2017 Annual Review

Improving the mental health of communities through high quality psychiatric care, education, leadership and advocacy

ranzcp.org
yourhealthinmind.org
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Vision, values, purposes

Our vision

To improve the mental health of communities through high quality psychiatric care, education, leadership and advocacy.

Our values

» Collaboration  » Compassion
» Excellence    » Innovation
» Integrity     » Sustainability
» Respect

Our purposes

Advance the profession of psychiatry through the delivery of best practice training, continuing professional development and high quality psychiatric care.

Improve the mental health of communities by working with stakeholders to support high quality psychiatric care.

Meet the needs and expectations of member to enhance the value of their membership whilst ensuring the sustainable growth of the College.
### Year in review

#### My CPD online platform introduced
- Membership growth: 4.7%
- Media mentions: 2,744

#### Attendance at RANZCP conferences
- 1,274 delegates
- 21 countries
- 3,163 presentations

#### New trainees
- 239

#### Position statements produced
- 5

#### Submissions
- 138 (Up 15%)

#### RANZCP website
- 48,546 visits per month

#### Your Health in Mind
- 9,114 visits per month
- 4.34 pages per session

#### Find a psychiatrist
- 2,246 members listed
- 76,396 total visits
Members of the RANZCP comprise Fellows, Associates (trainees) and Affiliates.

Members are based throughout Australia and New Zealand, as well as in 22 other countries worldwide. Approximately 50% of members are located in New South Wales or Victoria, followed by Queensland (16.5%) and New Zealand (12.8%).

<table>
<thead>
<tr>
<th>Member type</th>
<th>NSW</th>
<th>VIC</th>
<th>QLD</th>
<th>NZ</th>
<th>WA</th>
<th>SA</th>
<th>TAS</th>
<th>ACT</th>
<th>NT</th>
<th>Overseas</th>
<th>Total</th>
</tr>
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<tr>
<td>Fellow*</td>
<td>1185</td>
<td>1081</td>
<td>743</td>
<td>405</td>
<td>350</td>
<td>321</td>
<td>76</td>
<td>59</td>
<td>18</td>
<td>152</td>
<td>4390</td>
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<td>Associate member (trainee)</td>
<td>432</td>
<td>381</td>
<td>277</td>
<td>185</td>
<td>107</td>
<td>98</td>
<td>25</td>
<td>32</td>
<td>16</td>
<td>6</td>
<td>1559</td>
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<tr>
<td>Affiliate member</td>
<td>3</td>
<td>11</td>
<td>3</td>
<td>199</td>
<td>4</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>221</td>
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<tr>
<td><strong>Total</strong></td>
<td>1620</td>
<td>1473</td>
<td>1023</td>
<td>789</td>
<td>461</td>
<td>419</td>
<td>102</td>
<td>91</td>
<td>34</td>
<td>158</td>
<td>6170</td>
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* This includes Fellows in the ‘retired’ category but still with an ‘active’ status.
Throughout 2017, several members of the RANZCP were publicly honoured in Australia for their achievements and contributions to psychiatry and mental health.

The RANZCP congratulates the following members:

**Associate Professor Brett Emmerson (Queensland)**

Member of the Order of Australia in the General Division (AM)

Queensland Fellow Associate Professor Emmerson was appointed a member of the Order of Australia for significant service to medicine, particularly to psychiatry, to medical administration, and through contributions to mental health groups.

Associate Professor Emmerson is the Executive Director at Metro North Mental Health, Queensland – one of the largest mental health services in Queensland – which includes the Royal Brisbane and Women’s Hospital, The Prince Charles Hospital and Caboolture Hospital. He is also an Associate Professor at the University of Queensland.

Known as a leader in the field of psychiatry, Associate Professor Emmerson has been managing mental health services since 1988. He began in community-based mental health services, then worked on policy as Chief Psychiatrist (Queensland) for three years. In 1994, he became Director of the Division of Mental Health Services Logan Beaudesert Health Service before being appointed Executive Director, Mental Health Services at the Royal Brisbane Hospital in 1997. He has been in his current role as Executive Director for Metro North Mental Health since 2009.

He cites one of his biggest successes as the establishment of a viable research culture at Metro North Mental Health in partnership with the Queensland Institute of Medical Research, the University of Queensland and clinical research centres. Metro North Mental Health now has a solid group of researchers who have attracted a number of National Health and Medical Research Council grants and have had 90 publications in 2016.

His contribution to the RANZCP’s work has included chairing the Queensland Branch Committee and the Branch’s Professional Conduct Committee; representing the Branch on the RANZCP General Council; and as an examiner for the RANZCP training program. He was the Queensland representative on the RANZCP Leadership and Management Project Steering Committee, which highlighted the need for psychiatrists to undergo leadership training as part of the Fellowship training program.

Associate Professor Emmerson is also a previous recipient of the RANZCP’s Margaret Tobin Award (2007), which recognises special achievement in administrative psychiatry, as well as a College Citation (2014) for his outstanding service to the College and for his commitment and contributions to psychiatry.
Dr Martha Kent (South Australia)

Medal of the Order of Australia in the General Division (OAM)

South Australian Fellow Dr Martha Kent was awarded a medal of the Order of Australia for service to medicine, particularly to mental health.

Dr Kent is an advocate for the accessible and evidence-based treatment of people with borderline personality disorder (BPD). Sixteen years ago, she moved from public mental health services to the private system, offering therapy mostly to women. Feeling the need to make a contribution to community psychiatry and the community in general, she seized the opportunity to engage in BPD advocacy. Working with a small, dedicated group of people who share her passion, she set about trying to improve outcomes for this worthy cause.

A clinician and researcher in BPD, Dr Kent successfully lobbied for two parliamentary motions to declare the first week of October each year as National BPD Awareness Week. She was the lead author and co-author of reports outlining current management practices for borderline personality disorder patients, for both the federal and South Australian governments, and was twice a key presenter at the National BPD Awareness Conference in Adelaide.

As Chair of the South Australian Branch of the Australian BPD Foundation, Dr Kent established a borderline personality disorder network within the Mental Health Professionals Network in Adelaide for health practitioners. She also provided her expertise to the Ministerial Borderline Personality Disorder Expert Reference Group from 2010 to 2012.

Dr Kent sees the OAM as an honour for BPD advocates, who work quietly and determinedly behind the scenes. Although recently retired, Dr Kent is still involved in ongoing BPD teaching and advocacy to promote the BPD cause.

Professor Helen Herrman (Victoria)

Officer of the Order of Australia (AO)

Victorian Fellow Professor Helen Herrman was appointed an Officer of the Order of Australia for distinguished service to medicine, and to mental health, as a leading clinician, researcher and scientist, to national and international organisations, and through programs to support youth and women.

Professor Herrman is an internationally-recognised expert in the field of mental health promotion. She also has extensive research and leadership credentials in epidemiological and community psychiatry, depression in primary health care, and clinical psychiatric service development. She is currently Professor of Psychiatry, Orygen Youth Health Research Centre at the University of Melbourne, and Director of the World Health Organization (WHO) Collaborating Centre for Mental Health in Melbourne. She also holds prestigious National Health and Medical Research Council Practitioner Fellowships for 2010–2014 and 2015–2019.

Previously, she was the Professor and Director of Psychiatry at St Vincent’s Mental Health Service, 1992–2005; Director of Academic Programs at Australian International Health Institute, 2005–2007; and Chair of the International Working Group, Co-operative Research Centre, 2012–2015.

Professor Herrman has established partnerships and activities to benefit psychiatry in the Asia–Pacific region and globally. Professor Herrman’s work with the WHO began in 1989 and, as the Director of the WHO Collaborating Centre for Mental Health in Melbourne, she has actively fostered local community psychiatry initiatives and training programs for clinicians throughout our region. She has been involved in the development of regional mental health strategies through the WHO Western Pacific Regional Office and has also worked on a range of projects and policy developments in various countries. She served as President of the Pacific Rim College of Psychiatrists, 2014–2016, and President of the International Association of Women’s Mental Health, 2015–2017.

Professor Herrman’s dedication to improving mental health outcomes globally is further demonstrated by her extensive involvement with the World Psychiatric Association (WPA) over the past 16 years. She was Secretary for Publications on the WPA Executive Committee and Associate Editor of World Psychiatry, 2005–2011, and in 2017 she became the first Australian to hold the position of President of the WPA.

In 2010 Professor Herrman received a College Citation from the RANZCP for her contribution to national and international psychiatry.

Continued overleaf
Dr Prudence Stone (Western Australia)

Public Service Medal

Western Australian Fellow Dr Prudence Stone was awarded a Public Service Medal for outstanding public service in the area of mental health services in Western Australia.

Dr Stone has supported several governments and tirelessly worked throughout her 50-year career to improve the health of children, including in the last nine years as Clinical Director for Western Australia Country Health Service (WACHS)/Child and Adolescent Mental Health Services (CAMHS). She pioneered the use of telemental health to deliver clinical care and training to the most remote and disadvantaged parts of the state.

On moving to WA in 1997, she worked in a range of areas, including at King Edward Memorial Hospital and Princess Margaret Hospital, Stubbs Terrace, Next Step Youth Services and Youth Link, and sat on the then Mental Health Review Board. Soon after her arrival in WA, she developed a great interest in rural and remote child and adolescent mental health services. There was only one child and adolescent psychiatrist working full-time outside metropolitan Perth. She worked for 11 years as visiting CAMHS psychiatrist for the Wheatbelt Mental Health Service. Dr Stone was an early adopter of videoconferencing as a communication tool, which was vital in connecting clinicians to patients and in supporting colleagues throughout remote areas of the state, to reduce their sense of isolation and help them to feel part of a larger body of clinicians. She ensured that this new service included training and education to increase the skills and capacity of rural clinicians.

Since 2009 she has conducted a twice-yearly, four-month-long training program for rural and remote CAMHS clinicians of all disciplines. The dual aim of direct clinical care and service development exemplifies her visionary thinking and leadership, and represents her remarkable contribution to the development of Western Australia’s mental health services.

Dr Stone’s involvement with the RANZCP has included membership of the Committee for Continuing Medical Education, the bi-national CAMHS Faculty Executive and the WA Branch Committee. She was previously active in the Medical Association for the Prevention of War.

50 years of College membership

As part of the RANZCP Membership Recognition Program, we acknowledge the contributions to the College and the profession from the following Fellows, who reached the milestone of 50 years of College membership in 2017.

- Dr Andrew Bennett
- Dr Basil Cameron
- Dr Edward Cole
- Dr Mark Cunningham
- Dr Robert Gordon
- Dr Daniel Kahans
- Dr Bartholomew Klug
- Dr Alan Large
- Dr David Lonie
- Dr Norman Rose
- Dr Michael Spelman
- Prof John Werry
RANZCP awards

Each year, the College presents a variety of awards to acknowledge outstanding achievements in psychiatry, to recognise excellence in psychiatric research and training or to encourage new and emerging researchers.

The following awards were conferred at Congress in Adelaide, South Australia, in April 2017.

The College Medal of Honour
The College Medal of Honour was conferred on Professor Ernest Hunter. This is the RANZCP’s highest and most prestigious award and is presented only for distinguished and meritorious service to the College.

College Citations
The College Citation was awarded to two Fellows in 2017: Professor David Ames for his achievements in the field of old age psychiatry; and Professor Bruce Singh for his distinguished service to psychiatry and mental health services.

The Ian Simpson Award
The Ian Simpson Award was presented to Professor Paul Mullen for his outstanding contributions to forensic psychiatry, in particular the clinical understanding of stalker behaviour, jealousy, violence and psychosis and sexual offending, and the role of mental health services in their management.

The Maddison Medallion
The Maddison Medallion was awarded to Dr Steven Moylan. This award recognises and encourages excellence in the study of psychiatry throughout Fellowship training and examinations.

The Margaret Tobin Award
The Margaret Tobin Award was presented to Professor David Crompton for his significant contribution to administrative psychiatry in Australia and New Zealand over the preceding five years.

The Mark Sheldon Prize
The Mark Sheldon Prize was awarded to Ms Phyllis Tangtu and recognises continuing and outstanding contributions to indigenous mental health in either Australia or New Zealand.

The RANZCP Senior Research Award
The RANZCP Senior Research Award was presented to Professor Michael Breakspear in recognition of his significant contribution to psychiatric research in Australia and New Zealand over the past five years.

The RANZCP Early Career Psychiatrist Award
The RANZCP Early Career Psychiatrist Award was conferred on Dr Scott Clark. The award encourages early career psychiatrists by recognising excellence in research conducted by a trainee or newly-admitted Fellow.

The Addiction Psychiatry Prize
The Addiction Psychiatry Prize was awarded to Dr Kelly Ridley. This prize encourages achievements and excellence in addiction psychiatry.

The Connell Werry Prize
The Connell Werry Prize was awarded to Dr Lakshman Ratnamohan. The prize honours Dr Helen Connell and Professor John Werry who were pioneers in the field of child and adolescent psychiatry in Australia and New Zealand.

