

ED DAY AND JIM BOLTON

The Collegiate Trainees' Committee

The Collegiate Trainees' Committee (CTC) has been in existence for over 20 years and continues to represent the opinions of trainees in psychiatry within their College and beyond. This article briefly summarises the historical development and current role of the CTC, and outlines the activities of the committee throughout the past year.

sentatives do far more than observe the workings of these committees, and often have an active role in influencing College policy. For example, the CTC has long been concerned about the rising costs of entering the MRCPsych examination, and this year was successful in limiting the increase in next year's fees.

The role of the CTC

The Royal College of Psychiatrists is unique among the medical Colleges in the extent of trainee representation in its organisation. The CTC was formed in 1979 and given the status of a Special Committee of Council, the principal decision-making body within the College. Its role has always been to represent the interest of trainees, and in so doing maintain and improve the quality of postgraduate training in psychiatry. The committee consists of 37 elected members, three from each 'Division' (the regional subgroups that represent each area of England, Wales, Scotland and Ireland within the College) and one from the armed forces. At least one member per division must be an Inceptor, thus ensuring that at least one-third of the CTC membership is made up of senior house officers (SHOs). Elections are held in half of the divisions every year, with members serving a 2-year term with the possibility of being re-elected for a further 2 years.

The committee meets at the College four times a year, and has a residential meeting to welcome the new committee members in early October. Any member of the committee can contribute to the agenda, and the Dean and another member of the College's administrative staff usually attend each meeting. The CTC often forms working groups of four or five members in order to formulate ideas about particular training issues. Recent groups have produced reports on the 'specialist registrar (SpR) research day' (Day & Ramchandani, 2000) and 'training in community psychiatry', and another group is currently looking at developing the trainees' website. A recent council report about safety issues in training resulted from a CTC working group (Royal College of Psychiatrists, 1999a).

The committee structure of the College is split into two broad arms. The first is responsible for the overall management and control of College affairs, and is headed by Council and its Executive and Finance Sub-Committee. The second structure formulates and ratifies all aspects of educational policy and reports to the Court of Electors (Royal College of Psychiatrists, 1999b). The CTC sends a representative to every committee in the College, except the Court of Electors and the Examinations Committee (as both have a role in setting and reviewing questions for the MRCPsych examinations). The Chairman attends the Executive and Finance Committee on a monthly basis, and the CTC has three votes on Council. Trainee repre-

The CTC in the past year

A large portion of the work of the CTC in the past year has been directed at increasing trainee representation at major College meetings. Concern had been expressed about the low numbers of both SHOs and SpRs attending such meetings, and so the Committee has set about trying to reduce fees and develop sessions of interest to both junior and senior trainees. The joint meeting held with the General and Community Faculty in London in March 2000 was the first test of this strategy, and proved to be very successful. A parallel session organised by the CTC and aimed directly at trainees attracted 25 SHOs and nearly 40 SpRs - a 12-fold increase from the previous year. The theme of 'psychiatry in the general hospital' provided a very lively debate, and a successful informal meeting of SpRs followed. We also organised a further debate at the Edinburgh Annual Meeting (on the subject of examinations), which again was well attended and produced a stimulating and thought-provoking discussion (see the CTC section of the College website: http://www.rcpsych.ac.uk/traindev/trainees/index.htm).

The 2001 Annual Meeting in London was the largest gathering of trainees yet, with subsidised places for over 400 trainees from the UK and Europe. The CTC organised two workshops (about managing stress in psychiatry and psychiatry training in Europe) and also hosted an evening reception at the College. Trainees came to a College meeting for the first time, and enjoyed the chance to meet colleagues from around the country and across Europe.

This year trainees have contributed to many important pieces of work within the College. The CTC was actively involved in the revision of the MRCPsych exam and curriculum, and will continue to help with particular parts of its implementation, such as objective structured clinical examinations (Katona et al, 2000). Trainees have been represented on the working party to develop core competencies for SpRs, and we have commented on the Dean's Educational Strategy and the proposed reforms of the Mental Health Act from the trainee perspective. The Trainees' Charter (Royal College of Psychiatry, 1999b) has been re-written as 'The Rights and Responsibilities of a Trainee Psychiatrist' (Box 1), and the committee has actively contributed to the debate about how to improve recruitment and retention into psychiatry.

