- establish if this is a meaningful and acceptable training model for this topic
- establish if there are more relevant themes that this training session should be focusing on and if so, what these are?

Methods. A total of 8 trainees were interviewed between December 2022 and May 2023, having recently completed the training. A thematic analysis was undertaken by two researchers following established recommendations, seeking to bring out latent themes with an inductive, interpretative approach within a constructionist paradigm.

Results. Trainees attended with existing knowledge, skills and attitudes about discrimination, harassment and bullying, and about the training session itself.

Both the simulation and debrief were valued by trainees. The debrief was more than just a discussion. Portrayals of discrimination in the videos/simulation could have been more subtle, and tackled a more diverse range of examples such as LGBTQ+.

The learning objectives were largely met, and related to real challenges that trainees face. Trainees took away more than this, citing learning related to team cohesion and developing their sense in which discrimination in the context of mental illness requires special consideration.

Conclusion. This model of training is providing good value in addressing a topic of strategic importance in a novel way. The impact on empowerment and skills development is likely to be particularly valuable in impacting real world responses to workplace experiences of discrimination. Promoting team cohesion and a space to thoughtfully consider the special case of discrimination in the context of mental illness are important additional benefits. The simulation/debrief model is likely to be crucial, providing learning which would be inaccessible to didactic or e-learning based modes of delivery. The simulation materials may be improved by depicting LGBTQ+ issues, and a more subtle portrayal of discrimination. While this evaluation was situated in a psychiatric context, it could have wide applicability to tackling similar challenges throughout NHS workplaces.

SPEED (Supporting Psychiatry Experience and Education in District-Hospitals), a Pilot Program for Foundation Doctors

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Aims. This pilot program aimed to enhance the psychiatry experience for foundation doctors (FYs) working at Ayr Hospital by identifying perceived areas where psychiatric support would benefit training, development or education. Subsequently strategies were aimed to be implemented by the psychiatry liaison service to enrich FYs' experience during their medical and surgical rotations. Feedback was aimed to be obtained to determine if the program would have value to other district hospitals and grades of junior doctors.

Methods. Unstructured interviews with 4 FYs were conducted in October 2023 to explore the current experience of psychiatry in medical or surgical placements at Ayr Hospital. Identified themes included barriers to completing supervised learning events (SLEs)

for mental health cases (a requirement of the 2021 Foundation Curriculum), limited exposure to psychiatry teaching opportunities, and obstacles to pursuing development of interest in psychiatry (such as time to shadow psychiatry, or discuss career prospects in psychiatry).

A pilot program was initiated in November 2023 to improve the experience and education of psychiatry for FYs. This involved:

- Providing dedicated time on wards for FYs to complete SLEs with a member of the liaison service.
- Providing time for FYs to shadow the role of liaison psychiatry.
- Providing additional teaching tutorials, focused on topics chosen by FYs.
- Providing the opportunity to discuss and develop interest in psychiatry.

A survey to obtain both quantitative and qualitative feedback was sent to each FY that engaged in the program.

Results. 17 FYs engaged in the pilot program, with 13 providing feedback. All respondents felt the program increased their knowledge and confidence in approaching cases with a psychiatry element. They also all found the experience positive and a productive use of time. All deemed the program would be useful for other foundation trainees in medical hospitals. Free text feedback highlighted the program's value in facilitating case discussions, removing obstacles in completing mental health SLEs, providing useful relevant tutorials and providing opportunity to discuss further interest of psychiatry.

Conclusion. The pilot program successfully achieved its aim to improve FYs' experience of psychiatry. Although not measured in the survey, the program also appeared to foster positive relationships between the liaison service and junior medical staff. It also helped identify new appropriate referrals for the liaison service. An expansion of the program is planned to other district hospitals in Ayrshire and Arran, including consideration of expanding the participation to wider members of the junior doctor cohort.

A Qualitative and Quantitative Analysis of a Pilot Psychotherapy Training and Simulation Workshop for a Cohort of Psychiatry Core Trainees Starting Their Long Case in SABP Foundation Trust

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Aims. Background: The uncertainty and anxieties about psychotherapy long case among trainees was high. This training was designed to alleviate stress and to increase knowledge and confidence among trainees.

The Primary aim of this project was to improve individual skills and awareness for Psychodynamic Psychotherapy. Secondary aim was to get feedback from trainees to improve future psychotherapy training.