The Medlicott Award
The Medlicott Award was presented to Dr Caleb Armstrong. The award was established in honour of Professor Emeritus Reginald Medlicott and recognises meritorious research in the field of forensic psychiatry.

The Faculty of Psychotherapy Research Award
The Faculty of Psychotherapy Research Award was presented to Dr Lakshman Ratnamohan. The award was established to encourage research in psychotherapy among psychiatry trainees and recent Fellows in Australia and New Zealand. The award is presented to facilitate research projects in psychotherapy.

Faculty of Psychotherapy Essay Prize
The RANZCP Faculty of Psychotherapy Essay Prize was awarded to Dr Lara Gallur. The prize was established to recognise and encourage research in the field of psychotherapy and is awarded for the best essay submitted by a psychiatry trainee or recent Fellow on a psychotherapy topic.

The Faculty of Psychiatry of Old Age Best Mental Health Service Improvement Prize
The Faculty of Psychiatry of Old Age Best Mental Health Service Improvement Prize was awarded to Dr Jacqueline Huber. This prize is awarded to a mental health service that has demonstrated a significant improvement focused on the needs of older people with mental illness.

The Faculty of Psychiatry of Old Age Psychiatric Trainee Prize for Scholarly Project
The Faculty of Psychiatry of Old Age Psychiatric Trainee Prize for Scholarly Project was awarded to Dr Meagan Ramages for the best scholarly project focused on issues relevant to psychiatry of old age.
In the first six months of my presidency of the RANZCP, I have been struck by the breadth of work the College undertakes, not only in the core business of training psychiatrists and representing and advocating for our members, but also by the role we play in providing an expert voice on mental health.

Through our advocacy work the College is involved in some of the biggest issues confronting our society – in 2017 alone we have commented on the marriage equality debate, the mental health of asylum seekers and refugees, the plan to drug test welfare recipients, voluntary assisted dying, and the inequities in private health insurance for psychiatric cover.

It is with all this in mind that we began work on developing our new Strategic Plan 2018–2020. During 2017 we held several workshops which enabled the Board to finetune and enunciate our vision and priorities for the next three years. These are grouped under three broad purposes; to advance the profession of psychiatry through the delivery of best practice training, continuing professional development and high quality psychiatric care; to improve the mental health of communities by working with stakeholders to support high quality psychiatric care; and to meet the needs and expectations of members to enhance the value of their membership while ensuring the sustainable growth of the College.

During 2017 we made significant progress with our Reconciliation Action Plan (RAP) with most of our targets either being met, or on track to be met, which included convening a forum of trainees and Fellows identifying as Aboriginal and/or Torres Strait Islander to discuss how the College can best provide support. Our RAP adds to the College’s effort in advocating for, improving the health of, and increasing meaningful engagement with all Aboriginal and Torres Strait Islander peoples. I also had the great pleasure of participating in the Council of Medical Colleges’ signing ceremony with the federal government for agreement to improve Indigenous health – an outcome of a roundtable meeting with the Minister for Aged Care, the Hon Ken Wyatt AM, MP.

A comprehensive review and updating of the RANZCP Code of Ethics was also completed and approved by the Board in November 2017. The Code of Ethics commits psychiatrists to the highest ethical standards which contributes to patient-centred care, promotes recovery and endeavours to reduce the stigma often associated with mental illness.

A detailed proposal to expand the RANZCP Foundation was developed and approved by the Board in 2017. The Foundation will continue to maintain a significant focus on supporting and developing early career researchers, building academic capacity and encouraging more psychiatrists and trainees into research.

The College continued to represent psychiatrists on the world stage and I had the pleasure to represent the RANZCP at the World Psychiatric Association Congress in Berlin, the Royal College of Psychiatrists Congress in Edinburgh and the International Conference on Residency Education in Quebec. These events provide us with the opportunity to present the work of the College and Australian and New Zealand psychiatrists more generally and also gives us occasions for networking and for learning about what is happening in psychiatry throughout the world.

Over the years the College has made determined efforts to turn its focus to our near neighbours in the Asia–Pacific region. Our Strategic Plan clearly enunciates this as a priority by highlighting the importance of further developing positive relationships with mental health organisations regionally and internationally, especially in this region. In June 2017 I attended the Japanese Society of Psychiatry and Neurology (JSPN) Annual Meeting where, on behalf of the College, I presented on psychiatry training in Australia and New Zealand at the RANZCP/JSPN joint symposium on the development of education and training in psychiatry in the Pacific Rim region.

Our involvement in the Asian Federation of Psychiatric Associations (AFPA) is an important regional relationship and presents many opportunities for collaboration as does the Tri-Nations Alliance, an alliance of the Royal College of Physicians and Surgeons of Canada, the Royal Australasian College of Physicians, the Australian and New Zealand College of Anaesthetists and the RANZCP. A new project for the College has been the invitation by the Royal College of Surgeons (RACS) to participate in its Pacific Islands Program whereby psychiatrists visit the Solomon Islands. I was particularly delighted by the interest from Fellows in this program with expressions of interest received from 82 Fellows.

Given the success of our Congress in Hong Kong, the College is currently working on plans for another Congress in Asia in the next few years.

We continued our strong engagement with governments over the year, including meetings with ministers and shadow ministers across the portfolios of health, mental health, Indigenous health, veterans’ affairs, and immigration and border protection. We also met with senior public officials and bodies including Australia’s Chief Medical Officer, Medicare Benefits Schedule Review Taskforce, Australian Digital Health Agency, Australian Commission on Safety and Quality in Health Care, and the National Mental Health Commission.

The College, as one of the Governor General’s patronage organisations, was invited to participate in the 2017 Government House Open Day in Canberra where approximately 5,000 people attended, allowing the College an excellent opportunity to promote our new website Your Health in Mind.

I would like to express my thanks to the Board, CEO and staff of the College for all their hard work in 2017 and for their assistance to me in transitioning into the role of President.
It was another productive year for the College with a number of initiatives successfully completed. One of the most significant of these was the launch of the Your Health in Mind website at the Annual Congress in Adelaide.

We were pleased to learn that the federal government will continue to fund the Psychiatry Interest Forum (PIF), which progresses initiatives to help address the current and future shortfalls in Australia’s psychiatry workforce, including strengthening our strategies to recruit, support and retain psychiatrists in both the Indigenous and rural and remote workforce.

The College was busy on the advocacy front in 2017, with more than 135 submissions submitted to government inquiries and five position statements published on a range of topics including mental health legislation, private health insurance, asylum seekers, and the confidentiality of patient records. Much of this work was picked up by the media which is reflected in the significant increase in media mentions and social media followers in 2017: we doubled our social media followers to over 10,500 and our media mentions tripled to more than 2,700.

We worked closely with our trainees over the year on the production and dissemination of the trainee and SIMG welfare support orientation handbook Stay informed and on track. This was complemented with a series of three animated videos to assist trainees to stay the course throughout the training program, with tips on stress reduction, preventing burnout and promoting a healthy career-life balance. Furthermore, the introduction of the Member Welfare Support Line has provided an additional confidential support service that complements the resources available to support member wellbeing.

During the year the College also began the development of an online training portal, InTrain, which will move the College from a paper-based system to online administration of the training program. InTrain is an accessible, user-friendly system that will provide greater transparency of trainee progression, improved reporting capability, and a greater capacity for the College to support trainees and Fellows involved in training.

In 2017 the College ensured that each Australian Branch and the New Zealand National Office had enhanced policy support either via assistance from Head Office or through the employment of local policy officers. This extra support assisted with submissions and policy development on state-based issues and inquiries which has further advanced our advocacy work. We began developing a member logo, which is designed to provide Fellows with a visual means to identify their Fellowship of the RANZCP and to promote broader recognition of the FRANZCP post nominals.

This year we also farewelled our President Professor Malcolm Hopwood and welcomed our new President Dr Kym Jenkins. I would like to sincerely thank them both and the Board for their guidance and service, and acknowledge all members who contribute enormously to the College through their work on committees, position statements and a host of other related matters. I would also like to express my appreciation to the College staff for their commitment and work.
Throughout 2017, the Board led the College through another significant year of implementing key strategic priorities and further enhancing the visual identity and profile of the College.

Professor Malcolm Hopwood’s presidential term expired in May 2017. Professor Hopwood was the first directly elected president of the College and the Board is most grateful for the work and commitment he provided during his term. We welcomed Dr Kym Jenkins and Associate Professor John Allan into the roles of President and President-Elect for 2017–2019. In October, nominations were called for five 2018–2020 Elected Directors of the Board, which will be voted on by the membership in early 2018.

During the year, the Board met seven times in various locations in Australia and New Zealand and twice via teleconference to discuss urgent matters. During each face-to-face meeting, the Board had the opportunity to engage and discuss matters of local importance with the Chairs and members of the relevant Australian Branch and New Zealand National committees. Meetings of the Membership Advisory Council (MAC), held in May and November, provided further engagement between the Board and Faculties, Sections, Australian Branch and New Zealand National committees, and other representative groups of the College.

The Board met for a half-day strategic planning discussion in August, where the main focus was the draft 2018–2020 RANZCP Strategic Plan. Throughout the year, the Board was considerably involved in the development of the College’s next Strategic Plan and, with the support of the CEO and management, undertook an evaluation of the current 2015–2017 Strategic Plan, identified key achievements and priorities for the next three years, sought the views of the membership and MAC, and endorsed the final draft in November.

The RANZCP’s Code of Ethics was comprehensively reviewed and updated. Following endorsement by the Board, the review was supported by the membership during the Annual General Meeting at Congress in May. The Your Health in Mind website and its fact sheets providing information on psychiatry and mental health were developed and launched.

The College continued its work in the important area of member welfare with the implementation of the confidential Member Welfare Support Line and development of role descriptions for its Support Fellows, as well as the establishment of the Member Welfare Committee, all of which involved detailed discussion and approval from the Board.

Throughout the year significant policy developments were discussed in detail at Board meetings. The Board endorsed new position statements that were produced on many topics, including public insurance schemes, advocating for mental injury claimants, involuntary mental health treatment in custody, mental health legislation and psychiatrists, and private health insurance policies for psychiatric care in Australia. The Clinical Memorandum on the use of ketamine for treating depression was updated and Clinical Practice Guidelines for the treatment of panic disorder, social anxiety disorder and generalised anxiety disorder, were developed.

The Professional Practice Guidelines on national codes and standards relevant to psychiatry practice and mental health services in Australia and New Zealand, and a final report on the Victorian Psychiatry Attraction, Recruitment and Retention Needs Analysis Project were supported by the Board and published.

Two new College networks were established and their Terms of Reference endorsed. The Board looks forward to the implementation of the Psychiatry and Family Violence Network and the Military and Veterans’ Mental Health Network.

Regulations and/or Terms of Reference for the Branch Training Committees and New Zealand Training Committee, Committee for Training, Tasmania STP Project Working Group, and the Investment Subcommittee were updated and approved.

The North Queensland Members’ Advisory Group was established to assist the Queensland Branch Committee to enhance its engagement and support of members in the northern part of the state.

A number of education policy and regulation updates, as well as new developments, occurred in the areas of: leave and interruptions to training, and part-time training; Stages 1, 2, and 3 of the training program; Entrustable Professional Activities (EPA); substantial and partial comparability; targeted learning, progression through training and failure to progress; and workplace-based assessments, OSCEs and written examinations.

The future locations of the RANZCP Annual Congress were confirmed. It will be hosted in Cairns in 2019, Hobart in 2020 and Sydney in 2022. The Board considered a potential location for hosting another international Congress in 2021, which will be finalised in early 2018.

There are more changes ahead for the Board in 2018, with the upcoming Board (Elected Director) elections, while we continue to lead and implement the College’s strategic activities. On behalf of the Board, I would like to thank the many members and staff who contribute to the ongoing success of the College.

Dr Kym Jenkins
President

Board members
- Dr Kym Jenkins, President
- Associate Professor John Allan, President-Elect
- Dr Margaret Aimer, Elected Director
- Professor David Castle, Elected Director
- Associate Professor Saji Damodaran, Elected Director
- Dr Peter Jenkins, Elected Director
- Dr Nick O’Connor, Elected Director

Contact: board@ranzcp.org
Audit Committee

The Audit Committee is a constituent committee of the Board and its primary objective is to oversee and monitor the College’s audit processes, including the internal control activities.

RSM Australia Partners conducted the audit of the College’s 2017 annual financial report and the College achieved a pleasing result with an operating surplus of $1.83 million. The College has continued to engage RSM Australia Partners as the external auditor since their appointment during the change-of-auditor process that took place in 2015. Each year the audited financial report, including the auditor’s report, are presented to College members at the Annual General Meeting.

The College is endorsed by the Australian Taxation Office (ATO) for charity tax concessions including income tax exemption. The ATO recommends that a yearly self-review of status be undertaken by organisations endorsed for charity tax concessions. The College has adopted the ATO recommendation and conducted the annual self-review of College structure and operations during the year. Based on the outcome of the self-review, the Audit Committee has concluded that the College remains compliant with the ATO endorsement for charity tax concessions.

