

The Royal Medico-Psychological Association Reports on Postgraduate Education

Addendum to the report on the questionnaire on postgraduate training in psychiatry

(Reference: *Brit. J. Psychiat.* (1968), **114**, 1441-54)

INTRODUCTION

A questionnaire on postgraduate teaching and training facilities was prepared and circulated by the Education Committee late in 1965, and, after approval by Council, the report on this survey has been published (R.M.P.A., 1968). To find out what changes in teaching and training facilities had taken place in up to 2½ years, a second questionnaire was circulated to all psychiatric hospitals in the United Kingdom approved by the Conjoint Board as providing training for the D.P.M. The second questionnaire was shorter and simpler than the first, some questions of doubtful value being eliminated and others re-phrased to make them less ambiguous.

RESULTS

Replies were received from 122 out of 151 hospitals circulated (81 per cent response; 1965 = 95 per cent).

Requirements for recognition by the Conjoint Board

In this questionnaire no inquiries were made about the presence of a department of psychology (73 per cent in 1965).

Twelve per cent of the hospitals, but excluding the very small number of units providing specialized training (such as the Cassel) did not conduct regular case conferences (1965 = 20 per cent).

Nine per cent of the hospitals did not have 'an independent medical library with adequate furniture and fittings' compared with 22 per cent in 1965 who replied 'No' to this question, and compared with 9 per cent in 1965 who did not have 'an adequate psychiatric section in the hospital library'.

A total of twenty hospitals (13 per cent) did not satisfy the Conjoint Board's requirements in respect of holding regular case conferences and having an adequate library. It is likely that a further (but unknown) number of hospitals do not have a staffed department of psychology, because as recently as 1965 27 per cent of hospitals did not have at least one psychologist and it is unlikely that there has been a substantial increase in the number of psychologists in the period elapsing between the two surveys.

OTHER FACILITIES

Tutors. Seventy-six per cent of hospitals now have a tutor as compared with 55 per cent in 1965.

<i>Book acquisitions</i>	<i>1965</i>	<i>1968</i>
Fewer than 5 a year	7%	3%
5-20 a year	52%	38%
More than 20 a year	41%	59%

<i>Journals</i>	<i>1965</i>	<i>1968</i>
0-10	63%	37%
More than 10	37%	63%

<i>Psychotherapy</i>	<i>1965</i>	<i>1968</i>
Supervised group	64%	68%
Supervised individual	50%	48%
Consultant-conducted seminar	30%	33%

<i>Journal club meetings</i>	<i>1965</i>	<i>1968</i>
Minimum of 10 a year	30%	25%
Less than 10 a year	?	15%

Systematic seminars by consultants

General psychiatry, 63 per cent 'Yes'.
Psychology (including demonstration), 30 per cent 'Yes' (1965 = 24 per cent).
EEG (including demonstration), 20 per cent 'Yes' (1965 = 19 per cent).

Experience in subnormality. In 1968, 54 per cent of hospitals provided some experience. No direct comparisons can be made, as in 1965 the question asked was 'systematic instruction by case conferences' (20 per cent 'Yes') and 'out-patient experience' (14 per cent 'Yes').

Child psychiatry. Forty-three per cent gave 'systematic instruction' compared with about 25 per cent in 1965.

Neurology. Fifty-eight per cent gave systematic instruction, compared with 42 per cent in 1965 who gave lectures and out-patient experience and 36 per

cent who gave instruction by case conferences. (This does not mean that 78 per cent of hospitals in 1965 gave some experience, as the questions were not mutually exclusive.)

Community psychiatry. Experience was given regularly in 75 per cent of hospitals (1965 = 64 per cent).

Courts and prisons. Thirty-nine per cent 'Yes' in 1968, compared with 37 per cent 'Yes' in 1965.

Industrial therapy. Seventy-one per cent 'Yes' in 1968, compared with 46 per cent 'Yes' in 1965.

CONCLUSIONS

There has in the past 2½ years been an improvement in many facilities, notably in the provision of case conferences, libraries and numbers of books and journals acquired; more hospitals now are providing experience with subnormals, community psychiatry and industrial therapy. The pattern of improvement is that which would be anticipated from the provision of more money for education and the granting of study leave on a wider scale; educational activities involving the expenditure of consultant's time show the least change.