

The questionnaire also included questions about training experiences in the different parts of the Division, and has provided us with some useful information. We are particularly grateful to all of the speakers who travelled considerable distances, and together made the day a success.

GILL TAGG  
CHRIS TAYLOR

*North East Division*

***North West Division Trainees Day***

The annual Trainees Day in the North West Division was held on 6 March 1985, at Winwick Hospital, Warrington, Cheshire. The meeting was attended by more than 60 trainees and psychiatric tutors from the Division.

The meeting was opened by Dr A. A. Campbell (Chairman, North West Division) who outlined the forthcoming programme of the Division and encouraged trainees to participate. He spoke about the importance of obtaining management training and mentioned some of the courses available. This was followed by a report from Dr N. Simpson (Honorary Secretary, Collegiate Trainees' Committee) on the activities of the trainees' committee during the past year.

Professor A. C. P. Sims (Chairman, Research Committee) gave a stimulating and entertaining guide for the novice setting out in research. We were led gently through the various stages from the initial motivation, through the process of generating research ideas to the perils and pitfalls likely to be encountered in practice. He advised trainees to research their own ideas rather than asking someone for a project, and outlined the ways in which the College tries to stimulate and encourage research.

The morning concluded with a thought-provoking account by Dr J. Jones (Senior Registrar, Liverpool) of 'Computers and the psychiatrist'. After a brief introduction to the technical aspects, he summarised current applications of computers such as record keeping, case registers, and the administration of rating scales for research. He went on to give an imaginative description of their future potential, including the development of 'expert systems' capable of diagnostic decision-making. This led to discussion about the desirability of machines as clinicians.

In the afternoon two discussion groups were formed—one on the difficulties encountered by trainees doing research, and the other the traditional exam workshop, which was organised by Drs C. McWilliam (Liverpool University) and G. McGrath (Manchester University).

The discussion on research was attended by 14 trainees, from both teaching and peripheral hospitals in all parts of the Division. Almost everybody reported doing some sort of research at present, and the group may not have been representative of trainees in general. While most people said they were partly motivated by the personal satisfaction derived from research, the consensus view was that trainees feel obliged to undertake research in order to

enhance their career prospects. The value to the trainee of research carried out as a chore for this reason was questioned, and at least some trainees thought that research is over-emphasised in postgraduate training programmes. It was suggested that for trainees seeking non-academic consultant posts there may be more appropriate ways of 'embellishing' a curriculum vitae, for example, experience overseas or a period of training spent acquiring a special skill.

Discussion concentrated on the practical difficulties experienced by many trainees, especially in the peripheral hospital. The majority of trainees attend courses and receive some teaching on research methodology. Nevertheless it was clear that there is an unmet demand for teaching, and especially for supervision and a suitable forum for discussing difficulties as they are encountered. Not all trainees have access to an experienced potential supervisor, and facilities and courses available at regional teaching centres are sometimes poorly advertised. It was suggested that there may be a role for the University Departments to make a regular commitment to the academic and research programmes of peripheral hospitals within their regions.

There was a discussion of the relative merits of individual research projects and participation in collaborative studies. There was general agreement that individual studies were more useful from the point of view of career prospects and provided more personal satisfaction, a point made by Professor Sims earlier in the day. On the other hand, it may be that the (training) needs of many trainees may be better met by carrying out a limited part of a larger collaborative project.

The final part of the day was devoted to an Open Forum entitled 'What future for trainees in peripheral hospitals?' Keynote addresses were given by Dr F. Creed (Senior Lecturer, Manchester) and Dr S. Pidd (Psychiatric Tutor, Lancaster Moor Hospital).

Dr Creed presented evidence that the proportion of trainees from peripheral hospitals in the North Western Region who obtain senior registrar appointments is small, and he saw little prospect for improvement in the immediate future. He discussed the conflict between the needs of trainees for a balanced training and a reasonable expectation of a career post, and the needs of the service which continues to rely on trainees to meet the clinical demands. Future moves to expand the consultant grade and restrict training grades will require changes in the pattern of postgraduate training in psychiatry. He suggested two alternative solutions. The first would be to concentrate all trainees in teaching hospital rotations while consultants in the periphery would work alone or supported by associate specialists. The alternative adopted by other specialties would be to create large rotations based on teaching hospitals but including posts in other parts of the region. Apart from geographical difficulties, this would distort the balance between general psychiatry and the specialties required by College guidelines on training.

