A Members’ Requisition General Meeting (MRGM) of The Royal Australian and New Zealand College of Psychiatrists (RANZCP) (ABN 68 000 439 047), held virtually (online) on Tuesday 3 May 2022 at 5.00 pm (AEST).

RANZCP Board Directors and RANZCP Members Present

- Associate Professor Vinay Lakra (President, Chairperson)
- Dr Elizabeth Moore (President-Elect)
- Professor Neeraj Gill (Elected Director)
- Dr Beth Kotzé (Elected Director)
- Dr Mark Lawrence (Elected Director)
- Dr Sue Mackersey (Elected Director)
- Dr Nick O’Connor (Elected Director)

In Attendance

- Mr Andrew Peters (CEO and Company Secretary)
- 384 Members online, including 333 eligible voting Fellows, meeting quorum requirements.

1. Acknowledgement of Country

The President welcomed all Members to the MRGM concerning the Mood Disorders Clinical Practice Guideline (CPG) and Psychotherapy.

The President acknowledged Aboriginal and Torres Strait Islander Peoples as the First Nations and the traditional custodians of the lands and waters now known as Australia, and Māori as tangata whenua in Aotearoa, also known as New Zealand.

We recognise and value the traditional knowledge held by Aboriginal and Torres Strait Islander Peoples and Māori.

We honour and respect the Elders past and present, who weave their wisdom into all realms of life - spiritual, cultural, social, emotional, and physical.

2. Apologies and quorum

The President confirmed that a quorum was present and declared the meeting open at 5.02 pm. There were nil apologies received.

Before commencing the MRGM (Meeting), the President, informed the Meeting of procedural points, including:

- that the Meeting is guided by established governance procedures and is delivered in accordance with general meeting requirements outlined in the RANZCP Constitution, legal requirements, and timelines.
- voting on the four Ordinary Resolutions will be open for the duration of the MRGM for those eligible to vote. Votes can be changed up until the voting time has closed. More than 50% of votes must be cast in favour of the resolution for it to be carried.
for any member who allocated a valid proxy prior to the MRGM but is now attending the MRGM, that their attendance revokes the proxy and any directions to vote submitted. These Members may vote at any time during this meeting until the voting time has closed.

proxy votes will be applied by CorpVote, the external provider delivering the MRGM, and is an independent process of the College.

at the conclusion of question time, eligible Members will be given one minute to finalise all their votes.

that in addition to the Notice of Meeting, a Supporting Statement from the members requisitioning the MRGM; Mood disorders guideline development FAQ; and Members Requisition General Meeting process and format FAQ are available on the RANZCP website.

the MRGM virtual platform is restricted to Members being able to ask questions in writing only.

there were a number a questions received in advance of the MRGM.

a PowerPoint presentation entitled Members Requisition General Meeting – Mood Disorders Clinical Practice Guideline (CPG) and Psychotherapy is available on the RANZCP website and referenced as Updated and condensed meeting agenda and presentation – 3 May 2022. This presentation is being presented at the MRGM to allow as many questions to be answered during the time allocated for the Meeting.

a PowerPoint presentation entitled Members Requisition General Meeting – Mood Disorders Clinical Practice Guideline (CPG) and Psychotherapy is available on the RANZCP website and is referenced as Meeting agenda and presentation. This presentation is an extension of the Updated and condensed meeting agenda and presentation – 3 May 2022 and is available to Members for further information.

Each of the above referenced documents were circulated to Members in advance of the MRGM and are appended to these minutes.

3. Presentation on the RANZCP Mood Disorders CPG and long-term psychodynamic psychotherapy in the treatment of mood disorders

The President spoke to the Updated and condensed meeting agenda and presentation – 3 May 2022 (condensed PowerPoint presentation), specifically to the slides headed:

- Introductions and meeting structure and introduced the Board members present and outlined the MRGM general business as outlined in the Notice of Meeting.
- Engagement with requisitioning members and provided a synopsis of the background to the request for the MRGM and the Board’s engagement with the requisitioning members to date.
- Academic debate including advising the meeting that the Board acknowledges the importance of independence of the Journals (i.e. Australian and New Zealand Journal of Psychiatry (ANZJP) and Australasian Psychiatry (AP)) and their processes.
- Request for the MRMG and outlined the four ordinary resolutions being put to the MRGM.
- Presentation and outlined what the MRGM presentation will address.

