
College census

Sally Pidd

Manpower planning is not normally a topic of considerable interest for most psychiatrists. That is, until their trust is faced with recruiting a new or replacement consultant from what may seem to be an ever diminishing pool of qualified applicants. "Where have all the specialist registrars gone?" is often the woeful cry which goes up after increasingly large and ever more expensive advertisements fail to draw in desperately needed recruits. Having an accurate picture of the current state of the psychiatric workforce and seeing the trends in recruitment and retention at all grades is vitally important for the profession. It was the realisation of the gross inadequacy of officially collected statistics some years back which led to the first College census on psychiatric staffing.

In the early 1990s it became clear that the Department of Health did not know how many doctors it had, where they were geographically or what specialities they worked in. The available figures were inaccurate and many were out of date, which made for difficulties in manpower planning. Deficiencies in reliable information led to difficulties in arguing the case for expanding training grade numbers in psychiatry in order to feed necessary consultant expansion. The Royal College of Obstetricians and Gynaecologists had already shown that it was possible to survey their members and come up with better than official statistics and so in September 1991 this College set about a similar exercise. The format of the census has remained largely unchanged since. After two years of what were regarded as trial runs there has been increasingly full and comprehensive collection of data from all trusts or provider units in England, Wales, Scotland and Northern Ireland from 1993 onwards.

The task of requesting and reminding College tutors in each trust to update records of their complete staffing establishment on an annual basis falls upon Deputy Regional Advisers. It is probably a thankless task. Tutors in turn have to rely either on local knowledge, cooperative colleagues or helpful human resources departments to come up with such information as dates of birth, General Medical Council numbers, sessional commitments of consultants, reasons for vacant posts and the ever changing names of senior house officers and other training grade staff. This is no mean task in large trusts.

The census date is set for 30 September each year and with a great deal of effort, particularly on the part of College staff, the data set is in a reasonably complete and presentable state by the following June. The timing is of significance because the most important use of the census data is in the negotiations with the Specialist Workforce Advisory Group (SWAG) at the NHS Executive. It is this group which effectively sets the level of national training numbers to be available year on year for each psychiatric speciality. The College data provides a check on information which is fed in by the lead post-graduate dean on training post numbers and both sources are consistently more accurate than figures collected directly by the Department of Health from human resources departments.

The census is now in its seventh year and the College has agreed to a radical review of its information technology requirements which will include the establishment of an integrated database. This will tie in membership information with census details. As doctors apply for the Part I MRCPsych examination they will enter the database and links will be made thereafter to track their progress and movement, both in career choices and geography. Hopefully, it will also mean that information gathered at Advisory Appointment Committees for Consultants by College Assessors can be linked in to give a better overall view of the outcome of training and the dynamics of the psychiatric workforce from inception to completion of training.

The new system should overcome one of the main problems of the census to date. A great deal of work goes into producing a static picture of where we were last September. What is more useful and interesting is a year on year comparison of trends, expansions, deficiencies and black holes in staffing provision. We need to know for example, what proportion of senior house officer posts are occupied each year by general practitioner or other non-psychiatric trainees.

We need to have a very clear idea of how many specialist registrars are opting for dual Certificates of Completion of Specialist Training, which distorts their overall time in training and the rate of uptake of consultant posts. We also need to have a very clear picture of the trends in consultant retirements, early or otherwise and

consultant to consultant moves which have become an increasing trend over the years the census has been operating. It was data from the census which enabled the President to contact all consultants who had taken early retirement in one year to collect very detailed information and comments about their experiences. This information has given ammunition to those in a position to lobby for better resources and better job planning for the next generation of consultants. Finally, more information will be required on consultants' special interest as the increasing number of psychiatric sub-specialities complicates manpower planning.

It is of considerable concern among those of us left in the shrinking pond of general adult psychiatry that we may not be left with enough training posts to fill the existing, let alone expanding, requirement in this speciality.

Our hope is that the new system of collection, analysis and presentation of manpower data will

be more painless and more accurate. This in turn will enable the College representatives who negotiate with SWAG to be in the best position to come up with the workforce we need in psychiatry for the next millennium. We will still need the cooperation of all College members to help tutors or others delegated within trusts the task of collecting the raw data each year. The completed census document is never going to make exciting bedtime reading. However, if it helps to ensure that the next consultant vacancy in your trust has a better chance of being filled by a well qualified applicant from a reasonable field of candidates, it may take on a greater importance and interest to us all.

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