

Fast Pitches, Big Futures

A Psychiatry Careers Day to Strengthen the Training Pipeline

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Introduction

Recruitment and retention with psychiatry remains a key workforce challenge across Scotland. The recent Royal College of Psychiatrists Workforce Census (RCPsych, March 2026) continues to highlight key issues with retention of consultant psychiatrists with a 28% true vacancy rate. For resident doctors in training this presents challenges, with previous exploratory work (State of the Nation Report, RCPsych in Scotland, October 2023) suggesting that resident doctors report limited exposure to the breadth of psychiatric specialty and subspecialty options for consultant practice and uncertainty about consultant practice.

Local discussions between Consultant psychiatrists involved in education and training also highlighted an increasing trend for resident doctors in core psychiatry training to not be progressing to higher specialist training, through choice, with many citing concerns around feeling unprepared, wanting additional time to decide on career direction or being concerned around the availability of a particular post or location for training. This aligns with the State of the Nation Report findings.

In addition, there were concerns raised that resident doctors did not view the role of the Consultant in a positive light with increasing workload pressures and additional responsibilities leading to reduced positivity amongst the consultant body. These perceptions align with findings contained within the Future Medical Workforce Project (Scottish Government, Future Medical Workforce Project Phase 1 Report, December 2025). The report provides a direct quote stating, "On the job teaching, training and support has also plummeted due to high clinical burden of seniors." - FY2, survey respondent.

Aim

To address these concerns, a psychiatry careers day was developed to provide a structured and positively framed exposure to a wide range of specialty and subspecialty areas within psychiatric practice to support informed career decision-making among resident doctors in core psychiatry training (CPT), foundation doctors (FY) and other locally employed doctors (LEDs).

Method

A half-day, in-person psychiatry careers day was piloted in January 2025 for CPT, FY and LEDs. The programme consisted of short, positively framed micro-talks (6–8 minutes) delivered by consultants from a broad range of psychiatric subspecialties (Table 1). This was followed by an open, self-directed discussion period in which attendees could engage with speakers based on individual interests, rather than rotating between stations. The event was repeated in January 2026 following the same format.

Feedback was collected following the event using an anonymous electronic questionnaire incorporating Likert-scale ratings and free-text responses. Descriptive analysis of quantitative responses and thematic review of qualitative comments were undertaken.

The survey asked six questions: How useful did you find the careers day event; Did attending the careers day influence your thoughts on any psychiatric specialty; Please expand on how the session has impacted or changed your thoughts or perceptions regarding particular specialties (free text); How likely would you be to attend future careers day events; What topics (regarding careers) would you like covered in potential future sessions (free text); Please provide any additional comments or suggestions (free text).

Table 1

Psychiatry Specialties Represented	
General Adult	Older Adult/Old Age
Intellectual Disability	Forensic
Psychotherapy	Child and Adolescent
Eating Disorders	Addictions
Liaison	Rehabilitation

Quantitative Results

Following the session in January 2025, the online survey was completed by attendees (n=5). This represented a small proportion of total attendees (around 25-30). The usefulness score demonstrated a mean of 8.6/10 (range 6-10, median 9). The likelihood of attending future career events was scored with a mean of 9/10 (range 7-10, median 10).

For the session held in January 2026, the online survey was completed by attendees (n=7). This represented a slightly higher proportion of the total attendees (around 20-25). The usefulness score showed a mean of 8.9/10 (range 8-10, median 9). The likelihood of attending future careers events was scored with a mean of 9/10 (range 8-10, median 9).

Qualitative Results/Free Text Comments

In terms of the qualitative results, we will consider each question set together across the two dates when the session was held. The first free text question asked participants to expand on how the session has impacted or changed their thoughts or perceptions regarding specialties. Themes arising from the responses included reaffirming or confirm previously held beliefs around choices, understanding how different strengths and personality types may be more suited to particular areas, increasing breadth of understanding about different areas of psychiatric practice and changing pre-conceived ideas about some areas of psychiatry. Example quotes included:

- *I knew what I wanted to do and it hasn't changed my mind, interesting to hear and consider other choices though*
- *Impacted my thoughts on what to prioritise when considering future specialty choice, thinking more about how the job fits in with my interests and also personality and work/life balance.*
- *As an FY2, I learned about the different psych specialties- good to learn about what life is like as a consultant. I also wasn't aware about the different specialties*

The second free text question asked participants what topics would they like to be covered in future sessions. There was less overall feedback for this question. Themes emerging included a desire to understand the process of application for psychiatry training (core and higher), a desire to understand the practicalities of placements such as competition ratios and location of posts, a suggestion of including current resident doctors in higher training to talk about applications, interviews and self-assessment processes, a suggestion of including what a normal month would look like in each subspecialty, and specific requests to include perinatal in future events. Example quotes included:

- *Talk from higher trainees would be helpful to have info on higher training applications/ interviews and self-assessment. This obviously forms a large part of career options and would be useful to feel more prepared for towards the end of core training.*
- *It would be useful to get more in depth information about to get the speciality in higher training like perinatal speciality*
- *Application process for psychiatry*

The final free text question asked for any additional comments. There were limited responses with the most common theme being an expression of thanks for holding the session.

Discussion/Conclusion

A consultant-led, subspecialty-collaborative psychiatry career day using short talks and resident doctor-directed discussion is a feasible and well-received intervention. Early evaluation suggests this can broaden awareness and positively influence career thinking. The results demonstrate that resident doctors found the session useful and would attend future careers events if offered. Free-text comments indicate that the session can help to solidify existing career aims, challenge pre-existing perceptions about particular areas of psychiatry and also offer a greater breadth of knowledge about the option and how they may fit the individual, rather than the opposite way. It is possible that this early understanding is key to increase longer term retention of psychiatrist in fulfilling posts that match their own strengths and personality.

There are key developments which can be incorporated into the day, including information on psychiatry training applications and involvement of higher resident doctors in the session. Furthermore, ongoing efforts will be made to ensure the full range of different specialties are represented.

Overall, it appears that resident doctors value this day. Whilst it is too early to understand the impact on long-term retention or careers, it does appear to add some value to the current experience of resident doctors in psychiatry training.

References

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