RC PSYCH
ROYAL COLLEGE OF
PSYCHIATRISTS

Advocating, educating and collaborating to achieve excellence in psychiatry

Strategic Plan 2024-26

Foreword

The Royal College of Psychiatrists (RCPsych) is at a defining moment in its journey. We are faced with a mental health emergency that is having a devastating effect on the lives of people in the UK and beyond. Psychiatrists and mental health services are overstretched and under-resourced amidst the ongoing impacts of the cost-of-living crisis, wars and displacements, the climate and ecological crisis, and the continuing effects of the Covid-19 pandemic.

More people require mental healthcare that is high quality, safe, timely and therapeutic than actually receive it, leading to a stark treatment gap. We will be working to reduce this gap, fighting for the resources required to address the multifactorial issues that serve to cause it.

Inequality increases the risk of mental health problems and adversely affects access, experience and outcomes for patients from marginalised groups. In addition, psychiatrists from minoritised groups face greater challenges within their careers compared to colleagues from non-minoritised groups. We will continue to develop our work in addressing these disparities and to strive for fairness.

At the same time, there is a severe shortage of psychiatrists globally and workforce retention has become crucial. We will nurture and support the psychiatric workforce and strive to ensure that every doctor working in psychiatry feels valued, safe and able to achieve their professional potential so they can deliver the best possible patient care.

Exacerbating this situation further, mental health research has lagged behind many other areas of medical research in terms of priority, funding, and therefore discoveries, including the refinement of existing treatments and the development of new ones. This means that improvements in prevention and care are progressing too slowly. We will be doing all we can to address this and to promote mental health research.

We know that these issues and challenges are not confined within UK borders and are in many ways interconnected with the wider world. The College will continue to advance international psychiatry and mental health services globally.

We will continue to value and empower our patient and carer representatives, guaranteeing they remain integral to what we do, ensuring meaningful co-production so they can participate effectively in the life of the College.

We will also aim to deliver an excellent staff experience, so that College staff can perform at their best to ensure that the College pursues these ambitions, using its resources effectively to do so.

We are acutely aware of the vast amount of insight, experience, and knowledge of our membership. We will work hard to support all our members and affiliates, amplifying their voices and enabling them to reach their professional capability, by delivering an excellent membership experience.

We are committed to engaging and collaborating with members and affiliates to ensure they don't just feel, but know, that the College is working for them so that together we can advocate, educate and collaborate to achieve excellence in psychiatry.

Dr Lade Smith CBE, President
Royal College of Psychiatrists

Sonia Walter, Chief Executive
Royal College of Psychiatrists

Our new 2024-2026 strategy sets out how we will continue to deliver excellence by advocating, educating and collaborating.

Introduction

The purpose of our 2024-26 Strategic Plan is to set out high-level ambitions to improve the working lives of psychiatrists and secure the best outcomes for people with mental illness and their families.

This document establishes the six priorities of our President, Dr Lade Smith CBE, and is closely aligned with the College's core objectives, values, vision and mission statement. It will support the College in providing effective governance, in setting our strategic direction and in delivering high value benefits for our members.

This Strategic Plan has been developed in consultation with the College Honorary Officers, Board of Trustees, Presidential Leads, Council, our Senior Management Team, and key members of staff. Our Council consists of Patient and Carer representatives, as well as membership representatives from the Devolved Councils, Faculties, Divisions and other key College groups.

A comprehensive Action Plan will accompany the Strategy.

About our organisation

The Royal College of Psychiatrists is a global professional membership body that works to secure great patient care by promoting excellent mental health services, supporting the prevention of mental illness, training and nurturing outstanding psychiatrists throughout their entire careers, promoting quality and research, setting standards and being the voice of psychiatry.

We have six International Divisions that work with our members globally to facilitate the exchange of information, promote discussion about psychiatry and provide practical support to psychiatrists on the ground within each geographical region.

Our College is strong and progressive, opposes all forms of discrimination, and strives to help its members deliver high-quality, person-centred care around the world.

