



## education & training

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DAVID J. OGDEN

### Developing a regional specialist registrar day

Higher specialist training in psychiatry requires the development of a broad range of knowledge and skills in a short space of time. However, a brief national survey of programme directors confirms reports from peers that structured, targeted teaching tends not to continue beyond completion of College Membership examinations. Exceptions to this rule are child and adolescent psychiatry and to a lesser extent psychotherapy, which reflects requirements laid out in the *Higher Specialist Training Handbook* (Royal College of Psychiatrists, 1998). Specialist registrars must therefore, using limited study time and funding, attempt to acquire knowledge from local and national courses. These, however, are usually aimed at more generic groups: for example, all health service specialist registrars or at consultants for fulfilment of continuing professional development.

In this article I explain how over the past 2 years a lively and well-attended specialist registrar day has been successfully established in the Mersey Region. This is now beginning to meet our specific needs locally. It remains voluntary, but attracts at least two-thirds of the 33 specialist registrars in the region each time. In addition to didactic lectures, it includes a business meeting and an academic forum which focuses on developing knowledge and professional and peer support in activities associated with research and other value-added areas, for example, teaching and publication. I hope this article will be of use to others who are considering establishing something similar, and may provoke some discussion on how these days are best used.

#### The need

As well as falling between two stools when it comes to formal education, specialist registrars have other challenges to face, and there is no substitute for peer contact and support in this respect. In the Mersey Deanery, a recruitment crisis followed by a boom saw us go from being diluted to the point of isolation in 2003 to having high numbers of regional newcomers. When we did bump into each other, confusion was rife. Uncertainties regarding how to use special interest and particularly research time were common anxieties which for the most part remained unresolved. The rate of 30% reported nationally for specialist registrars perceiving themselves

as making satisfactory use of their research time (Royal College of Psychiatrists, 1998) was probably consistent with our regional rate. There was no established forum for group audience with, for instance, the deanery, university, professors, consultants conducting research, etc. Specialist registrars were thus attempting to identify and contact such people individually and in an uncoordinated manner. This was frequently frustrating for them and for us, mainly because of time constraints: several of the consultants most active in research had recently retired. Our main opportunity to meet collectively was the 3-monthly specialist registrars' forum (Janssen-sponsored business meeting), but this was attended by perhaps only three to five of us. Held on a Wednesday afternoon, it frequently clashed with other events. The chair struggled to keep a contemporaneous list of contacts. There was also an occasional, Eli Lilly-sponsored educational half-day, which was erratic and, again, poorly advertised. Inheriting the chair of the specialist registrars' forum, I placed its future at the top of the agenda.

#### Key developments

It was ambitiously decided to combine the best of what already existed in a new, 2-monthly specialist registrar day – something of a make-or-break approach. The specialist registrar who had been involved in the half-day took the role of organising afternoon speakers, and I accepted responsibility for chairmanship and administration. The previous half-days had been held in an excellent venue: a suite of imposing conference rooms in the basement of the magnificent Liverpool Anglican Cathedral. It is centrally located and offers ample, free, secure parking and good in-house catering. Funding of alternate days there was negotiated with the two existing sponsors, and three days were booked initially. Although surprisingly laborious, it was vital to secure a relevant address for all the specialist registrars in the region. They were duly invited with plenty of notice (with the exception of child and adolescent psychiatry specialist registrars, who already had a formal training programme). Having confirmed with the programme director and the higher specialist training and education committee, I emphasised that specialist registrars were entitled to be



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<b>Mersey Psychiatric SpR Day Programme</b> <b>Western Rooms, Anglican Cathedral, Liverpool</b> <b>Thursday 10 February 2005</b>						
<b>09:00</b>	<b>Coffee and registration</b>					
<b>09:30</b>	<b>Academic forum</b>					
<b>10:15</b>	<b>Academic speaker</b> Brian Bennett, R&D Manager, Merseycare					
<b>11:00</b>	<b>Coffee</b>					
<b>11:30</b>	<b>Business meeting</b> See Agenda					
<b>12:30</b>	<b>Lunch</b>					
<b>13:30</b>	<b>Social inclusion in mental health</b> Omei Li, NIMCH					
<b>14:15</b>	<b>Coffee</b>					
<b>14:30</b>	<b>The management of personality disorder</b> Dr Peter Mason, Consultant Psychiatrist, CWPT					
<b>15:30</b>	<b>Close</b>					
Remaining dates for 2005 <table style="float: right; margin-left: 20px;"> <tr><td>Friday 15 April</td></tr> <tr><td>Monday 13 June</td></tr> <tr><td>Tuesday 16 August</td></tr> <tr><td>Wednesday 12 October</td></tr> <tr><td>Thursday 15 December</td></tr> </table>		Friday 15 April	Monday 13 June	Tuesday 16 August	Wednesday 12 October	Thursday 15 December
Friday 15 April						
Monday 13 June						
Tuesday 16 August						
Wednesday 12 October						
Thursday 15 December						

Fig. 1. Specialist registrar day programme.

excused from other duties to attend, and that formal study leave was not required. The day of the week was set to rotate, to achieve equity in clashes.

It was felt to be important for specialist registrars to perceive a sense of collective ownership over the specialist registrar day, hence a plea for good attendance was made so that we could discuss its future goals and topics for guests: subsequently keeping this item on the agenda. Establishing and allocating roles such as social secretary and website liaison were also part of this process. The time was spread, to allow for travel and informal mixing. Group audiences were secured with the postgraduate dean and the professors of general and old age psychiatry for the first slot on each of the first 3 days in order to discuss our (and their) needs, objectives and opportunities in the context of our research time. Two important discoveries (in terms of the specialist registrar day) came from this. First was the readiness of senior clinical and educational colleagues to engage and support us; 'Great – I never get to see you lot!' was the typical response. Second was the tremendous value of these sessions. It was soon agreed to formalise the first part of the day as an academic forum, with an earlier start to facilitate this. Currently we have an invited guest (e.g. a research and development manager, ethics committee member, etc.) and a discussion (which may include our own presentations and feedback), each lasting 45 min. The timetable was thus modified as shown in Fig. 1.