Associate Professor John Allan commenced in the role of Committee Chair in May 2017 following his election to President-Elect, taking over from previous Chair Dr Kym Jenkins, when she stepped into the role of President. The committee welcomed new members Dr Peter Jenkins and Dr Nick O’Connor.

The priorities for the Audit Committee for 2018 include reviewing the outcome of the audit of the 2017 annual financial report and overseeing the audit process for the following year.

Chair, A/Prof John Allan

Committee members
- A/Prof John Allan
- A/Prof Saji Damodaran
- Dr Peter Jenkins
- Dr Nick Judson
- Dr Nick O’Connor
Corporate Governance and Risk Committee

Several major projects were undertaken by the Corporate Governance and Risk Committee (CGRC) in 2017. These included:
- preparation for the 2018 Board (Elected Directors) election
- revision of the RANZCP Constitution
- review of the President Support Model
- review of the College risk review timetable
- evaluation of the diversity of the Board
- commencement of the mapping of communication and governance processes between Branch, Faculty and Section committees
- establishment of an induction pack for committee Chairs and members
- revision of the procedure for appointing trainees to College committees.

One of the CGRC’s major areas of activity in 2017 was the revision of the RANZCP Constitution. The revisions were primarily administrative changes and included previous RANZCP Board decisions and clarification of cessation of membership.

Specific amendments included:
- inclusion of International Corresponding Membership
- inclusion of ‘suspension of membership’
- differentiating the New Zealand National Committee in recognition of its national status
- clarifying that Exemption from Fees can only be given to Fellows who have reached 65 years of age and been a Fellow of the College for at least 30 years
- inclusion of the Australian Charities and Not-for-profits Commission in recognition of the College’s charity status
- removal of the Article in relation to Cessation of Office of a Director, as this was inconsistent with Articles pertaining to the election and appointment of Directors.

These amendments were submitted for voting and carried at the Annual General Meeting in May 2017. As 2017 drew to a close, seven nominations were received for the five Elected Director positions, which fall vacant in May 2018.

Education Committee

A number of key initiatives were progressed by the Education Committee during the year.

Supportive technology and online learning

My CPD was released; this new system allows members to log their CPD claims online rather than submitting claims by post. In addition, My CPD automatically picks up CPD hours for completion of Learnit modules. A video tutorial, How to use My CPD, has been made available on Learnit.

Over the course of 2017, 16 new modules (resources with multimedia content) were developed for Learnit and eight webinars (web-based seminars) were delivered live and then uploaded to Learnit for on-demand access. Twenty presentations from Congress 2017 have also been made available in Learnit.

An implementation project for a new training administration system, InTrain, commenced early in the year. The first release of InTrain is planned for 2018.

Continuing professional development

The new, mandatory CPD program was launched and the annual audit of CPD records has concluded. The scoping of phase two of My CPD has commenced, which will increase the autonomy of Peer Review Groups.

The training program

The rollout of Stage 3 and Certificates of Advanced Training has been completed, meaning the first cohort of trainees will have undertaken all training requirements under the 2012 program, with the first possible Fellowships awarded in December 2017.

299 candidates sat the Objective Structured Clinical Exam (OSCE). In response to an increasing number of trainees entering the program, a modified OSCE circuit has been developed which will be implemented from the April 2018 OSCE.

Data collection to evaluate Stage 3 of the training program commenced in November 2017 and the Admission to Fellowship survey content has been revised to reflect the fact that new Fellows will have undertaken competency-based training henceforward.

The annual report to the Australian Medical Council (AMC) took the form of a Comprehensive Progress Report in 2017. This was submitted in August 2017.
Finance Committee

The primary objective of the Finance Committee is to act as an advisory body to the Board in relation to statutory and contractual compliance and financial strategy reporting.

The College achieved a good result for the financial year with an operating surplus of $1.83 million. The favourable outcome reflects better-than-expected income from College operations and activities, unrealised gains on investments and savings from various operating expenses such as travel and meetings costs.

The Finance Committee undertook the following key responsibilities in 2017:

- reviewed the mid-year operating results forecast for the 2017 financial year and the draft annual budget for the 2018 financial year, made recommendations and submitted the forecast and budget to the Board
- served as an independent and objective party to review financial information including annual accounts and accounting policies and practices presented by management to the Board for presentation to College members and regulatory authorities
- provided oversight of College financial management. During the year, the Finance Committee reviewed and considered various business cases that were submitted requesting funding for a range of initiatives. The proposals endorsed by the Finance Committee and approved by the Board included the Queensland Branch office reconfiguration and the development of the second phase of the College’s online continuing professional development (CPD) portal and release 2 of inTrain, the College’s new training management system.

The President Dr Kym Jenkins joined the committee as a member and, following the committee elections, the Finance Committee welcomed new members Dr Prasoon Gupte and Dr Vinay Lakra.

Membership Engagement Committee

The Membership Engagement Committee (MEC) has broad, high-level oversight of membership engagement activities, including providing advice on appropriate strategies for effective communication and engagement with members. Following a review in 2016, in 2017 the Board refined the MEC’s responsibilities to assist the MEC to better represent the views of members and action key issues of importance to members, and to enable a greater focus on welfare and support and the recognition of members’ contributions and achievements.

The MEC progressed a number of initiatives reflective of the College’s commitment to providing more support to psychiatrists and trainees and enhancing the value of College membership:

- Established a new Member Welfare Committee to assume ongoing responsibility for the College’s member support and welfare programs. The Member Welfare Support Line was also launched, providing a dedicated, confidential support line for all College members.
- Held a symposium focusing on transitioning to retirement, in conjunction with the Faculty of Psychiatry of Old Age, during the May 2017 Congress. The MEC has given in-principle support to the development of a network to support later career psychiatrists, which will be progressed in 2018
- Reviewed new technologies in order to expand the suite of communication channels used to engage members in 2018. Strategies will be developed to support engagement across social media platforms, as well as revitalising the current online forums
- Launched a comprehensive membership benchmarking survey to better understand and measure membership engagement. The MEC looks forward to sharing the results from the survey with members in 2018.

The MEC welcomes the opportunity to discuss issues with members, and all members are encouraged to provide comments, feedback and suggestions via board_mec@ranzcp.org.

Committee members

» Dr Agnew Alexander
» A/Prof Saji Damodaran
» Dr Prasoon Gupte
» Dr Kym Jenkins
» Dr Vinay Lakra
» Dr Sue Mackersey
» Dr Peter Wynn Owen

Chair, Associate Professor Saji Damodaran

Chair, Professor David Castle

Committee members

» Dr Andrew Amos
» Dr Nicola Beamish
» Dr Prachi Brahmbhatt
» Prof David Castle
» Dr Alice Chang
» A/Prof Saji Damodaran
» Dr Susanna Galea-Singer
» Dr Stephen Kisley
» A/Prof Beth Kotze
» Dr Virginia Loftus
» Dr Tony Muller
» Prof Sarah Romans
» Dr Choong-Siew Yong

Continued overleaf
Practice, Policy and Partnerships Committee

The Practice, Policy and Partnerships Committee (PPPC) oversees six committees: Committee for Professional Practice; Committee for Therapeutic Interventions and Evidence-Based Practice; Committee for Research; Committee for Aboriginal and Torres Strait Islander Mental Health; Te Kaunihera (Committee for Māori Mental Health); and the Community Collaboration Committee. Where needed, specific working groups are established to meet committee objectives and during 2017 these included: the Medical Benefits Review Taskforce Working Group; the Confidentiality of Records Working Group; and the Private Practice Resources Working Group.

During 2017, the PPPC:

» completed more than 135 submissions at national and Branch level on priority policy topics including pre-budget and pre-election submissions
» published new position statements on private health insurance, public insurance schemes and involuntary mental health treatment in custody, and updated the College’s position statement on problem gambling
» advocated for reforms to evidence law and court processes to protect the confidentiality of clinical records, including writing to law societies and other legal bodies at national and jurisdictional levels
» published a literature review and new position statement on Mental health legislation and psychiatrists: putting the principles into practice
» published practical resources for psychiatrists to establish and run a private practice
» published new guidelines on national codes and standards relevant to psychiatry practice and mental health services
» launched new guides for the public on bipolar disorder, borderline personality disorder, depression and schizophrenia
» delivered on the College’s Reconciliation Action Plan 2016–2018
» awarded $32,200 in research grants.

Initiatives progressed in 2017 for completion in 2018 include: review of the RANZCP’s Code of Ethics; development of new clinical practice guidelines for anxiety; guidelines for the administration of electroconvulsive therapy; an issues paper on the role of psychiatry in counterterrorism; and workforce benchmarking.

During the year, 95 Fellows, 10 trainees and 32 community members have directly participated on the PPPC, its constituent committees and working groups. Hundreds more members have contributed to submissions, policies and guidelines. I hope that all members and the community will benefit from this work.

I would like to acknowledge all members of the PPPC, its committees and working groups, and the RANZCP staff for their excellent support.

Committee members

» Dr Margaret Aimer
» Dr Sarah Brick
» Dr Susanna Galea-Singer
» Dr Peter Jenkins
» Ms Eileen Lavranos
» Dr Jason Lee
» Dr Lynda Matthews
» Dr Rod McKay
» Dr Murray Patton
» Dr Edward Petch
» Ms Louise Salmon
» A/Prof Dan Siskind
» A/Prof Geoffrey Smith
» Dr Rees Tapsell
The College conducts advocacy through a range of mediums – by developing position statements, submissions and appearances at government inquiries, by meeting with governments, senior public servants, other medical colleges and mental health organisations, and through media and social media engagement.

However, it is not just the public and the media who are turning to us for information, but the requests for the College to attend high-level meetings and put in submissions to inquiries across Australian jurisdictions and in New Zealand have increased enormously. In 2017 alone the College was asked to provide submissions to a number of government inquiries and we were able to respond to 138 of these. In many cases the College was also asked to appear at the public hearings of these inquiries.

The subject of these inquiries varied widely from e-cigarettes, drug testing of welfare recipients, and the state of Tasmania’s acute health services. These submissions undergo considerable work and they do have positive, measurable results. The issue of private health insurance was one example where the College had been concerned for some time about private health funds continuing to restrict and limit cover for psychiatric care. Early in 2017 the College published a position statement and was widely quoted in the media including a feature article in Choice magazine in June. Following this, the College put in a submission and appeared before the Senate inquiry into the value and affordability of private health insurance and out-of-pocket medical costs. In August the College met with the Australian Private Hospitals Association’s psychiatry group and, in part due to our continuing advocacy, the government announced reforms, including the ability of patients with limited mental health cover to be able to upgrade their cover to access in-hospital mental health services without serving a waiting period.

Another important issue the College has been advocating strongly for is the mental health and wellbeing of military veterans. Given the lifelong risks of participation in military service, it is crucial that strategies be promoted to support the mental health and wellbeing of veterans. Multiple submissions have been delivered this year and the President, Dr Kym Jenkins, met with the Minister for Veterans’ Affairs and Defence Personnel, The Hon. Dan Tehan MP, early in September. The College is currently drafting a position statement on the mental health of veterans and defence force members, which will provide recommendations on how governments can assist in improving mental health outcomes for veterans and defence force members. A new Military and Veterans’ Mental Health Network, across Australia and New Zealand, is also being developed by the College.

After the success of our advocacy campaign on the physical health of people with severe mental illness, in 2018 we will embark on a new campaign and turn our attention to alcohol misuse and mental health.

Examining the 2017 media mentions of the College (2744 in all) shows the breadth and diversity of topics where a psychiatrist’s view is valued. In the last year the College has commented on a wide range of issues such as reporting the radicalisation of patients, the seclusion of youth in facilities in the Northern Territory, marriage equality, and the mental health of asylum seekers. More traditional topics have also been requested including the use of TMS and ECT, lithium and bipolar disorder, and the shortage of rural psychiatrists.

Australian psychiatrists are urging lawyers to stop using mental health records as weapons during legal proceedings. The Royal Australian and New Zealand College of Psychiatrists says courts are granting too many applications for the release of patient records. They fear it’s making vulnerable people wary of seeking their help.

‘Subpoenas are designed to serve the public by bringing all the relevant evidence before a court, but when they are misused as an abuse of the legal process they threaten the public interest and damage people’s lives,’ RANZCP Board member Dr Peter Jenkins told ABC radio in May 2017.

‘Patients can be exposed to a range of harms including feelings of shame, stigma and helplessness when sensitive clinical records are disclosed without their consent. This can result in patients being re-traumatised, and in vulnerable patients restricting the sharing of information that psychiatrists need to ensure their proper diagnosis and treatment,’ he said.

In advocating for patients’ rights in this area, the College uses a range of strategies, including a session at the Adelaide Congress, media promotion and disseminating Position Statement 89: Patient–psychiatrist confidentiality: the issue of subpoenas, throughout the legal fraternity.
The Members’ Advisory Council (MAC) provides information and advice to the Board on a variety of issues and acts as a forum for members to raise and discuss issues or provide feedback relevant to the College or mental health.