We play a key role in supporting psychiatrists and other members of multi-disciplinary teams to do their vital work in various ways, including:

- Providing guidance to support psychiatrists to deliver high-quality mental healthcare.
- Providing a range of courses, conferences and educational materials, in a range of media, to support the professional development of psychiatrists throughout their careers.
- Delivering the MRCPsych examination – the gateway qualification to specialist training – with an average of more than 4,000 candidates sitting our face-to-face clinical exam, the CASC, and online written papers (Paper A and Paper B) each year.
- Helping ensure fill rates into core psychiatric training are consistently high, through our award-winning Choose Psychiatry campaign, with 99–100% of core training places filled each year across the Four UK Nations.
- Setting the agenda with decision-makers and stakeholders on mental health. We meet with them regularly and provide up-to-date evidence-based information to support policy ideas that will improve mental healthcare. We secure positive and meaningful media mentions which address the needs of people with mental ill-health, including severe mental illness (SMI).
- Supporting 50,000 members of the mental health multi-disciplinary team to improve the standard and quality of patient care through the work of our 28 College Centre for Quality Improvement quality and accreditation networks.
- Running the biggest quality improvement workstream in mental health globally, through which we help services systematically enhance their work.
- Delivering our services and activities through a blended model, with around 62% of our events being online, 33% face to face and 5% hybrid.
- Providing one of the most popular annual conferences in world psychiatry, with our International Congress regularly having between 2,500-3,500 attendees.
- Coaching teams in every English mental health trust providing inpatient care through our quality improvement programmes.
- Continuing to grow our membership, surpassing 21,000 for the first time in August 2023.

As at the start of 2024, we have:

- 21,200 members – with more than 3,800 members working outside the Four UK Nations
- 1,600 mental health services, across the Four UK Nations, signed up to our quality and accreditation networks
- Around 280 employees
- Around 150 patient carer representatives employed as workers

Our values

Courage

- Champion the specialty of psychiatry and its benefits to patients
- Take every opportunity to promote and influence the mental health agenda
- Take pride in our organisation and demonstrate self-belief
- Promote parity of esteem
- Uphold the dignity of those affected by mental illness, intellectual disabilities and developmental disorders.

Innovation

- Embrace innovation and improve ways to deliver services
- Challenge ourselves and be open to new ideas
- Seek out and lead on new, and where possible evidence-based, ways of working
- Have the confidence to take considered risks
- Embrace the methodology of Quality Improvement to improve mental health services and the work of the College.

Respect

- Promote diversity and challenge inequalities
- Behave respectfully – and with courtesy – towards everyone
- Challenge bullying and inappropriate behaviour
- Value everyone's input and ideas equally
- Consider how own behaviour might affect others
- Respect the environment and promote sustainability.

Collaboration

- Work together as One College – incorporating all members, employees, patients and carers
- Work professionally and constructively with partner organisations
- Consult all relevant audiences to achieve effective outcomes for the College
- Work together with patients and carers as equal partners
- Be transparent, wherever possible and appropriate.

Learning

- Learn from all experiences
- Share our learning and empower others to do the same
- Value and encourage personal feedback
- Use feedback to make continuous improvements
- Create an enabling environment where everyone is listened to, regardless of seniority
- Positively embrace new ways of working.

Excellence

- Deliver outstanding service to members, patients, carers and other stakeholders
- Promote excellent membership and employee experience
- Always seek to improve on own performance
- Promote professionalism by acting with integrity and behaving responsibly
- Demonstrate accountability in all that we do
- Uphold the College's 'Core Values for Psychiatrists'.

Our College values underpin all of our work.

As a result of our emphasis on excellence and respect and in order to ensure the best outcomes for psychiatrists and patients, we put equity, diversity and inclusion at the heart of all we do. We carry out a range of initiatives to eliminate discrimination based on gender, race and ethnicity, disability and sexuality across our organisation and mental health services.

Presidential priorities

Having taken up post on 11 July 2023, our President Dr Lade Smith CBE has set out six strategic priorities:

- Addressing the treatment gap
- Nurturing and supporting psychiatrists
- Fairness for all
- Promoting research in mental health
- Advancing international psychiatry and wider mental health services
- Ensuring excellent member experience and engagement.

Additionally, we have core objectives:

- Being the voice of psychiatry
- Delivering effective use of College resources and excellent staff experience.

Underlying principles

Sustainability

We are committed to supporting mental health services to become fully sustainable and as an organisation, the College is committed to being Net Zero by 2040.

Co-production

In order to support the delivery of excellent mental healthcare, we value the meaningful involvement of patients and carers. We involve them in our work using our Working Together model which is primarily based on the principle of co-production.