Dr Sue Mackersey, RANZCP Board Director and Chair of the Practice, Policy and Partnerships Committee, spoke to the condensed PowerPoint presentation, including:

- the Background to College CPGs and informed the meeting that CPGs are mainly written for health care professionals and outlined the CPG overview including the purpose of College CPGs.
- a broad overview of the CPG development process for the Mood Disorder CPG, including the:
  - formation and composition of the Mood Disorder CPG Steering Group and Timeline.

The Meeting was informed that:
Professor Paul Fitzgerald who was a member of the 2015 Mood Disorders Guideline Working Group was invited to join the Mood Disorders Steering Group. While he initially accepted, Professor Fitzgerald withdrew in the early stages due to competing priorities.

at the time the Board approved the draft guideline for submission to the ANZJP, it also sought confirmation from the Chair of the Steering Group that the conflict of interest will be managed during a meeting and in writing. The Chair of the Steering Group subsequently advised in writing that they had planned for this and excused themselves of the ANZJP process which was independently facilitated. An independent associate editor was assigned to manage the process by the editorial manager.

Consultation process undertaken and that 44 RANZCP committees were involved in the consultation, including the RANZCP Board and its constituent committees; the Australian Branch committees and New Zealand National Committee; the Overseas Trained Psychiatrists’ Representative Committee; the Trainee Representative Committee; the Practice, Policy and Partnerships constituent committees; and all Faculty, Section and Network committees. This included the Bi-national Faculty of Psychotherapy Committee. Three Members responded regarding the draft CPG’s psychotherapy content.

Consultation feedback regarding psychotherapy and the Mood Disorders Steering Group response. The Meeting was informed that feedback from Members included but was not limited to:

- the absence of longer term psychodynamic and psychoanalytic psychotherapy from the list of psychological treatments.
- limited content around the discussion around psychotherapeutic aspects of assessment and treatment.
- there are a number of reviews on psychodynamic psychotherapy not referenced and there were concerns that some of the comments were too narrow in the psychotherapy section.
- limited reference to the prevalence of the different mood disorders.
- a psychodynamic component to assessment of patients, part of psychological formulation, has little presence in the CPG.
- there does not seem to be any critical discussion and exploration as to how to determine / whether the patient is in the most suitable psychological therapy to meet their needs.
- there is no discussion regarding the importance of the formulation, including in comorbid medical disorders, nothing regarding comorbid somatoform presentations, complex trauma / C-PTSD as part of depressive presentation, undiagnosed psychotic dimensions and lack of mentalization capacity.
- “psychologist or therapist” might be noted as “psychotherapist” with recognition of there being psychotherapists from multiple / diverse clinical backgrounds, including psychiatrists.

The Mood Disorders Steering Group addressed and responded to the feedback received to individual Members, however it was acknowledged that this response was not provided directly to those who provided feedback. A series of edits were made to the CPG at this stage informed by the wider feedback from the College consultation process.

editorial process including Peer Review Feedback (ANZJP).

Next Steps.

The President presented to the following slides from the condensed PowerPoint presentation:
• **Proposed Outcomes** which represents the views of the Board and Requisitioning Members on possible outcomes, and informed the Meeting that:
  o the predominant point of difference pertains to the retraction of the endorsement of the content which relates to psychodynamic psychotherapy.
  o the current position of the editorial board and the publisher is that the complaint does not merit retraction of the article.
  o as outlined in the Committee on Publication Ethics (COPE) retraction guidelines, retraction is reserved for articles that contain significant breaches such as major experimental error, data fabrication, plagiarism, copyright infringement, and other forms of unethical conduct.
  o throughout the CPG process, the RANZCP Board has committed to amicably resolving Members concerns and proactively diverting resources in a constructive and meaningful manner.
  o ongoing and transparent communications and updates were provided to the broader membership, and the College has been aware of the various non-College forums, email and chats that have prompted discussions.
  o the College contends that its respective positions on this matter are aligned, particularly as the College has been proposing to convene a review of the evidence to inform any amendments to the CPG content as a result.
  o at all times the Board’s proposed action demonstrates a collective commitment to the positive resolution of this issue.