With representation from all Branches, Faculties, Sections and the New Zealand National Committee, as well as the College’s community, Aboriginal and Torres Strait Islander and Māori mental health committees, the MAC meeting discussions were wide ranging and enthusiastic.

The MAC met twice in 2017 and key topics included:

- development of the 2018–2020 Strategic Plan
- engagement with Primary Health Networks (Australia) and Primary Health Organisations (New Zealand)
- access to psychiatrists
- clinical leadership
- College assessments and the training trajectory
- emergency departments and psychiatry
- workforce shortages, maldistribution and planning
- clinical records
- MBS Review
- veterans’ and military mental health
- effective pre-budget submissions to government
- Indigenous workforce.

A separate meeting of the College’s Branch and New Zealand National Committee Chairs, prior to each MAC meeting, provides an invaluable experience and shared learning opportunity.

Issues identified during MAC meetings for the Board’s further discussion are tabled at subsequent Board meetings. They are progressed as a priority by the College’s senior management group, chaired by the Chief Executive Officer, with feedback to and consultation with the wider membership as appropriate.

On behalf of the Board I would like to acknowledge the important role played by the MAC in 2017 in raising issues for discussion, providing advice to the Board and representing the views and interests of the wider membership.

### Committee members

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<th>Dr Margaret Aimer</th>
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Trainee Representative Committee

The Trainee Representative Committee (TRC) welcomed seven new members in 2017, representing over 1,500 RANZCP trainees or approximately 25% of College membership. We would like to thank everyone involved for their dedicated work supporting trainees.

The TRC contributed to the Australian Medical Council’s (AMC) five-yearly RANZCP review, highlighting issues affecting trainees and acknowledging positive endeavours by the College regarding trainees. The TRC continues to work with the Education Committee around issues concerning the 2012 training program, including delayed trainee progression and the psychological and financial burden of assessment affecting trainee welfare, with plans for further data collection.

Trainee welfare remains a top priority, with the TRC’s Welfare Interest Group producing a discussion paper exploring perceived gaps in trainee welfare and potential solutions. The TRC sees scope for improvements through the College becoming more active in systems issues that individual trainees and local APTs have little influence over, such as patient-to-staff ratios. The TRC thanks the College for its ongoing commitment to trainee welfare and is grateful for Dr Kym Jenkins’ guidance.

The TRC is working with the Corporate Governance and Risk Committee (CGRC) on an alternative TRC structure to better support the ability to represent trainees effectively. Due to workload and the burden of assessments in the senior years of training, the TRC Chair changed mid-term from Dr Kim to Dr Graham.

The TRC continues to advocate for changes to mandating rural rotations in NSW and is actively supporting training issues in Tasmania. Other concerns include difficult access to subspecialty terms and indirect discrimination against women in their child-rearing years during training. The TRC remains involved in organising trainee activities at Congress, and regular updates keep trainees informed about the TRC’s work and achievements. The TRC looks forward to continuing to work closely with the College committees and staff, pursuing our commitment to effect change and be the voice of RANZCP trainees.

Committee members

- Dr Reece Bretag-Norris
- Dr Sarah Brick
- Dr Judith Clarke
- Dr Cameron Cole
- Dr Alexandra Dunne
- Dr Amro El Sholkani
- Dr Rebecca Graham
- Dr Jessica Green
- Dr Peter Huang
- Dr Izak Lim
- Dr Hannah Kim
- Dr Jan-Paul Kwakasik
- Dr Tony Muller
- Dr Melissa Renzenbrink
- Dr Shuichi Suetani
- Dr Kane Vellar
- Dr Melissa White

Deputy Chair, Dr Hannah Kim

Chair, Dr Rebecca Graham
Overseas Trained Psychiatrists Representative Committee

The Overseas Trained Psychiatrists (OTP) Representative Committee election attracted great interest from new Fellows, and we welcomed multiple new representatives from Queensland, Western Australia and New Zealand, as well as individuals from Victoria, Northern Territory and New South Wales. The Committee continues to develop strategies to meet the needs of overseas trained psychiatrists.

Now that exemption candidates have a clear pathway to Fellowship, the Committee identified the need to increase the involvement in the College of Affiliates in New Zealand as well as new Fellows from specialist international medical graduate (SIMG) pathways in Australia. Working with the Membership Engagement Committee, the Committee continues to develop initiatives to welcome and better engage OTPs, including a welfare survey and regularly running events in each state to increase participation levels.

The health and welfare of OTPs prior to and after attaining Fellowship continues to be of importance, with the Committee recognising the need for a tailored survey addressing OTP welfare and workplace experiences. A working group is considering the use of a modified validated welfare assessment tool in conjunction with a stress or quality-of-life tool to produce publishable data. The Committee is also considering a broader OTP welfare project, with the scale and scope of the project being dictated by the outcomes of the survey.

Discussions are still ongoing regarding the 10 year moratorium restrictions on internationally trained psychiatrists, with the Board endorsing a recommendation that the College take an opposing position on the 19AB restriction of the Medicare Benefits Schedule.

I would like to thank the OTP Committee for their ongoing support and work on these important issues, and we look forward to continuing to represent the large number of overseas trained psychiatrists within the College.

Committee members

- Dr Emma Crampin
- Dr Susanna Galea-Singer
- Dr Gagan Garg
- Dr Sunanda Ghosh
- Dr Ettore Guaida
- Dr Yara Khedr
- Dr Suman Sinha
- Dr Annette Van Zeist
- Dr David Ward
- Dr Nader Yakoub
- Prof Carlos Zubaran Jr
Long work hours, high pressure, competitiveness, bullying – there are many contributing factors which can lead to doctors feeling stressed, emotionally challenged and burnt out. While positive steps to improve the working conditions of doctors have been taken – including larger breaks between shifts and reduced working hours – more action is still required to ensure the health, safety and wellbeing of doctors.

In her article in Australasian Psychiatry (Vol 25, Issue 4), RANZCP President Dr Kym Jenkins noted The Conversation’s report on a review of studies which found that doctors experience higher levels of mental distress than their non-medical peers, with male doctors at a 26% higher risk of suicide than the general population, and female doctors at a 146% higher risk.

The suicide of four junior doctors in 2016 shone a light on existing concerns surrounding the mental health of doctors and the contributing factors that led to these tragic deaths. ‘It has to be okay for doctors to say that they are struggling and that they need help without feeling they are putting their career in jeopardy,’ says Dr Jenkins. ‘There is much misunderstanding around mandatory reporting, with confusion around mental illness and impairment: consequently, in many jurisdictions, fear of being reported to the regulatory body is another barrier to seeking appropriate healthcare.’ The self-stigma towards mental illness in medical practitioners also needs to be addressed.

A psychiatrist is faced with a number of stressors across their career, from essays and exams during training, to managing staff or a private practice, with the nature of psychiatric practice proving particularly challenging. Managing aggressive or suicidal patients, for example, can affect the psychological wellbeing of a psychiatrist.

Dr Jenkins encourages doctors ‘to ensure that if we, or our colleagues, are experiencing stress, burnout, depression or any mental illness, that we do all we can to ensure that factors in the workplace do not worsen the situation and that access to appropriate help is facilitated.’ It is also important to remember that mental health issues can extend beyond the workplace. ‘Being a doctor, particularly a psychiatrist, does not render one immune to mental illnesses,’ she says.

The welfare and support of psychiatrists and trainees continues to be a top priority for the College. A 2014 study into the experiences and welfare of psychiatrists and trainees by the Membership Engagement Committee (MEC) led to the development of a Trainee Welfare Working Group. A range of resources has been developed for trainees including e-learning modules on self-care, an orientation handbook, and a pilot program for mentoring trainees.

A dedicated Member Welfare Support phone line has been established to assist members with stressors encountered throughout their career and in their personal life, including physical and mental health concerns, problems at work or with training, bullying and harassment, financial issues and relationship problems.

College members are encouraged to seek help if they are experiencing any issues, no matter how trivial they might seem. It is also important for doctors to look out for colleagues who may be undergoing a stressful period in their life, and to provide as much support as possible and refer them to the various resources available through the College and externally.

Member welfare resources
The College has created a number of welfare resources for members, including booklets, podcasts, webpages, online resources and links, self-care e-learning modules on Learnit, and a Member Welfare Support Line.

Top 5 self-care tips for psychiatrists
1. Have your own GP and have regular check-ups
2. Avoid self-prescribing
3. Recognise when you’re feeling stressed or burnt out
4. Build effective coping mechanisms
5. Maintain an effective support network.
Should I seek help?

If you are a psychiatrist, trainee or specialist international medical graduate facing health or personal issues, you are not alone. Many doctors face challenging issues such as depression and addiction, although few speak about them publicly. It is important to seek help, regardless of how trivial your issue may seem.

Examples of issues you might be experiencing:
- physical or mental health problems
- financial issues
- concerns with work or training
- dealing with complaints
- bullying or harassment
- relationship problems
- transitioning to being a consultant psychiatrist or retiring
- medico-legal matters.

If you are at risk of harming yourself or others, you should get help immediately.
- Call 000 in Australia or 111 in New Zealand
- Visit the emergency department of your nearest hospital
- Call Lifeline on 13 11 14 in Australia or 0800 543 354 in New Zealand.

Member Welfare Support Line

The College’s Member Welfare Support Line is a confidential support and advice service for all members experiencing issues affecting their physical or mental wellbeing.

Calls are answered by the service manager during business hours. If appropriate, you will be put in contact with a Support Fellow who will provide further support and can refer you to appropriate services.
New Zealand National Committee, 
Tu Te Akaaka Roa, report

The New Zealand National Committee, Tu Te Akaaka Roa, is committed to building relationships with external agencies and responding to submissions that have a significant impact on psychiatrists’ practice and consumers’ health outcomes.

During the year the Committee engaged with a number of key stakeholders, including the Minister of Health, the Ministry of Health, the Ministry of Education, Health Workforce New Zealand, the Medical Council of New Zealand, PHARMAC, the Accident Compensation Corporation, the Human Rights Commission, Te Pou, Matua Raki, Te ORA, the Association of Salaried Medical Specialists, the Office of the Film and Literature Classification, and Consumer New Zealand.

The Committee, supported by New Zealand-based members, made a submission to the Social Services Select Committee on the Children, Young Persons and Their Families (Oranga Tamariki) Legislation Bill. Members provided significant support in developing the submission and presentation on this complex issue.

The New Zealand National Committee, working collaboratively with the other New Zealand-based committees, has provided comprehensive responses to over 17 submissions. Major submissions, in addition to those mentioned, include providing feedback to Health Workforce New Zealand on their future investment proposal ‘Investing in New Zealand’s Future Health Workforce: Post-entry training of New Zealand’s future health workforce’ and the Ministry of Health’s ‘A strategy to prevent suicide in New Zealand’ and ‘Discussion document on the Mental Health Act and human rights’.

Other advocacy work carried out includes: developing partnerships with sector agencies to limit direct-to-consumer advertising; seeking to improve the access to insurance for individuals living with mental illness; working with the Equally Well collaborative to develop resources to support individuals requiring psychotropic medicines; and working with the district health boards to support a single electronic clinical record for individuals living with mental illness. The Committee has also raised its concerns with the implementation of the Substance Addiction (Compulsory Assessment and Treatment) Act 2017 with the Minister of Health.

Two additional New Zealand-based Faculty committees (Addiction Psychiatry and Consultation–Liaison Psychiatry) were established in 2017. The Addiction Psychiatry Committee has been very active in responding to requests from PHARMAC and Medsafe.

Working with the sector, the New Zealand National Committee will continue to advocate to improve health outcomes for those living with mental illness and to support the New Zealand membership.

Chair, 
Dr Mark Lawrence

New Zealand National Committee members
» Mr Hori Ahoniro
» Dr Margaret Aimer
» Dr Arran Culver
» Dr Rosie Edwards
» Dr Susanna Every-Palmer
» Dr Chris Gale
» Dr Susanna Galea-Singer
» Ms Dawn Hastings
» Dr Mark Lawrence
» Dr Jackie Liggins
» Dr Tony Muller
» Professor Sarah Romans
» Dr Adam Sims
» Dr Suman Sinha
» Dr Greg Spencer
» Dr Rees Tapsell
» Dr Hiram Thabrew
Australian Branch Committee reports

Australian Capital Territory

Chair, Associate Professor Jeffrey Looi

The ACT Branch is working collaboratively to overcome significant mental health service challenges. Fellows and trainees have been central to addressing the medical workforce issues.

The ACT Branch, Australian Medical Association ACT and the ACT branch of the Australian Salaried Medical Officers’ Federation (ASMOF) have been working with ACT public mental health services to address a critical workforce shortage that emerged in June 2017 and have been instrumental in driving a workforce plan. The ACT Branch estimates that as at November 2017 there were at most 8.75 FTE psychiatrists per 100,000 population in the ACT, well below the Australian average of 13.1 FTE/100,000 (Australia’s Future Health Workforce – Psychiatry report 2016). This figure includes 6.75 FTE/100,000 public sector psychiatrists (27 FTE). Preliminary estimates for the private sector show that there are no more than 2 FTE/100,000 (8 FTE). Health facility infrastructure and capacity is also an issue: data from the Australian Institute of Health and Welfare (2017) reveals that in 2014–2015, there were 18 mental health hospital beds per 100,000 people in the ACT; well below the levels in other Australian states.