Our vision

A strong and progressive College that opposes all forms of discrimination and helps its members deliver high-quality person-centred care, for people of all ages, around the world.

Our mission statement

The College works to secure the best outcomes for people with mental illness, intellectual disabilities and developmental disorders by promoting excellent mental health services, supporting the prevention of mental illness, training outstanding psychiatrists, promoting quality and research, setting standards and being the voice of psychiatry.

Our organisational competencies

Fairness

We ensure our processes are fair so that all people, regardless of background or characteristics, have equality of opportunity and treatment.

Allyship

We recognise our responsibility to support those from marginalised groups and call out discrimination and bias when we see it.

Co-production

We believe that patients and carers should be respected, valued and empowered to co-produce College workstreams and programmes.

1. Addressing the treatment gap

During 2024-26, we will strive to help reduce the gap between the number of people who need care and those who are receiving treatment which is of high-quality, safe, timely and therapeutic. The urgent need to act is highlighted by the fact that patients accessing mental healthcare experience long waiting times; stigma; poor access to the best medical, psychological, social and environmental interventions; a lack of culturally appropriate treatment and support options; differences in outcomes related to having a protected characteristic; poor access to physical healthcare; patchy provision of services; a feeling of being unsafe and not having enough time to discuss their needs. Therefore, we will fight for resources to address the complex and multifactorial issues that serve to cause the treatment gap, including disproportionately low funding levels, a stretched and under-resourced workforce, fragmented services and a lack of parity in prioritising mental health research and outcome measures.

We will do this by:

1.1. Taking a leadership role in re-establishing therapeutic relationships in mental healthcare through training in relational skills, psychological approaches to personal development and normalising reflective practice, and embedding psychotherapeutic approaches in psychiatric training that help develop comprehensive biopsychosocial case formulation.

1.2. Taking a leadership role in ensuring that the full range of treatment options is available to those with mental illness and that psychiatrists are skilled in, and have expertise in, delivering them, including medical and physical treatments, as well as psychological and social interventions.

1.3. Improving our expertise, training and research in gender-sensitive areas of psychiatry. We will focus on the impact of gender-based violence; the hormonal underpinnings of mental illness in women; gender-specific cardiometabolic and hormonal impacts of psychotropic medication, including osteoporosis and gender-specific presentations of mental illness.

1.4. Campaigning for parity of esteem for mental health across the Four UK Nations – with a fair financial settlement at national and regional levels. This will include increasing the proportion of NHS funding on mental health driven by intelligent commissioning; a greater share of health research funding dedicated to mental health; and adequate funding to effectively implement programmes of reform and grow the mental health workforce.

1.5. Ensuring the health system is held to account for improving mental health services, including inequity of access, experience and outcomes – through monitoring the development and implementation of national mental health strategies, and influencing major programmes of reform across the Four UK Nations, to ensure they deliver parity and improvements in access and outcomes.

1.6. Influencing and tracking national and regional NHS workforce plans to promote recruitment and address geographical shortages, and influence programmes of reform to ensure they incorporate workforce needs.

1.7. Influencing systems across the UK to implement measures that will help to close the mortality gap and to reduce the risk of early death for individuals with mental illness, including encouraging research and innovation aimed at reducing the risk of early death for individuals with mental illness. This will include encouraging expansion of the scope and equitable reach of physical health check programmes. This will also consider those within the traditional severe mental illness (SMI) cohort (such as patients with psychosis) and those with other conditions leading to similar access needs and risks (such as patients with complex nonpsychotic disorders and those with co-existing substance use disorders).

1.8. Supporting improved implementation of evidence-based interventions to treat and prevent mental disorders, including an advocacy campaign aimed at reducing the prevalence of mental disorders in the general population through investment in public mental health interventions and programmes.

1.9. Pushing for implementation of the College's priorities for public mental health to governments and other policy-making bodies at a local and national level.

1.10. Continuing to make the case for urgent measures to address the climate and ecological crisis, including highlighting the negative impact on mental illness and the benefit of taking action on the prevention of mental illness. Connected to this work we will support the roll-out of the joint College Centre for Quality Improvement and National Collaborating Centre for Mental Health report and training materials on how mental health services can reach Net Zero.