• **Resolution 1; Resolution 2; Resolution 3; and Resolution 4** and noted that the finalisation of voting and declaration of results will follow the questions section of the Meeting.

4. **Questions**

Dr Nick O’Connor moderated the written questions that were submitted prior to the MRGM and then proceeded to moderate the questions submitted during the MRGM in the remaining time allocated for the Meeting.

In light of the many questions raised ahead of and during the MRGM meeting, and commonalities of the questions, thematic responses to the questions raised are summarised and appended to these minutes.

5. **To consider items of business – the Ordinary Resolutions proposed by the requisitioning members**

The President advised all eligible voting Members that they have one minute to finalise their votes.

The President declared the following outcomes of the four Ordinary Resolutions noting that the finalised audited results would be made available (refer to **Addendum** to these minutes).

**Ordinary Resolution i):** The College forthwith remove its endorsement of the current CPG content relating to psychodynamic psychotherapy pending the outcome of the review referred to in paragraph ii below.

It was resolved that Ordinary Resolution i) be carried with 72% For, 28% Against.

**Ordinary Resolution ii):** The College commission a RANZCP working group, independent to the committee involved in the production of the current CPG:

a. whose membership includes clinicians with expertise and clinical experience in the psychodynamic psychotherapies; and

b. for the purpose of reviewing the evidence base, consulting with the clinical field and providing feedback, and if deemed appropriate, making recommendations to the College to amend relevant aspects of the current CPG content relating to psychodynamic psychotherapy.
It was resolved that Ordinary Resolution ii) be carried with 76% For, 24% Against.

**Ordinary Resolution iii):** If determined appropriate by the independent working group, provide recommendations and a revised version of the specific CPG content relating to the psychodynamic psychotherapies in the assessment and treatment of Mood Disorders (including Complex and special presentations), referencing the contemporary evidence base, with a view to obtaining RANZCP endorsement and publication.

It was resolved that Ordinary Resolution iii) be carried with 76% For, 24% Against.

**Ordinary Resolution iv):** The College promptly review the recommendations and any revised version of the abovementioned content and, subject to the recommendations of the independent working group, take immediate steps to replace the current CPG to facilitate multi-stakeholder reference.

It was resolved that Ordinary Resolution iv) be carried with 75% For, 25% Against.

The President informed the meeting of the *Next Steps* noting that any steps to be taken will be at the Board’s discretion as the resolutions of the MRGM are non-binding. However, the outcome of the resolutions will be an important consideration in the Board’s determination of next steps. The President also commented that the requisitioning members and the wider College membership will be kept informed of the next steps undertaken.

6. **Close of Meeting**

The President thanked all those in attendance and notified that any feedback or comments regarding the MRGM could be emailed to the Company Secretary.

The meeting closed at 6.32 pm.
**Addendum:** Following independent audit undertaken by CorpVote, the final MRGM resolution outcomes, including proxy allocation, is outlined below.

**MRGM Outcomes (including proxy allocation)**

<table>
<thead>
<tr>
<th>Resolution</th>
<th>For</th>
<th>Against</th>
<th>Abstain</th>
<th>Total</th>
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<tbody>
<tr>
<td>i)</td>
<td>632 (68%)</td>
<td>247 (27%)</td>
<td>48 (5%)</td>
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<td>ii)</td>
<td>676 (73%)</td>
<td>218 (23%)</td>
<td>34 (4%)</td>
<td>928</td>
</tr>
<tr>
<td>iii)</td>
<td>674 (73%)</td>
<td>217 (23%)</td>
<td>38 (4%)</td>
<td>929</td>
</tr>
<tr>
<td>iv)</td>
<td>660 (71%)</td>
<td>223 (24%)</td>
<td>47 (5%)</td>
<td>930</td>
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