The 2017 Annual Scientific Meeting was held successfully at Lake Crackenback, NSW, and Professor Steve Kisely was the keynote speaker. The Branch welcomed the 2017 RANZCP Travelling Scholar, Associate Professor Christopher Ryan to our mid-winter Branch dinner. Professor Julian Trollor will join us at the 2018 mid-winter Branch dinner as the RANZCP Travelling Scholar 2018, and the 2018 Annual Scientific Meeting will be held in Canberra.

I would like to acknowledge all ACT Branch members who steadfastly work to improve the mental health of our patients.

New South Wales

Chair, Dr Gary Galambos

The NSW Branch focused on three major advocacy areas in 2017.

Firstly, after determining from surveys that the psychiatric workforce morale is low and leadership capacity is poor, the NSW Branch collaborated with the Australian Medical Association (AMA) (NSW) and the Australian Salaried Medical Officers’ Federation (NSW) to advocate for all fifteen local health districts (LHD) in NSW to establish mental health service medical staff councils. These will provide an opportunity for improved engagement and communication between psychiatrists and LHD management, and enhance leadership capacity while improving retention of senior psychiatrists.

Secondly, we wanted to build capacity around consultation–liaison (CL) approaches within the private sector to improve access to psychiatrists. We joined a Public Health Network working group overseeing a pilot project, using a CL model to assist ten GP practices in Western Sydney. We discussed with the AMA the possibility of developing AMA items to support psychiatrists providing this treatment approach to communities and patients suffering access gaps, especially in outer urban and remote regions.

Thirdly, we identified mental health system redesign and integration as priority reforms. Emergency departments need major revisions to improve management of crisis presentations with mental disorder and behaviour disturbance. We joined a NSW Agency for Clinical Innovation committee relevant to that aim. Branch members worked with multiple stakeholders to progress statewide subspecialty system reform and consulted on statewide models for older people, youth suicide prevention and perinatal care. We continue to assist subspecialties with urgent needs.

The NSW Branch has had a year of incredibly vibrant activity including working on a growing volume of submissions, engaging with multiple stakeholders, presentation of the NSW Meritorious Services Award, hosting the annual dinner and planning a major renovation of Maddison House.
Northern Territory  
Chair, Dr Carolyn Little  

Although the Northern Territory Branch is the smallest branch of the College, we welcomed two new Fellows this year, bringing the total number to 18. There are currently 16 trainees and one trainee applicant, which is encouraging for the future of psychiatry in the Territory.

As part of the Branch’s commitment to providing continuing medical education to members, we held two events in 2017.

In conjunction with the Faculty of Psychiatry of Old Age, we hosted a Branch Educational Conference in mid-February, which was attended by trainees, psychiatrists, medical students and other health professionals. With the theme ‘Psychiatric care of older adults’, the topics covered by Dr Jane Casey, Dr Gary Cheung, Dr David Lie and Professor Brian Draper included general mental health assessment of older adults, cognitive and behavioural assessment, diagnosis of cognitive syndromes and therapeutic approach to severe behavioural presentations.

In early November Professor Jayashri Kulkarni, director of the Monash Alfred Psychiatry Research Centre (MAPrc), presented two talks on women’s mental health. Staff from the Top End Mental Health Service (TEMHS) and several specially invited general practitioners with whom the TEMHS has a close working relationship attended Professor Kulkarni’s dinner talk on 2 November. The following morning Professor Kulkarni gave a more focused talk to staff of the Mental Health Service in Darwin and, via videoconference, to the Central Australia Mental Health Service in Alice Springs. Both talks were very well received. Professor Kulkarni’s visit was funded in part by the Member Engagement Committee and by the RANZCP 2017 Travelling Scholar Program. We hope to have such visits regularly to maintain the profile of the College in the Northern Territory.

Queensland  
Chair, Associate Professor Brett Emmerson  

The Queensland Branch has had another productive year advocating on behalf of members and is pleased to announce that the Branch office’s expansion is complete. The Branch can now host larger member events in-house and is busy receiving bookings for 2018.

Following the recent state election we look forward to continuing to work with the re-elected government to ensure mental health is properly funded commensurate with Queensland’s needs. Throughout 2017 we met with the Health Minister, Shadow Health Minister, Chief Health Officer, Primary Health Networks, and the new Queensland Mental Health Commissioner. In particular, we have been writing submissions advocating for increased mental health services, safer hospitals for staff and patients, and more psychiatrists in Queensland.

Our annual Branch events were well received. The CME Weekend Conference held in Noosa in July was enjoyed by 122 delegates and featured many outstanding presentations based on the theme ‘Recovery on the coast: expert insights into addictions and psychiatry’. Likewise, the John and Alice Bostock Oration welcomed new Fellows in August, with 95 members and guests in attendance, including the RANZCP President and CEO.

As part of our commitment to increase engagement with stakeholders and the community, the Branch sponsored the media award at the 2017 Mental Health Achievement Awards. We then released a joint media statement with the Queensland Alliance for Mental Health and the Australian College of Mental Health Nurses, asking political parties in the state election to boost mental health funding.

I would like to thank the Branch Committee members, the Queensland Branch Training Committee, the Queensland Faculties and Sections, and the Branch office staff for their hard work and dedication throughout the year.

Continued overleaf
South Australia
Chair, Dr Michelle Atchison

South Australia has a stable Branch Committee with excellent links to, and regular input from, the South Australian Psychiatry Branch Training Committee, Ramsay Health, the Chief Psychiatrist and our state consumer/carer representative. The Branch Committee could not function without the tireless support of our Branch Coordinator, Trudy Lisk.

The Branch Committee has had a strategic focus on improving links with external agencies. This was supported through most of 2017 by a new Project Officer, and the quality of submissions from the SA Branch office improved considerably. Unfortunately, our Project Officer left in late 2017 but the College is advertising for a replacement. The utility of having a Policy Officer has certainly been shown for SA. Submissions around the SA Mental Health Strategic Plan, the new Royal Adelaide Hospital model of care for mental health and a pre-election submission for mental health were all well received.

The SA Branch has provided information, media spokespeople and Fellow support following the disturbing findings about the Oakden Older Persons Mental Health facility. We welcomed Dr Aaron Groves’ Oakden Report and fully support all of his recommendations. The Branch welcomed the opportunity to work with the Chair of the bi-national Faculty of Psychiatry of Old Age in responding to this dire situation.

Training in South Australia remains strongly supported, with some 25 applications for 14 training positions. Trainees continue to progress well through the College examinations, although we note with concern the low numbers that will fulfil the Scholarly Project requirements by the end of 60 months of training.

Tasmania
Chair, Dr Milford McArthur

The Tasmania Branch congratulates Dr Hannah Lake, Dr Liz Walker, Dr Deborah Latham and Dr Daya Sadiq who attained Fellowship this year. The Branch currently has 64 Fellows, one Affiliate and 23 Associates.

As part of our active continuing medical education (CME) program, a CME weekend workshop titled ‘Cradle to grave’ was held at Freycinet. Nine speakers and 35 members attended, including the then RANZCP President, Professor Mal Hopwood. The program covered diverse topics and members enjoyed the educational opportunities and collegiality of the weekend.

The continuing dedication of our Director of Training, Dr Stephane Auchincloss, and the high quality of the Tasmanian training program is evidenced by the fact that all trainees, who sat for the various exam components, passed. Thanks also to the Fellows who provided supervision and support to our trainees during the year.

The Branch made a detailed submission to the Tasmanian Legislative Council Inquiry into Acute Health Services in Tasmania and followed up on this, with three Fellows giving evidence. At the inquiry, the Branch advocated for the retention of locally trained psychiatrists, recruitment of permanent psychiatrists to the north-west, north and southern regions of the state, and working towards the return of full College accreditation to those areas where it is reduced or absent.

The Branch also advocated for the building of a fit-for-purpose contemporary psychiatric unit on site at the Royal Hobart Hospital (RHH). This unit should also be a tertiary, statewide teaching psychiatric hospital which could appropriately serve the future needs of Tasmania. We also advocated for a contemporary short-stay unit, a mother and baby unit, and a child and adolescent unit as part of the RHH Masterplan for redevelopment.

Finally, my thanks go to our hard-working Branch Committee members, to our Branch Administrative Officer, Christine Walker, who has completed 15 years in the role, and to Karen Bevis, STP TAS Project Officer who has seamlessly taken over the role of coordinating and reporting on all CME and Formal Education Course activities.
Victoria
Chair, Associate Professor Richard Newton

The Victorian Branch has had a productive 2017, beginning with the dinner for new trainees, followed by the second Vic Family Violence Working Group Roundtable, led by Dr Manjula O’Connor. Other educational highlights include the Branch conference held in Marysville and the third RACGP/RANZCP (Vic) workshop on family violence. In November, the Branch hosted the reinstated new Fellows dinner.

The Branch continued its support of the Enabling Supported Decision-Making project and the finalisation of the Victorian Psychiatry Workforce project, both managed by the College’s Practice, Policy and Partnerships (PPP) department. The workforce project has generated interest both within the state and as a template for other Branches.

In 2017, the Branch provided the following submissions; inquiry into the Drugs, Poisons and Controlled Substances Amendment (Pilot Medically Supervised Injecting Centre) Bill 2017; WorkSafe Victoria’s review of activity investigations; Response to Safer Care Victoria’s scoping paper on clinician engagement and draft clinical network framework; inquiry into Perinatal Services; ‘Simplifying medical treatment decision-making and advance care planning’ position paper; Health Legislation Amendment (Quality and Safety) Bill 2017; and the Voluntary Assisted Dying Bill 2017.

The Branch continues to attend regular meetings with the Department of Health and Human Services – Mental Health and has also been providing support and feedback regarding recent changes affecting the Victorian Doctor’s Health Program and is actively involved in the development of the assisted dying legislation. This year we incorporated a consumer member and maintained strong relationships with trainee representatives.

In closing I would like to thank the Branch Committee, including executives Drs Astha Tomar and Kerryn Rubin, and Jacki Lindsay and the PPP department, specifically Bronwen Evans, for their support of Branch activity.

Western Australia
Chair, Dr Elizabeth Moore

2017 has seen a strengthening of the advocacy work undertaken by the Western Australia Branch.

Within the Department of Health, Health Service Boards have led to a more fragmented set of clinical services, and the inequities of access are becoming more marked. With the loss of psychiatric expertise at the higher leadership levels, the united voice of the WA Branch, together with the state Faculty and Section leaders, is essential in the debate about resource allocation and future planning of services and workforce needs. The Branch has emphasised the increased effectiveness and efficiency that can be gained from appropriately skilled governance in mental health in its submission to the Sustainable Health Review.

The Branch was fortunate to employ a policy and advocacy officer this year. This position has proved invaluable in increasing the quality and number of submissions that can be made, increasing opportunities to partner with peak bodies and extending the presence of the RANZCP at conferences and mental health events. The Branch will facilitate some challenging debates next year, including polarising issues around end-of-life choices – the evidence base and policy work being undertaken gives a solid basis for discussion.

In 2017 the Branch supported an online research network that promotes local research and scholarly project opportunities. Next year the Branch will consider ways to support early career psychiatrists and those entering leadership roles.

The Travelling Scholar for 2017 was Professor Colleen Loo, whose expertise in neuromodulation is renowned and WA looks forward to welcoming Dr Neville Symington in 2018. We hope to move to new premises in 2018 to facilitate the collegiate culture of the Branch through both the lively and varied formal CPD program and more informal opportunities.

Continued overleaf
Why are people confused about the difference between a psychiatrist and a psychologist? Is it partly to do with the wide array of professionals working in the mental health sector? Is it just that the words sound similar?

While we can’t really answer this question definitively, we do know that it is one that is being asked. Google analytics tell us that our fact sheet, Psychiatrists versus psychologists, is the most consistently visited page on our new Your Health in Mind website.

A survey conducted by the College, to better understand the public’s awareness and understanding of psychiatry, found that many people were unsure of the role of a psychiatrist and were unaware that they were medical doctors. This confusion was one of the many issues that prompted the College’s CEO, Mr Andrew Peters, to initiate the development of a new website for the public with the aim of demystifying mental illness and treatments, and explaining more about the role of psychiatrists.

While there is a great deal of information about mental health conditions, treatments and prognoses to sift through on the internet, how difficult must it be for the general public to navigate this? How can they identify which professional is the right person to see for certain mental health conditions? How can they trust that the information they find online is evidence-based, accurate and useful?

One in 20 Google searches are for health-related conditions and recent US analysis showed that out of the top 10 conditions searched online, depression came in at number two, anxiety at number three and schizophrenia at number nine.