1.11. Formulating and rolling out a public-facing campaign to promote the benefits of psychiatry and psychiatrists.

1.12. Campaigning to ensure the new regional models of care being rolled out in England prioritise action to address the mental health treatment gap – by supporting mental health leaders to be embedded in Integrated Care Boards; systematically gathering intelligence through the English Divisions and College Engagement Network on progress in implementing mental health priorities regionally; and through the work of the Public Mental Health Implementation Centre.

1.13. Continuing to provide quality and accreditation networks for around 1,600 mental health services across the Four UK Nations, as well as develop new networks in new areas of clinical practice. This will help to improve standards and quality of patient care.

1.14. Continuing to run national clinical audits of specific areas of mental healthcare (such as dementia and psychosis), which are used for benchmarking purposes to improve care, making the argument for parity in the number of clinical audits for mental healthcare with physical healthcare.

1.15. Promoting a culture of improvement in mental health services by enhancing quality improvement (QI) skills and capability in the psychiatric workforce, to help improve outcomes for patients, carers, communities and staff.

1.16. Leading the development of innovative policy solutions to complex areas, such as unwarranted delays in Emergency Departments for people waiting for inpatient mental healthcare; the co-ordination of care between police and mental health services; the high prevalence of co-occurring mental illness among autistic people; transgender health and gender identity services; the impact of non-recent child sexual abuse; assisted dying; co-occurring substance use and mental health disorders; and the lack of specialised care for people with bipolar.

1.17. Appointing a College Lead for Suicide Prevention to support our influencing on national strategies to prevent self-harm and suicide (including maternal suicide) across the Four UK Nations, working with organisations such as the National Confidential Inquiry for Suicide and Homicide (NCISH) to develop ways the College can take action.

1.18. Giving more attention to school age, higher education age and working age cohorts to improve access to treatment; and to the development of targets to measure progress and quality of care.

2. Fairness for all

Inequality increases the risk of mental health problems. There is strong evidence that people from marginalised groups, especially those from minoritised ethnic communities; LGBTQ+ backgrounds; women and those with disabilities, have poorer access, a poorer experience and/or worse outcomes in mental healthcare. There are clear and compelling moral, ethical and clinical reasons to address these disparities, and the financial cost of this inequity is also enormous. In addition, there are significant differences in attainment, referrals for disciplinary action, career progression and pay for staff from minoritised groups. Negative experiences in the workplace affect retention at a time when we have unprecedented workforce shortages and can ill afford to lose staff unnecessarily. During 2024-26, we will continue to oppose all forms of discrimination and promote equity, diversity and inclusion for patients and carers; all our members and staff; all psychiatrists and other members of the multi-disciplinary team.

Driven by our values of courage and respect and our organisational competencies of fairness, allyship and co-production, we will also strive to engender a sense of belonging for all within the College. We will encourage mental health services to tackle all forms of

discrimination faced by their staff. Our strategic aim is to ensure that effective policies and procedures around equity and equality are fully embedded into our systems and become part of how things are routinely done.

We will do this by:

2.1. Continuing to promote equity, equality, diversity and inclusion for everyone regardless of their background – with a specific focus on tackling inequity driven by gender, race and ethnicity, disability and sexuality, with attention given to intersectionality. This will be done through initiatives like Advancing Mental Health Equity (AMHE), Tackling Racism in the Workplace guidance, the Women's Mental Health Matters Strategy, the RCPsych commitments on promoting an LGBTQ+ friendly workplace for staff, and supporting the implementation of the Patient and Carer Race Equality Framework (PCREF).

2.2. Working closely with patients and carers to reduce inequality and inequity by promoting co-production and co-design as the norm across mental health services. This will be achieved through reviewing our 'Working Together' model of engaging with patient and carer representatives, having a focus on co-production and thus incorporating lived experience into all our guidance for mental healthcare and mandating co-production in all our quality improvement work.

2.3. Enhancing the roles of the College Equality Champions so they can support the delivery of initiatives to improve equity and equality, through all College forums and activities (in each of the Four UK Nations, as well as in each division and faculty).

2.4. Ensuring that all College programmes and policies relating to equality, reflect the importance of advancing equity, so that the drivers of health disparities can be more meaningfully addressed.

2.5. Using our influence and evidence-backed arguments to help healthcare funders and policymakers to understand the importance to mental healthcare of advancing equity and to understand their duty to promote equity-focused outcomes.