The hour-long business meeting now struggles to keep to time. Sending invitations by e-mail to add agenda items in advance helps to ensure relevance and promotes involvement. The afternoon is arranged for didactic

teaching, usually with two 1-h slots. There are many challenges here, and this is a subject in itself. What most facilitated attendance of speakers, however, was giving them plenty of notice so they could choose from a range of dates and times, ideally up to a year in advance – which means getting the venue booked early. Some expect payment (which the sponsors negotiate), but many do not. Keeping a win–win perspective is useful: lecturing to and meeting all specialist registrars is a rare opportunity! We try to keep subjects specific to our group objective: to prepare for consultancy in psychiatry, but avoiding repetition of material available locally elsewhere or not relevant to all sub-specialties. Our policy is to go beyond the recommendations of *Good Psychiatric Practice* (Royal College of Psychiatrists, 2003) and choose all speakers ourselves. This sometimes requires a firm stance with the sponsors, who may suggest presentations regarding their own products, or encourage speakers from their own list. Reminding them that maintaining the credibility of the specialist registrar day is crucial in securing good attendance is usually an effective response. Maintaining a display stand with attendant networking opportunities is generally acceptable to sponsors. The facility costs £500 per day, including catering but excluding speakers.

## Further developments and benefits

Communication has vastly improved. Regular circulation of information, including plenty of advance notice of future meetings, means everyone knows what is happening. This means being first into diaries. Initially, keeping track of everyone moving posts, joining or leaving the rotation, organising mail shots, etc. was logistically quite demanding. The solution was to insist on using the internet as the primary means of communication. We have recently moved completely to an online, paperless administration. This also means we each have everyone else's e-mail address. Deanery website support has been secured, including an online forum ([http://www.merseydeanery.ac.uk/psych/Psychiatry\\_trainee.htm](http://www.merseydeanery.ac.uk/psych/Psychiatry_trainee.htm)).

A special interest register was introduced to allow logging and internal feedback on regional opportunities. It amounts to a collection of single-page forms (available on request) each completed by a specialist registrar on finishing a placement, summarising the pros and cons. The register can be viewed by the other specialist registrars and the programme director.

Having a cohesive group with good internal communications has many benefits, but notably facilitates representation of collective interests elsewhere, together with the means for feedback and discussion. Examples include the local negotiating committee, where representatives of over 800 specialist registrars from other specialties compete to be heard, and the deanery, who have responded to our request for training in the education of undergraduates. Direct funding is, unfortunately, beyond their resources. It was suggested



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by senior colleagues that the specialist registrar days should be compulsory to ensure attendance, which provoked considerable debate. This has been refined by introducing attendance certification (i.e. specialist registrars still have choice over attendance, but can provide evidence of it, e.g. at their annual appraisal).

## The future

On 30 September 2005, the Specialist Training Authority of the Medical Royal Colleges was replaced as the UK competent authority for postgraduate medical education, in the specialties, by the Postgraduate Medical Education and Training Board (PMETB). The PMETB is required by Article 3 of the General and Special Medical Practice (Education and Training) Order 2003 to:

‘... establish standards for postgraduate medical education and training; to secure the maintenance and development of those standards; and ensure their universal implementation’ (PMETB, 2005a).

The PMETB has sub-contracted some of its duties (including curriculum development) to the Colleges. The Modernising Medical Careers initiative will require a run-through curriculum, rather than one where basic and higher specialist training are separate (Department of Health, 2004). The new college curriculum is being designed with this in mind (Royal College of Psychiatrists, 2005). *Principles of Good Medical Education and Training* (GMC & PMETB, 2004), issued jointly by the General Medical Council and PMETB, sets out broad, ambitious goals, which must be addressed in any future curriculum (PMETB, 2005b).

This tide of change might appear set to wash away our specialist registrar day, particularly in view of the emphasis on workplace learning and assessment (Royal College of Psychiatrists, 2005). On the other hand, the requirement for curricula to include ‘learning with peers’ and ‘learning in formal situations inside and outside the department’ as key experiences (PMETB, 2005b) suggests that future formalisation of this type of event is a very real possibility. If so, our specialist registrar day may already be contributing towards the bedrock of any such development: encouraging local teaching at our level; forging links with postgraduate educational bodies, trusts, research organisations and commercial sponsors; and – perhaps most crucially – establishing specialist registrars’ engagement with the process of education, particularly in view of PMETB’s promise to keep trainee

views ‘at the heart of the quality assurance approach’ (PMETB, 2005a).

## Conclusion

It would be false modesty to deny that making a project like this work requires that at least one individual take it on enthusiastically. It is worth adding here that the collective ownership approach has facilitated maintenance of the specialist registrar day’s momentum following the end of my tenure. It is a significant commitment, but the value of the experience is beyond question. Educational supervisors have always fully supported the endeavour, for instance recognising special interest time for administration. Personal benefits include considerably enhanced confidence and competence in project management, committee work and education, and the formation of many valuable contacts.

## Declaration of interest

The Mersey Specialist Registrar Day is funded by educational grants from Janssen-Cilag and Eli Lilly.

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**David J. Ogden** Specialist Registrar in Old Age Psychiatry, Merseycare NHS Trust, Waterloo Day Hospital, Liverpool L22 3XR, UK, e-mail: [dr.david-ogden@virgin.net](mailto:dr.david-ogden@virgin.net)