There is no doubt that the public is becoming better informed about mental health disorders. Public campaigns to destigmatise mental illness have contributed to breaking the taboos and fears surrounding these conditions and driven more people to seek help. Well-known people including sporting stars, politicians, actors and others have spoken publicly about their struggles with conditions such as depression and anxiety.

The Your Health in Mind website content acts as a useful resource for the general public but also for psychiatrists, GPs and other health professionals to provide to their patients. It was also devised as a way of explaining and promoting the role of psychiatry in mental health care and to position the College as a trusted source of information for people with questions about mental health.

\[Thanks for the comprehensive information your website shows regarding borderline personality disorder (BPD). I have this condition and it’s been difficult finding information from reputable sources, specifically from Australia. I really appreciate the hopeful tone of the material provided too – it’s something I feel will be more easily shared for that reason.\]

\[– Consumer feedback\]

The content on the website is based around more than 25 fact sheets on topics such as addiction, physical health for people with mental illness, borderline personality disorder and schizophrenia. These fact sheets were developed in consultation with Fellows, consumers, carers and College staff. Importantly, the new website hosts the Find a Psychiatrist database conveniently situated alongside relevant mental health information. Several videos are also available including one aimed at destigmatising and lessening the anxiety about the experience of being in a psychiatric hospital, and another video about what happens at a first appointment with a psychiatrist. New fact sheets, infographics and videos will continue to be developed.

The website was launched in May at the Adelaide Congress and a comprehensive marketing plan was implemented. Our key promotional activities centred on informing the public, health organisations, our members and other medical professionals of the new website. Around the time of the launch we set up a Facebook page to promote the content and build our audience; we enhanced this by running paid Facebook advertisements over six months, which both increased our followers (over 4,100 in late 2017) and pushed traffic to the website. We developed specific branding and materials to clearly identify that this was a new, fresh, public-facing look for the College with bright colours and a range of faces showing that mental health issues can affect everyone. We also set up a YouTube channel to host the videos from the website, promoted the fact sheets through Twitter, advertised in Australasian Psychiatry, Psyche and at Congress and other conferences throughout Australia, New Zealand and internationally.

We’re proud to say that Your Health in Mind was a finalist in the 2017 Australian Web Awards – an industry award judged on a website’s accessibility, content, user interface design, development and user experience. We look forward to adding more rich content and continuing to provide this expert service to the public.
Faculty highlights

Faculty of Addiction Psychiatry

Chair, Dr Shalini Arunogiri

2017 has been a major year for the substance use and addictions treatment sector bi-nationally, and a big year for the Faculty.

The 2017 International Medicine in Addiction (IMA) conference was held in Sydney in March. A collaborative effort between the RANZCP, RACP and RACGP, this built on previous successes, with a record number of delegates and overwhelmingly positive feedback received on the quality of the scientific program, clinically relevant workshops and valuable networking opportunities.

The Committee contributed to a range of RANZCP submissions to parliamentary inquiries in 2017, including the Senate inquiry on e-cigarettes, the Victorian parliamentary inquiry into the Pilot Medically Supervised Injecting Centre Bill, and the inquiry into the Welfare Reform Bill (Mandatory Drug Testing of Welfare Recipients). These valued contributions highlight the expertise that addiction psychiatrists can offer, and our role in advocating for equity in the care of our patients. Similarly, a snapshot of the position statements in current progress with the Faculty Committee, focusing on topics as diverse as medical use of cannabinoids, e-cigarettes and vapourisers, and problem gambling, provides further insight into the relevance of addiction psychiatry in the current dynamic social context.

The establishment of the New Zealand subcommittee of the Faculty in early 2017 has enabled our New Zealand members to actively engage in issues of relevance. The inaugural New Zealand Addictions meeting was held in September 2017, a joint meeting of RANZCP and RACP, with the aim of sharing and exploring the experiences of addiction specialists in New Zealand. We also have active branches and meetings in other states, including Queensland, New South Wales and Victoria.

As Chair of the Faculty in 2017, I would like to acknowledge the tremendous work of outgoing chair Professor Dan Lubman in his ten years leading the Faculty. His passion, drive and expertise have directly contributed to raising the awareness of addiction psychiatry in Australasia and internationally, and the Faculty is indebted to him for his efforts. Several other long-serving Faculty committee members finish their terms in 2017, and I would like to thank Dr Enrico Cementon (Vic), Dr Lisa Juckes (NSW), Dr Helen Slattery (WA) and Dr Bernard Hickey (ACT). The new Faculty Committee looks forward to the coming year.

Faculty of Child and Adolescent Psychiatry

Chair, Dr Paul Robertson

The Faculty has continued to work on developing several position statements in 2017, including the role of the child and adolescent psychiatrist, and the child and adolescent psychiatry workforce. The Faculty has also finalised work on Position Statement 72: The Impact of Media on Children and Adolescents. A review of Position Statement 55: ADHD in Childhood and Adolescence was also completed in partnership with the Faculty of Addiction Psychiatry.

In line with the College’s strategic direction to link with the Pacific region, the Faculty formally established a subcommittee to concentrate efforts to develop child and adolescent psychiatry within that region.

An International Projects Officer has been appointed to assist the subcommittee with its work, including the 2017 Pasifika Study Group.

The Faculty has formed an additional working group to progress planning strategies for Australia and New Zealand, with an emphasis on prevention of and early intervention in mental illness in infants, children and adolescents.

After a successful 2017 FCAP conference in Adelaide in October, preparations are already underway for the 2018 FCAP conference, which will be held in Perth from 17–20 October.

The Committee extends its thanks to the outgoing chair, Dr Nick Kowalenko for his ongoing contributions to the field of child and adolescent psychiatry.

Continued overleaf
Faculty of Consultation–Liaison Psychiatry

Deputy Chair, Dr Brad Hayhow

The Faculty of Consultation–Liaison Psychiatry (FCLP) has remained active in 2017, hosting training days and visits from national and international speakers for members. At the 2017 Congress it presented a successful workshop titled ‘Transforming the “heartsink” patient’, where Dr Philippa Hay addressed the challenges faced by psychiatrists managing patients with eating disorders in general hospital settings, and Dr Paul Pun discussed the role of consultation–liaison psychiatrists in transforming treatment behaviour.

Earlier in the year the FCLP bi-national Committee successfully petitioned for the establishment of a jurisdictional subcommittee in New Zealand. In addition to serving the needs of its many local members, the subcommittee will expand its advocacy for CL psychiatry on the New Zealand National Committee while continuing to bring an invaluable New Zealand perspective to the work of the bi-national Committee.

The Faculty provided feedback on a number of documents during the year, including the Independent Hospital Pricing Authority’s (IHPA) proposal to cost case conferences, and Pain Australia’s submission on private health insurance and chronic pain. It also gave feedback to the PPPC and commenced work around lobbying government officials regarding the sustainability of the CL psychiatry workforce. The provision of an adequate number of training posts, especially for advanced trainees, remains a significant challenge in most jurisdictions.

A priority for 2017–2018 is our ongoing collaboration with the IHPA and other government agencies around the development of an appropriate funding model for CL psychiatry, as the specialty’s vital contribution to both mental and general health care remains largely invisible to existing metrics. Related priorities include the scoping and development of a public position statement on the role of CL psychiatry in the Australian and New Zealand health care systems, and perhaps the identification and endorsement of some clinical standards and quality measures to support its members in their practice of the specialty across the region.

As part of the FCLP’s focus on communication and engagement, we have been participating in the College’s online discussion forum and contributing subspecialty modules to LearnIt. The Committee is working on expanding the Faculty’s social media presence on other platforms to provide additional opportunities for membership engagement and coordination.

We look forward to maintaining our engagement with the College community in the year ahead.

Faculty of Forensic Psychiatry

Chair, Dr Justin Barry-Walsh

The Faculty has had another busy and productive year. The first face-to-face meeting of the bi-national Committee in March greatly facilitated progress in several areas. This included improvement in the relationship between the Branch committees and the bi-national Committee. The enhanced communication has highlighted the level of activity in jurisdictional committees particularly in the areas of education and development of state- or New Zealand-specific issue papers.

Progress was made on position statements for involuntary treatment in custody (completed) and for electronic monitoring of forensic patients. The Committee is now developing a clinical guideline on Violence Risk Assessment. We see this as an important issue to address given its complexities and the ethical and moral issues that impinge upon the activity.

The 2017 Faculty conference was held in Vancouver, Canada. Regrettably, attendees were down and we lost one invited speaker. Despite this, the conference was productive, with a high standard of presentations. The 2018 conference is to be held in Sydney in September and promises to be interesting and stimulating.

The Committee has spent some time improving our relationships with other agencies. We focused initially on the Australian and New Zealand Association of Psychiatry, Psychology and Law (ANZAPPL) with whom we have had many productive interactions in the past and who are a similar organisation in a number of ways. With them, we have commenced planning for a 2019 conference in South-East Asia, which promises to be a particularly valuable exercise, as it provides the opportunity to engage with parallel South-East Asian services. In addition, we are working towards workshops in the Northern Territory and Tasmania, which do not have active committees, to enhance the connections with the Faculty.
The Faculty of Psychiatry of Old Age has enjoyed a strong 2017 and currently boasts some 318 accredited members, 240 general members and 115 candidates enrolled for the Certificate in Old Age Psychiatry across Australia and New Zealand. The Faculty was well represented at the 2017 Congress in Adelaide, with an international invited speaker conducting a pre-Congress workshop on neuroimaging in dementia, and six separate speakers presenting in concurrent sessions related to the Faculty.

Drawing on the results of a web-based membership survey conducted in November 2016, the format and content of the Faculty newsletter have been extensively revised.

The Faculty sponsored a training day in the Northern Territory for trainees in the area of aged psychiatry, which was very well received by attendees. Further events in the Top End, and possibly the Asia–Pacific region, are being actively considered for 2018.

Position Statement 71: Priority must be given to investment that improves the mental health of older people in Australia and New Zealand has been revised and is awaiting co-endorsement by the Australian and New Zealand Society of Geriatric Medicine.

The Faculty participated in extensive and successful advocacy against the proposal that dementia be re-classified as a neurological disorder within the forthcoming ICD-11.

Much effort was focused on providing a Faculty response to the Oakden Report in South Australia, and in supporting the SA Branch in the negotiations with the Department of Health in SA that occurred following the publication of the report.

The year culminated in a joint Scientific Meeting of the Faculty, held in partnership with the International Psychogeriatric Association, in Queenstown, New Zealand, from 8–10 November. A joint Scientific Meeting of the Faculty and the Asian Society Against Dementia will be held in Melbourne in 2018.

I would like to extend my thanks to the outgoing Chair, Dr Jane Casey, my fellow members of the FPOA Executive, and the RANZCP secretariat staff for their support as I commence my term as Faculty Chair.

Committee members
- Dr Sarah Berriman
- Dr Jane Casey
- Dr Joanne Hill
- Dr François Hugo
- Dr Neil Jayasingam
- Dr David Lie
- Dr Sam Loi
- A/Prof Stephen Macfarlane
- Dr Helen McGowan
- Dr Angela O’Brien
- Prof Carmelle Peisah

The Faculty of Psychotherapy
Chair, Dr Michael Daubney

This year the bi-national Committee completed work on a number of College documents, including updating Position Statement 54: Psychotherapy conducted by psychiatrists, and work has commenced on the revision of guidelines for psychiatrists treating patients with complex trauma (to replace the past position statement on dealing with repressed traumatic memories). Work has also commenced on the complex and important issues related to the recording and storage of patient psychotherapy sessions and also on the qualities of an effective peer review.

There were several priority areas for the Faculty this year: the proposed CPD changes; supporting supervisors and candidates regarding the Psychotherapy Written Case; and psychotherapy in New Zealand. A CPD working group was formed and Dr Simon Byrne presented on CPD issues at the recent Faculty conference. A member survey is currently being developed with the aim to collect feedback from Faculty members on a number of issues including the new CPD program and activities that have been undertaken.

The Faculty held its annual conference in September this year, with a strong focus on upskilling psychotherapists in Indigenous mental health. Feedback from members described it as a powerful experience. Planning is well underway by the organising committee for the 2018 conference, which will be held in Adelaide.

I would like to thank the members of the bi-national Committee, our newsletter editor Dr Jenny Randles and the RANZCP secretariat staff, especially Joanne Phillips, for their continued hard work and support.
Section highlights

Section of Child and Adolescent Forensic Psychiatry

Chair, Dr Scott Harden

In 2017 the Section of Child and Adolescent Psychiatry continued to participate in the Members’ Advisory Council twice a year. The Section published a regular newsletter for members, with Committee contributions and a focus on the experience of trainees.

The Committee held several meetings throughout the year and increased its involvement in providing feedback to relevant College guidelines and position statements. The Section and its members also provided significant feedback on the Fifth National Mental Health Plan.

Our annual conference was held in Melbourne this year, with a focus on a range of issues in child and adolescent forensic psychiatry. The conference had an increase in attendance, and keynote speaker Professor Martine Powell, who spoke about interviewing child victims, was well received.