2.6. Improving workforce training on the issues that impact women's mental health (in particular, gender-based violence and hormonal health), addressing data gaps and improving evidence-based responses to women's mental healthcare.

2.7. Lobbying and influencing across the system to improve awareness and response to tackle gender-based violence.

2.8. Focusing on the needs and rights of people with visible and invisible disabilities through publishing and campaigning for the implementation of the recommendations of the RCPsych Disability Task and Finish Group, across the Four UK Nations.

2.9. Developing a framework to generate a clearer understanding of intersectional inequity and how this can be addressed through a workstream led by the National Collaborating Centre for Mental Health.

2.10. Ensuring the College Centre for Quality Improvement core standards include robust and meaningful measures of equity, diversity and inclusion, and that support is provided to clinical teams to embed change.

2.11. Supporting the NHS Race and Health Observatory in their mission to eliminate inequity and inequality in health services by co-producing an effective implementation strategy.

2.12. Developing and promoting training programmes to deliver equity, equality, diversity and inclusion-related courses, providing skills and competencies for our members and affiliates, healthcare providers and other audiences.

2.13. Partnering with a range of stakeholder organisations, including leading charities, to influence and catalyse change to support the delivery of equity, diversity and inclusion outcomes.

2.14. Continuing to prioritise tackling differential attainment in psychiatry and widening the participation of medical students and foundation doctors in psychiatry.

2.15. Supporting all mental health employers to become compliant with the Specialty and Specialist doctors (SAS) Charter, deliver the RCPsych SAS Doctor Strategy and to implement the International Medical Graduates (IMGs) Induction Programme.

2.16. Reviewing the job approval process to reduce bias in job descriptions and embed equity so that applicants are not disadvantaged due to gender, race or ethnicity, religion, disability, sexuality and intersectionality.

2.17. Lobbying mental health providers to prioritise actions to reduce their gender and ethnicity pay gaps.

2.18. Supporting all mental health service providers to collect high-quality, disaggregated healthcare data, to monitor any forms of disparities and ensuring that such data is appropriately interrogated to effectively address differences in access, experience and outcomes in mental healthcare.

3. Nurturing and supporting psychiatrists

There is a global shortage of psychiatrists and it is not enough to recruit – we must also retain. Psychiatrists must be valued and protected so that we can provide the best for our patients. During 2024-26, we will nurture and support psychiatrists so that we can retain and strengthen our workforce. We will advocate for the physical, emotional and psychological conditions psychiatrists need to do their work. The services that many psychiatrists work in today are unrecognisable from the ones they joined – with many staff now working from their cars, forgoing their lunch breaks, rarely meeting up with colleagues, and feeling both isolated and that their leadership is being undermined. Therefore, we will strive to ensure every psychiatrist, regardless of their background, feels safe, valued and is able to thrive at work – in order to deliver better patient care.

We will do this by:

3.1. Supporting thousands of appropriately qualified psychiatrists into specialist training each year through the running of our MRCPsych examination, comprising the digital Paper A and Paper B theory papers, and the in-person clinical exam, the CASC.

3.2. Implementing the College's formative assessment recommendations, once they have been signed off by Council and the Board of Trustees.

3.3. Supporting the expansion of run-through training and expanding the use of credentials.

3.4. Bringing together our podcasts, modules, guidance, courses and events – under the umbrella of RCPsych Learn – so that our continuing professional development content is co-ordinated in a way that is beneficial to psychiatrists and other members of the multi-disciplinary team.

3.5. Delivering a safe space in which to learn and network with other psychiatrists through the annual International Congress – with the scientific content being accessible through attending the event in-person or online.

3.6. Formulating and publicising a retention charter with benchmarking – setting out how best to retain staff on the frontline – and asking all mental health employer bodies to sign up to it.

3.7. Providing support to psychiatrists on the frontline, through an enhanced Psychiatric Support Service.

3.8. Provide tailored support for Specialty and Specialist doctors (SAS) and International Medical Graduates (IMGs), as they are disproportionately impacted by discrimination based on protected characteristics and are most likely to have negative outcomes in terms of their access to training, support, experience at work, being subject to complaints and being referred to the regulator.