Dr Pidd put forward the case for training in peripheral hospitals to continue. Psychiatric services in most of the country are still based in regional mental hospitals, and these hospitals provide trainees with the opportunity to obtain wide experience and undertake more responsibility, as well as better training in the care and rehabilitation of long-stay patients. She also emphasised the value of trainees to these hospitals as a stimulus to the maintenance of high standards. She argued that with active and enthusiastic tutors, aware that junior posts exist primarily for

training rather than service, the peripheral psychiatric hospitals have much to offer trainees. The ensuing discussion indicated general agreement among trainees that we would not wish to lose the opportunities for training outside the teaching hospitals. The advantages of greater flexibility in training schemes are clear.

D. CRAUFURD  
I. DAVIDSON  
N. SIMPSON

*North West Division*

## *Autumn Quarterly Meeting, 1985*

The Autumn Quarterly Meeting was held at Friends House, Euston, London NW1, on 14 and 15 November 1985 under the Presidency of Dr Thomas Bewley.

### **Registrar's Report**

President, ladies and gentlemen, among the items that I shall report on today, there are two that I should like to emphasise particularly. These are the new Membership Examination and the forthcoming Code of Practice document from the Mental Health Act Commission.

Council has sat once since our Annual Meeting and a large part of the session was spent discussing the Report of the Working Party on the Review of the MRCPsych Examination. This Report, produced under the Chairmanship of Professor R. Cawley, containing detailed proposals for a new Membership Examination, had been accepted by the Court of Electors at a special meeting held in July. Council welcomed the Report, which had been prepared after three and a half years of careful deliberation. It was agreed that preparation should commence for its introduction in 1987. A shortened version of this Report will be appearing in the *Bulletin* and as from today copies are available from the Examinations Office at the College (could you please send an A4 self-addressed envelope).

The DHSS has issued a review of community nursing. The College has prepared detailed comments on this review and these are available from the College.

The Social Services Committee (chaired by Renée Short) published its Report into Community Care last March. The College had prepared written evidence and presented oral evidence to the Committee. We are now in the process of implementing some of the recommendations in the final Report, particularly Recommendation 78 concerning mental handicap services and Recommendations 79 and 80 concerning community psychiatric nurses. If any member of the College would like to send me their comments on the recommendations, and these three in particular, I should be very grateful.

We have also prepared *written* evidence to another important inquiry, namely the Social Services Committee's Inquiry into the Prison Medical Service. We have been invited to present *oral* evidence as well, which we shall give on 4 December at the House of Commons.

There are three documents from the Mental Health Act Commission that I should like to mention: (1) Its Biennial

Report; (2) The paper on Consent to Treatment (which I wish to emphasise is merely a consultation document); and (3) The Code of Practice.

We have been informed that we shall probably receive the Mental Health Act Commission's draft Code of Practice at the very beginning of 1986. In view of the importance of this document and the relevance it will have to all psychiatrists, as well as other physicians, the President made a special request to the DHSS for a longer period of consultation than that which is normally given. We understand that we shall now have six months in which to prepare our comments. A Special Committee of Council has already been convened to collate and prepare the College's response. We shall, on receipt of the draft Code, immediately send it out to the Divisions and relevant College Committees. The Sections, together with general psychiatrists, are represented on the Special Committee, which will be chaired by the President. If any member wishes to comment on any aspect of the draft Code, I would be grateful to receive their comments, within one month, if possible, of its publication. The Special Committee will also comment on the Commission's Biennial Report and the Commission's paper on Consent to Treatment.

Council is discussing the possibility of preparing a joint statement with the Royal College of General Practitioners which will contain interim arrangements for the appointment of Section 12 approved doctors, until such time as the College's criteria can be achieved. The Public Policy Committee have been asked to consider this and report back to Council.

The Research Committee will be setting up an ECT Sub-Committee, which, among other things, will revise and up-date the 1977 ECT Guidelines prepared by the College.

The College has installed a telephone answering service which operates after 6.00 pm. I hope members will take advantage of this service.

Finally, the results of the recent elections Dr Anne Bolton has been elected as Vice-President; Professor Gelder and Dr Dick have been elected onto the Executive and Finance Committee. Dr William Boyd has been appointed by Council as Deputy Treasurer. Professors Schapira, Seager and Sims have been re-appointed as Sub-Deans.

R. G. PRIEST, REGISTRAR