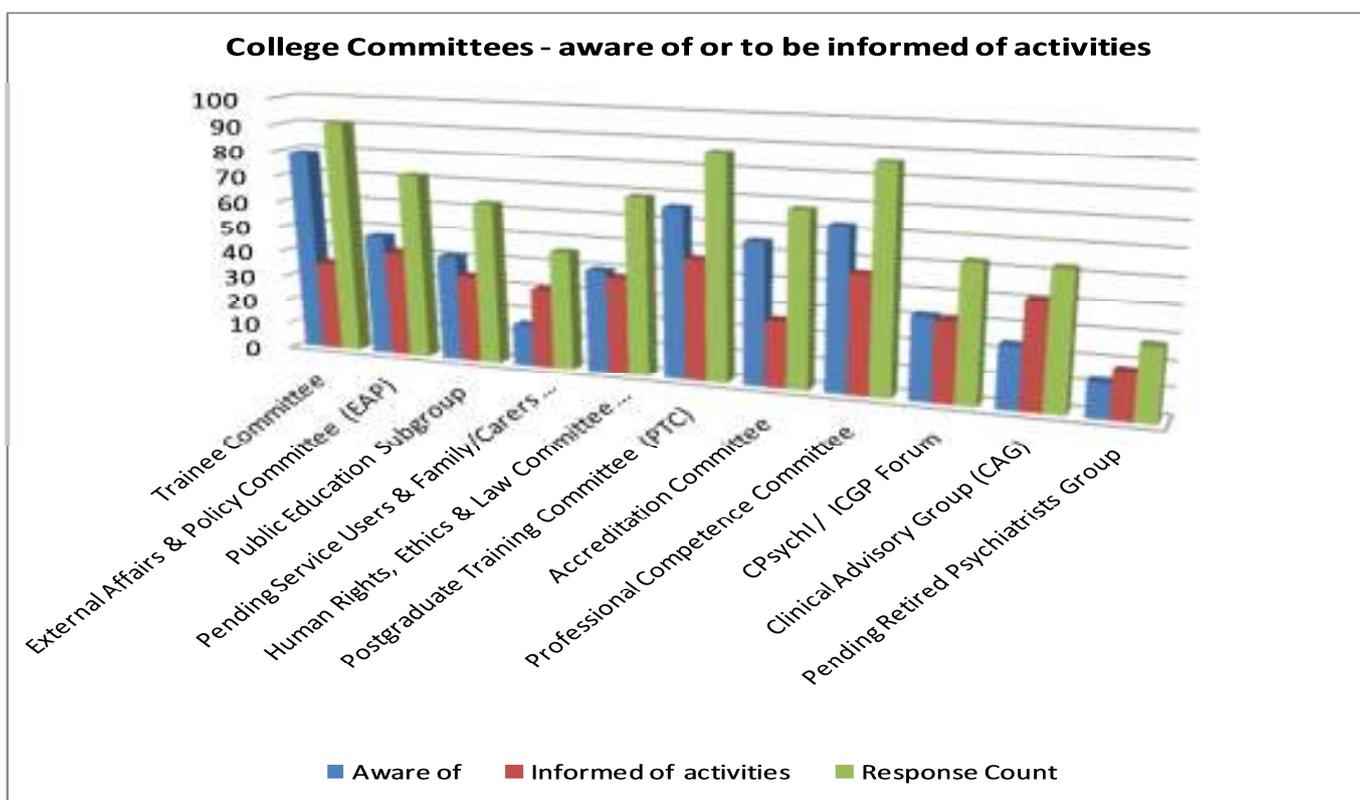
Q9. Which of the following would encourage you to become / stay involved in College Committees and Faculties?

Answer Options	Like to Join	Informed of activities	Response Count
General Adult Faculty	48	46	94
Addictions Faculty	7	22	29
Learning Disability Faculty	6	17	23
Old Age Faculty	8	26	34
Child & Adolescent Faculty	15	15	30
Social & Rehabilitation Faculty	9	24	33
Liaison Faculty	13	33	46
Forensic Faculty	10	27	37
Psychotherapy Faculty	15	34	49
answered question			108
skipped question			21



Q10. Listed below are the current College Faculties. Please mark those you would like to join or just be kept informed of its activities.

Answer Options	Aware of	Informed of activities	Response Count
Trainee Committee	79	35	91
External Affairs & Policy Committee (EAP)	47	41	72
Public Education Subgroup	41	34	63
Pending Service Users & Family/Carers Subgroup	16	31	46
Human Rights, Ethics & Law Committee (HREL)	40	38	69
Postgraduate Training Committee (PTC)	66	47	87
Accreditation Committee	55	26	68
Professional Competence Committee	63	46	86
CPsychl / ICGP Forum	32	31	53
Clinical Advisory Group (CAG)	24	41	53
Pending Retired Psychiatrists Group	13	18	28
Comments			5
answered question			112
skipped question			17



Q12. The College values input from all its members. If you have any other comments which you believe will improve the functioning of the College please include these below.

Answered question 34 skipped question 95

Appendix 2: Issues identified by the College Development Day.

1. Need to maximise member involvement and gain from the College. Ensure the College has representation across the board, regionally and all areas of service. No group should be excluded from positions on committees.
2. Improve communication with members.
3. Need to ensure all roles within the College are clearly defined.
4. Needs of the College and needs of the member need to be balanced.
5. Need to build alliances with other agencies who are influencing mental health services.
6. If members' expertise is known, they can be invited to do a specific piece of work for the College. Improve the information we have on members' research activities. Make use of the Academic group in this. Need to facilitate expertise, clear policies and procedures to ensure the edifice of the College is non-threatening.
7. Advocate on behalf of patients with the Government.
8. Encourage direct input to the College from service users.
9. Improve the profile of Psychiatry in the media. Engage in a programme of proactive activity, where the College can set the agenda. Communicate the expertise of Psychiatry in the media.
10. Ensure there is adequate support for trainees and trainers, and ensure the College has adequate governance over this. Specifically, accreditation visits need to ensure all mandatory requirements are met before accreditation is passed.
11. Chairs of the faculty need to be supported with induction, with encouragement that they ensure the faculty works effectively, delegating work, rather than the chair just taking on the work.
12. The College should have a theme every year, which all events can focus on; e.g. homelessness;
13. Ensure all Consultants encourage trainees to join College at an early stage. Promote college membership at induction.
14. Become involved in manpower planning, identify how many trainees we have, how many are needed into the future.
15. Improve the communication for training for all trainees, and doctors.
16. Review the psychotherapy training for all trainees.