3.9. Supporting mental health services to ensure that psychiatrists have a clear and defined leadership role within multi-disciplinary teams and can develop their leadership skills, with the ability to identify when and how to work autonomously and support colleagues subject to complaints, GMC referrals, discrimination, bullying and harassment, particularly Specialty and Specialist doctors (SAS) and International Medical Doctors (IMGs), who are most likely to find themselves subject to a complaint.

3.10. Advocating for the strengthening of peer support and professional development, to embed reflective practice, coaching and mentoring skills across medical practice, training and education. This will include encouraging personal development as a core aspect of professional development and promoting regular reflective practice sessions for all staff as an expected standard within all mental health services.

3.11. Campaigning to persuade governments and major political parties in the Four UK Nations of the need to grow the psychiatric workforce and the multi-disciplinary team; continuing to expand psychiatric training posts to meet demand; increase the share of public funding for mental health services; equitably fund mental health research and invest in the mental health estate.

3.12. Lobbying the governments of the Four UK Nations and mental health employer bodies to reduce the increasing administrative burden faced by psychiatrists and improve the work environment of psychiatrists and other members of the multi-disciplinary team. This will help to ensure that doctors get sufficient time to see patients and improve services through quality improvement, research and engaging with College work – all of which contribute to their learning and development and help improve the standard of patient care.

3.13. Promoting recruitment into psychiatry to medical students, foundation doctors and sixth-form students, particularly those from less represented groups, through careers fairs, events, webinars, information materials and fostering links with schools and career advisors.

3.14. Seeking funding to offer mentoring and financial support to talented medical students, particularly those from less represented groups, through schemes like Psych Stars, Foundation Fellowships and the Aggrey Burke Fellowship.

3.15. Supporting and engaging with trainees through the Psychiatric Trainees Committee and ensuring trainee representation on relevant College committees and workstreams.

3.16. Implementing the College's SAS Doctor Strategy, to ensure we provide more consistent support to specialist grade and specialty doctors and enhance the feeling of belonging within our organisation.

3.17. Encouraging Locally Employed Doctors (LEDs) to become more involved in the College so that they have access to benefits and are supported through a long-term association with our organisation, giving a sense of belonging for LEDs within the RCPsych.

3.18. Reviewing and evaluating the College's Startwell and Staywell programmes, to ensure they are effective at supporting psychiatrists, including those with protected characteristics, at each appropriate stage of their career.

4. Promoting research in mental health

During 2024-26, we will work to contribute to the growth of mental health research and strive to turn around a situation where mental health does not receive its fair share of health research funding; the number of academic psychiatrists is in long-term decline and there is a paucity of mental health research.

We will do this by:

4.1. Promoting the spread of mental health research to more centres across the Four UK Nations, as well as internationally, in line with priorities identified by the College, enabling the involvement of psychiatrists, patients and carers, as well as collaboration between academic partners and mental health providers.

4.2. Supporting the development of sustainable careers for clinical academics, by lobbying the Department of Health and Social Care, NHS Workforce Training and Education (WTE) and the National Institute for Health Research (NIHR) and working with the Academy of Medical Royal Colleges to develop tenured clinical academic pathways. In addition, we will advocate for sufficient time in job plans, supporting peer networks and mentorship from experienced clinical academics.

4.3. Encouraging psychiatrists from minoritised and less represented backgrounds to become involved in research.

4.4. Maximising the use of the College's capacity to collaborate in research – including through the work of the College Centre for Quality Improvement and the National Collaborating Centre for Mental Health – by accessing a wide range of data and potential collaborators.

4.5. Completing a feasibility study for launching a National Collaborating Centre for Academic Psychiatry, and taking forward any of the resultant actions.

4.6. Prioritise work in specific areas of mental health research to fill gaps in current research and be best placed to take advantage of funding opportunities.

4.7. Lobbying the Statutory Education Boards and National Institute for Health Research to increase academic training posts in foundation, core and higher education.

4.8. Promoting and supporting psychiatric research across the Four UK Nations and internationally, through our collaboration with our publishing partner to continuously improve our academic journals, including the *British Journal of Psychiatry*, academic books, and the *BJPsych Journals* app. This will help to increase the use of the publishing portfolio by College members.

4.9. Delivering educational activities to narrow the gap between training and clinical practice.

4.10. Continuing to run and support the Public Mental Health Implementation Centre to deliver key research papers on the determinants of mental ill-health and how they can be tackled.