The Null hypothesis (H_0): There is no difference between the Pre and Post training questionnaire scores.

Methods. This is a blinded study where the researcher cannot identify the participants. A mixed study approach is taken, with

both quantitative and qualitative analysis used for this study. A pre training and post training questionnaire was provided to participants. This study collected quantitative data in the form of Likert scale questionnaire as a primary approach to test the hypothesis. The qualitative data was collected by open ended questions. The qualitative part is to understand the trainee's problems and what improvements have to be made in the workshop, to generate a structural model for effective practical psychotherapy training.

The sample consists of 13 Psychiatry Core Trainees at different levels of their training and 1 speciality doctor. 14 feedback questionnaires were available, 1 questionnaire was excluded as it did not fit the inclusion criteria.

Results. The paired *t*-test was used for all the three quantitative questions: Knowledge of psychotherapy, Theoretical and Clinical Application of Psychotherapy. The t-test showed the difference between pre-and post-questionnaires scores to be statistically significant (p value < 0.05). So, we reject the Null Hypothesis. The effect size was large, with Cohen's d score > 0.8 for all three questionnaires.

Thematic analysis of Qualitative data was done. Codes were formed from the supporting quotes. Themes were derived from the similar codes. Four themes were created:

- Challenges experienced by core trainees.
- Emotions and confidence.
- Knowledge acquired.
- Suggestions for improvements.

Conclusion.
1. We can conclude that the Psychotherapy workshop was effective, and the Core Trainees have better insight than before.
2. The qualitative analysis results were in accordance with the quantitative analysis.
3. Challenges experiences by trainees in managing their own emotions were addressed in the training. Quote (IV) "it was very good! calmed nerves."
4. There was increase in knowledge and confidence among trainees.
5. Suggestions were full day of training and to have more role playing; to demonstrate the psychological concepts like transference, countertransference, defences, resistances in role play.

A Novel Model for Student-Led Justice, Equity, Diversity and Inclusion Training at a UK Medical School

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Aims. It was identified that at Warwick Medical School (WMS) there was no provision for in-person, student-led Justice, Equity, Diversity, and Inclusion (J, E, D&I) training for both staff and students. A novel approach using case-based studies and group discussions was developed through a student-staff collaboration with the aim of participants gaining a greater understanding of the impact of various institutional practices, from the perspective of students with first-hand experience of the subject matter. The training aimed to promote a greater understanding of intersectionality, and how institutional practices can disproportionately disadvantage students depending on their identity, experience, and background. Participants were encouraged to reflect upon the cumulative effects of systemic disadvantages in higher and medical education. The subsequent impact upon academic attainment, mental health and wellbeing was a further focus.

Methods. Around 350 students and staff from across WMS attended the training sessions over 6 months. These sessions were led by a team of student facilitators who possessed subject expertise in topics related to J, E, D&I, in addition to representing the communities that were discussed in terms of inclusion. The content was delivered in the form of case-based scenarios and small and wider group discussions. Content was based on discussions surrounding racism, classism, ableism, homophobia, sexism, Islamophobia, and transphobia. Discussion was encouraged and facilitated to promote reflection on personal practices and acknowledgement of where future efforts to improve practice should be directed.

Results. Results indicate statistically significant shifts in participant knowledge and confidence levels in pre-post survey data, with qualitative feedback emphasising the strength of the student-led format. Faculty and students commented on the benefit of student-lead case-based teaching and student facilitator reflections highlight personal growth and the challenges of navigating power dynamics.

Conclusion. Overall, this project illustrates the efficacy of a student-led change initiative in fostering inclusivity and positive change within educational environments and provides an original model to explore for future partnership-working across the medical school. The student-led approach facilitated mutual learning between staff and students, bringing greater focus to how student attainment and wellbeing can be impacted by institutional practices.

A Practical Guide to Developing a Research Communication Strategy for Low Income and Middle-Income Countries

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Aims. Despite increasing research activities in low- and middle-income countries (LMICs), the impact of research is challenging to measure and assess, given the myriad of systemic challenges that exist in these settings. Socio-political constraints, limited education prospects, cultural stigma, restricted access to training and development, and the poor research infrastructure in low-resource settings contribute to the widening gap between evidence and policy, and in turn, creates serious barriers to mental health care in these countries. One of the main barriers to the effective implementation of research in LMIC settings is poor governance and dissemination. Given the lack of standard