The 2018 annual conference will be in Brisbane with a focus on forensic developmental disability and child and adolescent forensic psychiatry.

Committee members

» Dr Caleb Armstrong
» Dr James Gardiner
» Dr Scott Harden
» Dr John Kasinathan
» Dr Joey Le
» Dr Katinka Morton
» Dr Yolisha Singh
» Dr Marshall Watson

Section of Early Career Psychiatrists

Chair, Dr Alice Chang

The Welcome Aboard event at Congress 2017, to mark the achievement of the new RANZCP Fellows, was well received. This event will be continued at future congresses to engage with our members and foster a sense of community and support among new Fellows.

The Section held a number of local events in New South Wales, Victoria, Queensland, South Australia and New Zealand. Recognising the breadth and diversity of our membership, we provide support and resources to members who are overseas-trained psychiatrists, in private practice, in the last six months of their training, and those who are interested in leadership and management.

2018 promises to be another exciting year. We will be developing international links through the rich networks of our Overseas Trained Psychiatrists to explore the possibility of exchanges or volunteer work. In addition, the Section is planning a one-day workshop at Congress, with information and skills new Fellows will need to make the first few years of their transition a smoother journey.

Committee members

» Dr Alice Chang
» Dr Rewant Desai
» Dr Paul Fung
» Dr Kausik Goswami
» Dr Yara Khedr
» Dr Jan-Paul Kwasik
» Dr Rhoanna McNeill
» Dr Jedda Schutz
» Dr Suman Sinha
Section of Electroconvulsive Therapy and Neurostimulation

Chair, Dr Alan Weiss

The Section of Electroconvulsive Therapy and Neurostimulation continued its ongoing work on the development and review of multiple position statements in 2017. The Section is also in the process of finalising the Professional Practice Guideline regarding the use of electroconvulsive therapy and has finished work on the revised terms of reference.

The Section continued its development of three networks for anaesthetists, for nurses, and for consumers and carers, led by Committee members.

Dr Charles Kellner attended Congress 2017 as an invited speaker for the Section and enjoyed a well-attended symposium. The Section is looking forward to another well attended 2018 biannual conference in August at Yarra Valley Lodge, Victoria, with international keynote speakers Drs Holly Lisansby and Mark George.

The Section looks forward to another busy year when it will continue to have a voice for its members.

Committee members
» Dr Tibor Csizmadia
» Dr Matthew Fasnacht
» Prof Paul Fitzgerald
» Dr Salam Hussain
» Prof Colleen Loo
» Dr Bradley Ng
» Dr Shanthi Sarma
» Prof John Tiller
» Dr Susan Waite
» Dr Alan Weiss
» Dr Melissa White

Section of History, Philosophy and Ethics of Psychiatry

Chair, Associate Professor Michael TH Wong

The Section has been engaging members through meetings, expanding its activities to different states, informing the College on matters of history, philosophy and ethics of psychiatry, and promoting education and research in these areas.

The newly elected bi-national Committee has representation from New South Wales, Queensland, South Australia, Victoria, Western Australia and New Zealand.

New initiatives are being taken to develop regular local meetings in Perth, Adelaide, Sydney and Auckland in addition to Melbourne, Brisbane and Wellington.

The Section successfully conducted a symposium on “Brain and mind in contemporary psychiatry” at Congress 2017, which generated interest and debate on the relevance, significance and applicability of the brain–mind insights to clinical practice.

The Section has developed a draft position statement on the relevance of religion and spirituality to psychiatric practice, which is currently being reviewed.

In order to promote philosophy and psychiatry in the Asia–Pacific region, the Section will host the 20th Annual Conference of the International Network for Philosophy and Psychiatry (INPP) in Hong Kong in October 2018. The theme is “History, philosophy and ethics of psychiatry: the state of play in the 21st century”.

Committee members
» Dr Joyce Arnold
» Dr Daniel Brass
» Dr Robert Brennan
» Dr Andy Czehowicz
» Dr Lorraine Davison
» Dr Susan Lutton
» Dr Paran Nadeswaran
» Dr Robin Pratt
» Dr Chris Ryan
» Dr Steven Stankevicius
» A/Prof Michael Wong
Section of Leadership and Management

Chair, Associate Professor Robert Parker

The Section of Leadership and Management (SLAM) ran a successful series of workshops and seminars at Congress in Adelaide. Planning is well underway for SLAM involvement with the 2018 Congress in Auckland, with the intent of providing a further pre-Congress workshop and Congress sessions for trainees and consultants interested in developing careers in management.

The Section published its first newsletter, which had a very high readership among interested members. It has also progressed plans for a mentoring program that will allow junior Fellows in management to gain knowledge from more senior Fellows in this role. It is hoped that the first activities of the mentoring program will be initiated at the Auckland Congress.

The Section is also working on developing a resource for psychiatrists interested in management, which would be made available on the RANZCP website, similar to the suite of private practice resources. The Section plans to further develop this resource in 2018.

Section of Neuropsychiatry

Chair, Professor Richard Kanaan

The Section of Neuropsychiatry held its sixth annual conference in Sydney in October. This was its second foray outside Melbourne and the conference was greatly over-subscribed. Delegates attended two days of stimulating talks, including from the Australian of the Year, Alan Mackay-Sim, thanks to the work of the organising committee led by Professor Perminder Sachdev and Dr Adith Mohan. The 2018 conference will return to Melbourne in November.

The Committee’s major project in 2017 was developing a training framework for the rapidly growing body of trainees who want neuropsychiatry to be part of their skill set, even if the number of dedicated neuropsychiatry positions is currently limited. This is expected to remain a focus of the Committee for 2018.
Section of Perinatal and Infant Psychiatry

Chair, Professor Megan Galbally

In 2017 the Section began working on consultation and collaboration opportunities with relevant stakeholders. This will remain a strong focus in 2018. The Section hopes to increase its involvement in World Women’s Maternal Health Day (WWMH) in Auckland in 2018.

The Section has identified two areas of importance for perinatal and infant psychiatry (PIP). The first is supporting pathways for training an expert workforce and ensuring training opportunities in PIP. The second area is developing guidance on service development and standards for these specialised services.

In early 2017 the Section developed a bi-national resource detailing the current availability of training posts, which provides an easy reference for those seeking training in PIP. It is available on the Sections page of the College website. The Committee is also looking into ways to support other medical specialties, including RANZCOG, with PIP training components.

The review of Position Statements 63 and 64 relating to the prevention and early intervention of mental illness in infants, children and adolescents is ongoing and the Section is continuing to review the perinatal mental health template.

The Committee extends its thanks to the outgoing Chair, Dr Nicola Beamish, for her contribution to the Section’s continued development.

Committee members

» Dr Nicky Beamish
» Dr Anastasia Braun
» Dr Alice Chang
» Dr Bridget Duns
» Prof Megan Galbally
» Dr Amin Gharai
» Dr Rebecca Hill
» Dr Dagmar Hlincikova
» Dr Mark Huthwaite
» Dr Brendan Jansen
» Dr Beth Mah
» Dr Paran Nadeswaran
» Dr Susan Roberts

Section of Private Practice Psychiatry

Chair, Dr Michelle Atchison

Although the Section of Private Practice Psychiatry covers over half of the College’s members, engagement with these Fellows remains an ongoing body of work.

Over the past year, the Section has contributed expert input from a private practice perspective on a number of College submissions and position statements. These have included submissions around access to equitable private health insurance, the Royal Australian College of General Practitioners’ concerns about access to private psychiatrists, and the role of psychiatrists within multidisciplinary services.

Issues of current concern include private psychiatrists’ access to medications that have had restrictions placed on them by the PBS (for example, Quetiapine 25mg and alprazolam) and the imminent inquiry into MBS item numbers for psychiatry.

The focus of a symposium at the upcoming Auckland Congress will be private psychiatry in the landscape of New Zealand.

Training in the private practice setting will be another focus of the Committee in 2018.

Committee members

» Dr Michelle Atchison
» Dr Paul Cadzow
» Dr Nicholas Ford
» Dr Gary Galambos
» Dr Virginia Loftus
» Dr Renate Mundl
Section of Psychiatry of Intellectual and Developmental Disabilities

Chair, Dr Chad Bennett

The Section was pleased to have Professor Florian Zepf as the invited speaker at Congress 2017 and, thanks to the efforts of Dr Jennifer Harrison, the Section also presented a symposium.

The Section continues to contribute to position statements on a range of topics, in particular the proposed National Guidelines for Autism Diagnosis. The Section was pleased to see that people with an intellectual disability are identified in the Fifth National Mental Health Plan and hopes that this will be reflected in the Australian National Mental Health Commission’s national mental health and suicide prevention monitoring and reporting framework.

Additional work has included reviewing and revising the Section statement on the mental health needs of people with intellectual and developmental disabilities and mental illness, as well as identifying available training positions. The Section has also been involved in a project being undertaken by the Department of Developmental Disability Neuropsychiatry, under the leadership of Professor Julian Trollor, looking at funding to scope psychiatrist capacity in ID mental health, training capacity, and development of a training framework in intellectual disability mental health.

Section of Rural Psychiatry

Chair, Dr Andrew Howie

In 2017, the Section’s activities have included the revision of the Rural Psychiatry Position Statement, which has resulted in plans for the development of new resources and initiatives for members.

These will be tailored to suit the unique challenges faced by rural psychiatrists with regard to training, recruitment and retention, trainee and psychiatrist welfare, continuing professional development, and service delivery.

The Section has also been active on the Members’ Advisory Council, and consultation has been sought from the Committee on a number of policy items.

The Section has remained involved in the Mentoring Program for Rural Trainees, which continues to achieve beneficial support. The ongoing development of the Section’s webpage and included resources provides an invaluable source of information for rural psychiatrists working in isolated areas, and there are plans to expand these resources.

The recent rural psychiatry member survey provided invaluable feedback and will lead to a focus on advocacy around recruitment and retention in country areas in 2018.

Committee members

» Dr David Bathgate
» Dr Chad Bennett
» Dr Catherine Franklin
» Dr Jennifer Harrison
» Dr Lynn Jones
» Prof Harry McConnell
» Dr Sergio Starkstein
» Dr Jennifer Torr
» Prof Julian Trollor
» Dr Mohamed Usman
» Dr Melissa White
Section of Social and Cultural Psychiatry

Chair, Dr Darryl Watson

Following a period of decreased activity, the Section has a newly appointed Committee that met several times in the latter part of the year. The new Committee is eager to progress priorities identified by its members and continue to expand the reach of the Section and its membership.

The Committee has recently commenced consultation with the College regarding the inclusion of rehabilitation psychiatry in the Section. Current membership is in excess of 200 and it is hoped that the new inclusion would lead to wider scope for the Section and further increases to membership.

As part of the Section’s plan to grow its membership, it will begin holding an annual conference. The Committee has actively commenced planning for a conference in 2019, with the theme centering around the intersection of anthropology and psychiatry. The Committee has also recently seen the addition of a community member who will focus on the inclusion of cultural minority considerations within discussions and College documents.

Section of Youth Mental Health

Chair, Associate Professor James Scott

The Section meets monthly and has been focused on member engagement and training issues. Dr Christopher Davey was the Section’s invited speaker at Congress 2018 and he presented on mood disorders in adolescents. Dr Jackie Curtis will be the Section’s invited speaker at Congress 2018 in Auckland and will discuss physical health in early psychosis.

Three main initiatives were undertaken by the Section in 2017. Firstly, the Committee identified all youth mental health training positions available to registrars in Australia and New Zealand. This is to support trainees seeking experience in youth mental health and will be available on the RANZCP website. Secondly, a youth mental health Google group for psychiatrists and trainees was established, providing a forum through which members can communicate with colleagues. And finally, planning is well underway for the 2018 Youth Mental Health Symposium to be held at Noosa.

Committee members

» Dr Tanveer Ahmed
» Dr Georgiana Antoce
» Dr Vibha Bhullar
» Dr Paul Fung
» Prof Carol Harvey
» Ms Manjit Kaur
» Dr Elizabeth Moore
» Dr Diana Ranghuna
» Dr Lakshman Ratnamohan
» Dr Darryl Watson

Committee members

» Prof Andrew Chanen
» Dr Angelene Chester
» Dr Sharon Foley
» Dr Peter Jenkins
» Dr Lisa Juckes
» Dr Megan Kalucy
» Dr John Koutsogiannis
» Dr Andrew Lee-Lovick
» Dr Catherine McHugh
» Dr Hugh Morgan
» A/Prof James Scott
» Dr Paul Vroegop
During 2017, 220 candidates were admitted to Fellowship of the RANZCP.