5. Advancing international psychiatry and wider mental health services

During 2024-26, we will continue promoting psychiatry and wider mental health services globally, by delivering increased services to psychiatrists and other mental health staff through a sustainable model. We will consolidate RCPsych's role as the leading international collaborator in raising standards of care for patients with mental illness and will enhance the RCPsych International Educational Offer.

We will do this by:

5.1. Continuing to support our six international divisions and increasing opportunities for participation of international members in College activities, including the international division chairs becoming full members of Council, to support international members to feel empowered to influence College decision-making.

5.2. Delivering an increased number of events for our international members, with a focus on online webinars and conferences. This will include the delivery of our skills-based training courses for members and non-members outside the Four UK Nations.

5.3. Working with the RCPsych Volunteering and International Psychiatry Special Interest Group (VIPSIG) to create useful guidance on volunteering, including promoting internationally recognised standards for volunteering.

5.4. Working with our international partners to highlight the global shortage of psychiatrists to governments and senior stakeholders, promoting a career in psychiatry in all the countries in which we work, and sharing evidence to show the benefits of having strong and well-resourced mental health services.

5.5. Enacting the RCPsych Emergency Response Plan following international disasters to provide support for mental health provision in countries affected by catastrophes.

5.6. Increasing promotion of quality networks, offering standards-based quality assurance and review to international partners.

5.7. Facilitating the development of evidence-based mental health clinical guidelines and mental healthcare pathways, always working to build capacity and to upskill and never to get involved with direct service delivery.

5.8. Seeking out partners to further develop our Train the Trainer programmes, with a particular focus on countries in Africa and South Asia. Through our development work, we will work to build capacity and upskill local workforce to guarantee sustainability.

5.9. Continuing to give guidance to patients on various conditions via our mental health information materials. We will translate these materials where possible.

5.10. Continuing to advocate for parity of esteem for mental health patients globally.

5.11. Ensuring that we work using online platforms wherever possible, to help support the College's commitment to becoming Net Zero by 2040. Working as leanly as possible, we will only allow staff and members to travel when necessary for the success of an identified objective.

5.12. Making our materials for medical students and foundation doctors available to medical students and early career doctors outside the Four UK Nations.

5.13. Continuing to deliver the Medical Training Initiative (MTI) to support international trainees to further their medical education in the Four UK Nations while also supporting NHS services. The scheme facilitates learning within NHS services from ideas generated in other nations and engaging with international psychiatrists and developing a network of ambassadors.

5.14. Ensuring that any College initiatives focused on the Four UK Nations follow the World Health Organization's standards on the international recruitment of health personnel.

6. Providing an excellent member experience and member engagement

During 2024-26, we will support our members and affiliates to achieve their professional potential by delivering an excellent membership experience and ensuring they feel engaged with by the College in a way that is transparent and open.

We will do this by:

6.1. Promoting openness and transparency to our membership. This will be through platforms such as the regular Question Time with the Officers online event (where members can put forward any questions they might have to the RCPsych Honorary Officer team), proactively publicising decisions taken by the Board of Trustees and Council via our website, producing outputs to illustrate how decisions are made at the College and changing the way Council is run to allow more debate among Council members.

6.2. Listening to our members – for instance, by carrying out membership surveys and listening exercises where appropriate and where the budget allows.

6.3. Holding the twice-yearly President's Debates and promoting them widely to our membership.

6.4. Delivering a more personalised interface for members via College digital communications.

6.5. Building on the success of the IT transformation, ensuring our members and other stakeholders continue to have an excellent user experience when using College IT platforms. This will be through ensuring that the continuing developments in IT such as accessibility improvements, AI, membership systems, membership emails, websites, social media and apps enhance member and employee knowledge and effectiveness. We will continue to adhere to best practice in the field, including making sure our cyber security protocols continue to be strong.

6.6. Enhancing the sense of belonging among all College members and affiliates through implementing the RCPsych SAS Doctor Strategy; encouraging consultants, SAS doctors and trainees to become more involved in roles at the College; supporting the Psychiatric Trainees Committee; continuing to celebrate key diversity events and exploring the possibility of a programme of arts and cultural events for psychiatrists.

6.7. Ensuring *RCPsych Insight* and *The Registrar* continue to help deliver a great membership experience – with accessible articles, excellent features and vibrant design.

6.8. Ensuring we provide our services and activities for members through a mix of online, face-to-face and hybrid events and meetings.