Box 1. The rights and responsibilities of a trainee psychiatrist

The trainee can reasonably expect to have the right to:

- (a) be treated with the consideration and respect expected of a professional colleague irrespective of personal or cultural differences (including gender, ethnicity, nationality or disability)
- (b) supervision time of 1 hour per week with his or her consultant (educational supervisor) for discussion of training matters unrelated to immediate clinical problems
- (c) constructive criticism and encouragement from the educational supervisor, working towards achieving personal and professional goals
- (d) supervision and support with clinical case-load appropriate to level of training
- (e) access to a local college tutor for both meaningful, longterm career guidance and advice about training and pastoral issues
- (f) unimpeded access to a local training programme of approved study for the MRCPsych
- (g) the opportunity (and funding) to attend relevant courses, conferences and meetings appropriate to training grade and experience
- (h) appropriate local supervision and practical support for research with protected research time appropriate to grade
- (i) working conditions, hours of duty and accommodation in line with the British Medical Association and Government guidelines
- representation on training and relevant management committees, with support for a local training organisation to represent trainees and provide peer support.

The trainee also has certain responsibilities:

- (a) to treat patients and colleagues in the manner in which the trainee him- or herself would like to be treated
- (b) to work with educational supervisors to create an individually tailored development plan, including aims and objectives to be achieved from each job
- (c) to view educational supervision as a two-way process, utilising constructive criticism to improve performance
- (d) to attend and contribute to local training courses to maximise learning opportunities for both self and others
- (e) to contribute fully to local trainee peer groups in order to maximise training conditions and support trainee colleagues.

The broader picture

Members of the CTC also act as observers at the Junior Doctors' Committee of the British Medical Association and as members of the Meeting of Specialist Trainee Representatives, thus giving psychiatry a voice within the wider arena of medicine. This has become particularly important over the past year, with concerns over the impact of the new Junior Doctors' pay deal (Roots, 2000). Trainees from

Great Britain and Ireland were also instrumental in setting up the European Federation of Psychiatric Trainees in 1992 (Gribbin, 1999), and the CTC is still an active member of this group. Two CTC members attended the European Federation of Psychiatric Trainees Forum in Berlin in July of this year, and were able to meet and discuss training issues with colleagues from almost every country in Europe. We have also recently formed links with trainees in Australia and New Zealand, and we hope that on-going work on the CTC section of the College website will broaden contact with colleagues throughout the world.

The committee is constantly aware of the need to stay in contact with trainees throughout the country. With this in mind, members of the CTC organise at least one local educational meeting during their term of office, aiming to promote the work of the CTC and encourage SHOs to learn more about the work of the College. We have recently become concerned by the limited number of SHOs taking up the opportunity to become Inceptors of the College, and the College's subsequent difficulties staying in contact with trainees. We are therefore working on developing links with trainees via a website, and hope to ultimately provide an e-mail service to keep trainees up to date with the College's activities.

Membership of the CTC provides a range of valuable opportunities for trainees. Not only does it allow you to see the important work of the College at close hand, but also influence training in psychiatry and to meet fellow trainees from around the country. I would recommend it to any interested trainee. Details of the CTC and how to get involved can be obtained from Sam Bendall at the Royal College of Psychiatrists, 17 Belgrave Square, London SW1X 8PG (e-mail: sbendall@rcpsych.ac.uk). Alternatively, further information is available on the College website: http://www.rcpsych.ac.uk.

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*Ed Day CTC Chairman and Specialist Registrar in Pscyhiatry, Addictive Behaviours Centre, 120–122 Corporation Street, Birmingham B4 6SX,

Jim Bolton CTC Honorary Secretary and Lecturer in Psychiatry, Department of Psychiatry, St George's Hospital Medical School, CranmerTerrace, London SW17 ORF