**Australia**

**Australian Capital Territory**
- Dr Arne Ahlin
- Dr Lakhwinder Bhatia
- Dr Amanda Ann Jones
- Dr Alfiya Mutlu
- Dr Erika Olander
- Dr Nishad Samad
- Dr Matthew Sellen
- Dr Deepa Singhal

**New South Wales**
- Dr Kamran Ahmed
- Dr Reece Anderson
- Dr Andy Ang
- Dr Lori Aranha
- Dr Charles Austin-Woods
- Dr Lindsay Ayerst
- Dr Kathryn Black
- Dr Sara Buten
- Dr Prerna Dahiya
- Dr Harsha Ediriweera
- Dr Lindsay Gale
- Dr Duncan George
- Dr Vijayalakshmi Gopalakrishnan
- Dr Sergiu Grama
- Dr Myles Gutkin
- Dr Matthew Hannon
- Dr Leone Harvey-Smith
- Dr Scott Hedley
- Dr Benjamin Hoadley
- Dr Tahira Jabeen

**Northern Territory**

**Queensland**

**New Fellows**

- Dr Candice Jensen
- Dr Sujatha Kalava
- Dr Cornelia Kaufmann
- Dr Rebecca Koncz
- Dr Varun Kumar
- Dr Elaine Kwan
- Dr Julia Lappin
- Dr Julian Lee
- Dr Ryan Lee
- Dr Philippa Levy
- Dr Trevor Ma
- Dr James Minnagh
- Dr Suraiya Moisey
- Dr Megha Mulchandani
- Dr Michael Murphy
- Dr Sheik Sulaiman Muthu Ismail
- Dr Anand Muthukumaraswamy
- Dr Janani Nagendra
- Dr Abhishek Nagesh
- Dr Alexander Nash
- Dr Julian Nasti
- Dr Rachel Paisley
- Dr Annie Parsons
- Dr Sachin Patil
- Dr Iain Perkes
- Dr Nhut Xan Phung
- Dr Hugh Powell
- Dr Robin Pratt
- Dr Lakshman Ratnamohan
- Dr Maugan Rimmer
- Dr Assadullah Saboor
- Dr Owen Samuels
- Dr Shweta Sharma
- Dr Yu-Tang Shen
- Dr Nahid Siddiqui
- Dr Brendan Smith
- Dr Susil Stephen
- Dr Meredith Stone
- Dr Aman Suman
- Dr Cherian Thomas
- Dr Ricky Tsang
- Dr Zoe Walker
- Dr Cecilia Wan
- Dr David Ward
- Dr Danielle Winch
- Dr Sarah Woodgate
- Dr Jonathan Yong

- Dr Calista Harcourt-Rigg
- Dr Hethal Hargovan
- Dr Nasim Heidari
- Dr Michelle Helleyer
- Dr Paul Henderson
- Dr James Hughes
- Dr Ashar Imam
- Dr Nirosha Jayawardena
- Dr Shama Kanodia
- Dr Manoj Kulaungwa
- Dr Geetha Kumaravelu
- Dr Nicola Lyell
- Dr Siddhartha Makwana
- Dr Gabriella Matta
- Dr Premod Menon
- Dr Jacqueline Montwill
- Dr Shirlyon Morgan
- Dr Philip Muller
- Dr Kate Murphy
- Dr Gideon Oju
- Dr Mubeena Parker
- Dr Barzan Pushdary
- Dr Ranganath Rattehalli
- Dr Stuart Robinson
- Dr Zara Samaraweera
- Dr Pradeep Singhal
- Dr Rachel Taylor
- Dr Nicola Warren
- Dr Lee Williams
- Dr Sabine Woerwag-Mehta
South Australia
Dr Bianca Djurdjevic
Dr Owen Haeney
Dr Adele Jackson
Dr Rebecca Kurlinkus
Dr Wen Hui Law
Dr Cheryl Lee
Dr Ping En Lee
Dr Andrew Lin
Dr Andrew Rosser
Dr Fariza Sani
Dr Rima Staugas
Dr Kieron Thomson

Tasmania
Dr Thet Aung
Dr Hannan Lake
Dr Deborah Latham
Dr Daya Sadiq
Dr Kishor Sivasankaran
Dr Christina Van Der Veen
Dr Elizabeth Walker

Victoria
Dr Jossy Antony
Dr Srikala Bharath
Dr Katie Bourke
Dr David Coghill
Dr Michael Cowen
Dr Dilani Daluwatte
Dr Ivano Doti
Dr Odette Edelstein
Dr Daniel Etsner
Dr Claire Ewing
Dr Gabriel Feller
Dr Ophelia Fernandez
Dr Natalie Fraser
Dr Amie Gillett
Dr Mona Hassaballa
Dr Catherine Hearn
Dr Emma Herrmann
Dr Jarod Holst
Dr Yi-Ning Huang
Dr Dorota Jamroz
Dr Rahul Khanna
Dr Jan-Paul Kwasik
Dr Angela Lane
Dr Amanda Lewkowski
Dr David Mitchell
Dr Eranthanie Perera
Dr Vijay Prajapati
Dr Padmaja Ravi
Dr Christina Richardson
Dr Bharat Saluja
Dr Sujit Sharma
Dr Aileen Shuey
Dr Kieran Sinnott
Dr Supundu Subasinghe
Dr Schuyler Tan
Dr Poh-Kim Tang
Dr Alison Taylor
Dr Ruoxin Tsui
Dr Toby Winton-Brown
Dr Sousan Zaripour
Dr Nilumi Ziffer

Western Australia
Dr Praveena Avora
Dr Lynette Bennett
Dr Nicole Brown
Dr David Chang
Dr Caroline Crabb
Dr Kirsty Cranley
Dr Katarzyna Frydryc
Dr Chinar Goel
Dr Lara Gurgone
Dr Davinder Hans
Dr Larissa Harding
Dr Zoe Hawkins
Dr Mihaela Iliescu
Dr Elana Krylova
Dr Nicola Lauterwein
Dr Rhoanna McNeill
Dr Himanshu Mistry
Dr Vincenzo Mondello
Dr Gregory Neate
Dr Anne O’Sullivan
Dr Kanni Renganathan
Dr Matthew Seaburne-May
Dr Elizabeth Tate
Dr Amir Tavasoli
Dr Alexander Thompson
Dr Daniel Yint

New Zealand
Dr Huma Amer
Dr Wee Lee Chua
Dr Dmitri Griner
Dr Stephen Harris
Dr Pradeepa Herath
Dr Edward Hoh
Dr Tracey Lang
Dr Rebecca Mairs
Dr Mirela Newsome
Dr Beth O’Connor
Dr Nicholas Pascoe
Dr Katrina Ross
Dr Jeewithesh Shivanna
Dr David Tan
During 2017, 75 Fellows were awarded RANZCP Certificates of Advanced Training.

**Addiction Psychiatry**
- Dr Hesitha Abeysundera
- Dr Emile Touma
- Dr Christine Watson

**Adult Psychiatry**
- Dr Venkat Krishnamurthy-Naga
- Dr Nicholas Pascoe
- Dr Heidi Newton
- Dr Beth O’Connor

**Child and Adolescent Psychiatry**
- Dr Azadeh Azadi
- Dr Nicole Brown
- Dr Heather Goldsworthy
- Dr Tejas Golhar
- Dr Stephen Harris
- Dr Gabrielle Hart
- Dr Benjamin Hoadley
- Dr Roopashree Jairam
- Dr Katherine Kelly
- Dr Yara Khedr
- Dr Philippa Levy
- Dr Rebecca Mairs
- Dr Brendan McGuire
- Dr Steven McIntosh
- Dr Annie Parsons
- Dr Iain Perkes
- Dr Sophie Price
- Dr Lakshmana Ratnamohan
- Dr Christina Richardson
- Dr Digant Roy

**Consultation-Liaison Psychiatry**
- Dr Alison Bautovich
- Dr Kai Yang Chen
- Dr Andrew Lawlor
- Dr Donovan Moncur
- Dr Alexander Nash
- Dr Carla Patist
- Dr Orestes Theodoratos
- Dr Nicola Warren

**Psychiatry of Old Age**
- Dr Arulmathy Arunachalam
- Dr Omid Dashtegoli Hashemi
- Dr Dmitri Griner
- Dr Neeraj Gupta
- Dr Jacqueline Huber
- Dr Brendan Hughes
- Dr Cameron Lacey
- Dr Angela Lane
- Dr Janani Nagendra
- Dr Philomena Nulsen
- Dr Patrick O’Brien
- Dr Narinder Panesar
- Dr Brent Robertson

**Forensic Psychiatry**
- Dr Wee Lee Chua
- Dr Julian Dodemaide
- Dr Rishi Duggal
- Dr Matthew Hannon
- Dr Maxwell Panckhurst
- Dr Davin Tan

**Psychotherapies**
- Dr Benjamin Allard
- Dr Kirsten Barrett
- Dr Charlotte Duncan
- Dr Lana Fernandes
- Dr Blagoke Kuljic
- Dr Lachlan McPhail
- Dr Paul Northway
- Dr Phillip Price
- Dr Kavita Seth
Vale

The RANZCP pays tribute to the members who passed away during 2017.

Dr Robert Anderson
Dr Anthony Arden
Prof Richard Ball
Prof Roger Bartrop
Dr Husaini Bin Hafiz
Dr David (Larry) Brash
Dr Terry Buchan
Dr Gillian Caradoc-Davies
Dr James Carson
Dr Peter Cook
Dr John Corish
Dr Stella Dalton
Dr John Mark Davis

Dr Monica des Arts
Dr George Freed
Dr Andrew Gerard
Dr Ian Gibb
Dr Rolla Henderson
Prof Basil James
Dr Bal Jha
Dr Basavanahalli Keshava
Dr Peter McKinnon
Dr Helen Molony
Dr John Pickering
Dr Stephen Ward
While electroconvulsive therapy is often considered the weirdest treatment in medicine today, its unparalleled track record for safety and efficacy makes it one of psychiatry’s greatest tools, so Dr Charles Kellner from the Mount Sinai School of Medicine told the Congress 2017 audience in his keynote address ‘ECT in the 21st century: revered and reviled’. In a talk that ranged from history and ethics to clinical updates Dr Kellner conveyed to his audience the medical importance of ECT and the significant stigma associated with this treatment that so often prevents its use.

‘Electroconvulsive therapy is an indispensable treatment for some of our most severely ill patients; however, the stigma associated with this treatment remains the biggest hurdle to its prescription. ‘If we are to reduce stigma and encourage appropriate access, then there needs to be less heat and more light in the discussion of ECT,’ Dr Kellner said.

This was later echoed by outgoing President Professor Malcolm Hopwood in his College Ceremony address to the RANZCP’s new Fellows.

‘We have always lived with public scepticism about ECT and, if we are honest, the initial idea of it is a difficult concept. We have known all along that it was a dramatically effective treatment for people with life-threatening illnesses, but we struggled to mount a public argument. ‘During my career I have seen that pendulum swing significantly although certainly not completely, ECT remains under attack and continues to need defence. I have no doubt that research in the area of ECT, such as the work of Harold Sackiem, Charles Kellner and others, puts ECT on a basis that recognised its clinical utility and made us feel more confident again about its use.

‘ECT saves people’s lives and we should never forget that. And your job is to join the ranks of the advocates,’ Professor Hopwood told the new Fellows. Electroconvulsive therapy was not the only challenging topic discussed at Congress 2017. Head of Research at the University of Manchester’s Centre for Suicide Prevention, Professor Navneet Kapur got everyone talking when he questioned the utility of risk assessments and scales in the prevention of suicide in his presentation ‘Risk assessment for suicide prevention: fact or fallacy?’. ‘We need to recognise that risk assessment as risk prediction is a total fallacy. We cannot predict which of our patients are going to die by suicide and which aren’t. We need to move way from a focus on risk assessment and start talking about this in terms of a patient’s needs assessment.

Perhaps we need to consider that everyone is at high risk of suicide and, if this is the case, then we need to have a something-for-everyone approach to prevention. In clinical practice this would mean a greater focus on a patient’s therapeutic needs, and the implementation of a safer system of care where we have safer wards, safer admission and discharge procedures, better crisis care, and the ability to get families involved in treatment.’

Another important issue discussed at Congress 2017 was the impact of the Royal Commission into Institutional Responses to Child Sexual Abuse on all mental health services right across Australia.

Commissioner Helen Milroy’s presentation on the findings of the Royal Commission highlighted the need for greater trauma competency, trauma-informed care, and culturally competent and safe practices to be introduced in all mental health services. ‘Trauma is like a malignancy; it can often go undiagnosed and unrecognised for a long time until it seeps into every part of your being and creates significant burden,’ Commissioner Milroy said.

‘The difficulty with child sexual abuse in general is that it is not a diagnosis. It’s about time we changed that understanding and, instead, started to see this trauma as one of the biggest risk factors to survivors in terms of their mental health. ‘As psychiatrists we need trauma-informed and competent care. We need to understand the context of people’s lives; we need to know where our patients come from and what they have experienced, and we have to have a cultural lens.

‘Let’s take this understanding and make sure that we create the right story for people through our mental health services, and through our treatments and strong relationships, so that children are safe and grow up strong in this beautiful country,’ Commissioner Milroy said.

Feature:
Food for thought:
Congress 2017

Congress Statistics

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