6.9. Continuing to embed the College's values across the membership to create a culture that is positive, empowering and inclusive for College members and affiliates.

6.10. Promoting membership of the College, as a key indicator of excellence and contribution to the specialty.

6.11. Providing a first-rate physical and online library and archive service for our membership.

6.12. Supporting our three devolved councils, 13 faculties and 15 special interest groups (SIGs), the eight English divisions and six international divisions.

7. Being the voice of psychiatry

During 2024-26, we will be the strong voice of psychiatry and wider mental health services to ensure we win the argument with decision-makers that psychiatry and better-funded mental health services are essential to the delivery of high-quality, person-centred care.

We will do this by:

7.1. Advocating for patients with mental illness, ensuring they receive equitable access to all forms of care and treatment, and ensuring their voices – particularly those from marginalised groups – are heard.

7.2. Courageously campaigning to promote psychiatrists, the benefits of the full range of psychiatric treatments including medication, social interventions, psychological interventions and physical interventions such as electroconvulsive therapy (ECT) and deep brain stimulation.

7.3. Continuing to analyse, disaggregate and produce high-quality data to inform our messaging around the benefits of psychiatry, the work of psychiatrists and the need to ensure sufficient resourcing for mental health services.

7.4. Continuing to develop our digital channels and to produce high-quality media content. We will utilise the College's diverse communication tools, including social media, to deliver historically high levels of positive media coverage in line with our media mentions and aggregate reach in 2021-23. Our media content will highlight the benefits of psychiatry, the work of psychiatrists and the biopsychosocial model, as well as setting out the need for greater investment in psychiatry and mental health services.

7.5. Continuing to improve the processes that support the production of high-quality outputs (including those that define the role of the psychiatrist and consultant psychiatrist), ensuring they are relevant and updated, fit for their intended purpose and well publicised. Outputs will include College reports, position statements and our public information materials.

7.6. Working with stakeholders to raise awareness across the Four UK Nations of all mental health problems, from mild to moderate conditions to severe mental illness (SMI), and to make the case for more investment in mental health services.

7.7. Continuing to engage with policymakers and governments to influence the implementation of the nine recommendations of our UK-wide Early Years report, *Infant and Early Childhood Mental Health: the case for action*.

8. Ensuring the effective use of College resources and delivering an excellent staff experience

During 2024-26, we will ensure the College continues to be governed in accordance with best practice and manages its resources effectively, as well as delivering an excellent staff experience.

We will do this by:

8.1. Guaranteeing our Board of Trustees reviews its performance on an annual basis to ensure the College is governed effectively in accordance with the Charity Commission's Governance Code for Larger Charities.

8.2. Ensuring the College's committees are managed in the most effective way possible, guaranteeing they provide a valuable platform for membership engagement.

8.3. Ensuring that members of Council – which is the prime College committee after the Board of Trustees – are given the opportunity to meet face to face where possible, in order to facilitate effective relationships and good decision-making.

8.4. Taking all necessary action to ensure the College continues on the path towards being Net Zero by 2040.

8.5. Developing diverse income streams through better use of our digital platforms, brand and intellectual property.

8.6. Ensuring we have excellent finance and HR systems in place to deliver effective financial control, business and people support, building management and health and safety procedures.

8.7. Continuing to run a dynamic and inclusive employee engagement strategy, which includes an attractive benefits and pay package that is competitive, to enhance recruitment and retention and ensure our employees feel supported and valued.

8.8. Delivering a comprehensive learning and development programme that helps employees at all levels enhance their skills and knowledge in line with best practice.

8.9. Continuing to support our Staff Representative Committee; Wellbeing at Work Forum; Sexuality, Gender Equality and Inclusion Forum; African and Caribbean Forum and Disability Forum – to boost the morale, wellbeing and sense of belonging among our employees.

8.10. Continuing to embrace, develop and utilise College expertise to best support psychiatrists.

8.11. Ensuring that we adhere to best practice and the law on data protection, as set out in the GDPR, to protect the personal data of our membership, employees, patients, carers and other relevant stakeholders.

8.12. Improving the induction and training of College Office bearers with advice on College values and the promotion of a safe, respectful forum for debate and decisions.

RC
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ROYAL COLLEGE OF
PSYCHIATRISTS

Continuing to deliver
excellence by advocating,
educating and collaborating.