

Methods. This descriptive medical educational study was based on official training documents and interviews with local faculty members involved in the training.

Results. The entry requirement of the four-year Moroccan postgraduate psychiatry residency programme includes the completion of 1 year of foundation training and passing the entrance examination consisting of psychiatric semiology and pharmacology. The postgraduate residency programme is run by the local universities in collaboration with the Ministry of Health and accredited by the Moroccan government. Trainees have the option of taking up a voluntary or contractual position with the government or University Hospitals. All trainees will go through 34 months of general adult outpatient and inpatient, while liaison psychiatry training starts from the second year until the end of the training. On top of the core rotation, a trainee can opt for two months in old age and neuropsychiatry postings. Child and adolescent rotation is currently not available. Addiction psychiatry training is optional and can be done through a university diploma. The 4th year is a 12-month elective posting in any discipline that is relevant to psychiatry, which can be done either locally or abroad. Teaching methodologies involve lectures, seminars, ward rounds, case conferences, journal clubs, and skill training workshops. Formative assessments included case-based discussions and mini-clinical evaluation exercise. There are multiple high stakes summative assessments at year 1, year 2, year 3, and year 4. The summative assessment strategies includes modified essay question, clinical short case and long case. Viva voce is used to assess competency in research. Different mandatory skill competencies include electroconvulsive therapy, psychotherapy, and research.

Conclusion. The advancement of local postgraduate psychiatry residency training in Morocco has improved the access of local trainees to quality training. Similar to other developing countries, Morocco requires more psychiatrists to improve the psychiatrists to population ratio so that the mental service can become more accessible to the local population.

A Systematic Approach for the Interview of the Application to Psychiatry Specialty Training: The “I AM” Approach

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Aims. Job interviews are the platform for employers to identify suitable candidates for vacant posts, i.e. those who are able to demonstrate a certain set of competencies specified in the job description. In the recent psychiatry specialty training (ST) application process, candidates are required to propose a management plan for two complex scenarios. This interview can be stressful given the high-stakes nature of the outcome, i.e. the successful enrolment into a training programme of a preferred deanery. Candidates who are unable to have an organised approach to problem-solving will likely have an unfavourable result. To overcome this difficulty, a simplified “I AM” approach is being proposed to assist applicants to organise their thoughts during their ST application interview.

Methods. The “I AM” approach stands for “Issues, Assessments, and Management”, which is adapted from the “Handbook of Psychiatry: Surviving Consultation Viva Examination of Malaysian Conjoint Board”. The “Issues” are the problems

identified in a scenario, “Assessments” are the investigation required to get a clearer picture of the problems, and “Management” is the action plan to solve the problems. This approach was piloted with five applicants of ST in psychiatry prior to their interview practices.

Results. For a complex clinical case scenario, the “I AM” approach can be put into the matrix of 3 × 3 tables together with a biopsychosocial model to ensure the issues in different domains are explored thoroughly. Further sub-classification into necessary subheadings, including ideas, concerns, and expectations from different parties, can be included in the assessment matrix. Lastly, a management plan using a multidisciplinary team and collaborative decision-making model with the patient and family can be proposed. For a complex managerial scenario, the seven pillars of the National Health Service’s clinical governance model involving different stakeholders can be incorporated into the “I AM” approach to explore problem-solving strategies from different angles. Positive reactions had been received from all five trainees (Kirkpatrick’s Evaluation Model Level One).

Conclusion. The “I AM” approach can be flexibly applied in different problem-solving scenarios and it works well with other models. The approach may be limited by inadequate information and a failure to prioritise. Further systematic evaluation of the effectiveness and generalisability of the “I AM” approach to other disciplines is required.

The Royal College of Psychiatrists Physician Associate Inceptorship Programme: Developing Educational Programmes to Support the Integration of This New Role in Psychiatric Services

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Aims. Physician associates (PAs) are becoming more commonplace in psychiatric services in the UK to help address long term workforce difficulties. In 2019, the NHS Long Term Plan detailed a commitment to transforming mental health care in England recognising that services were not meeting current or future increase in demand. Health Education England’s (HEE) report, Stepping Forward to 2020/21: The Mental Health Workforce Plan for England, described a longer-term strategy to expand the mental health workforce, including recruiting 5,000 people into ‘new roles’ including physician associates. The NHS Mental Health Implementation Plan 2019/20–2023/24 stated an aim of recruiting 140 PAs to the workforce over five years in addition to the requirements specified in the HEE report. HEE and the Royal College of Psychiatrists (RCPsych) have sought to support the integration of PAs into psychiatric teams through the development of the Inceptorship programme. The aim was to develop a bespoke training programme for PAs to bridge the gap between university and working in mental health to be rolled out nationally.

Methods. Since 2018, Sheffield Health and Social Care Trust (SHSC) have been providing an Inceptorship Programme for PAs at the trust. Unlike with trainee doctors, there was no curriculum that could be followed. The programme covers the aetiology, diagnosis and management of common psychiatric problems, communication skills and reflective practice. This programme

has provided the basis for the RCPsych Inceptorship Programme supported by HEE.

Results. The SHSC programme has been well received by the 11 PAs that have been through the programme, with all PAs recommending other mental health organisations take a similar approach. There have been many additional benefits of the sessions. They allow PAs to gain peer support and it has been a forum to raise issues which often arise when integrating new roles into pre-existing MDTs.

Conclusion. The RCPsych Inceptorship Programme is a PA specific educational programme. It is an important tool in addressing the gap between variable mental health experience as a student (which is limited to a 3-week placement and is variable in content) and working in a psychiatric setting. RCPsych and HEE recommend that all mental health organisations employing PAs implement an inceptorship programme based on the work carried out at SHSC. These should comprise of regular, protected sessions that provide PAs with bespoke mental health training to support their integration into psychiatric multidisciplinary teams. HEE have agreed to provide funding to help organisations facilitate it.

Physician Associates in the Frame: Developing a National Competence Framework for Physician Associates Working in Mental Health

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Aims. Physician associates (PAs) are becoming more commonplace in psychiatric services in the UK to help address long term workforce difficulties. The 2019 NHS Long Term Plan detailed a commitment to transforming mental health care in England recognising that services were not meeting current or future increase in demand. Health Education England's (HEE) report, *Stepping Forward to 2020/21: The Mental Health Workforce Plan for England*, described a longer-term strategy to expand the mental health workforce, including recruiting 5,000 people into 'new roles' including physician associates. The NHS Mental Health Implementation Plan 2019/20–2023/24 stated an aim of recruiting 140 PAs to the workforce over five years in addition to the requirements specified in the HEE report. Competence frameworks make the link between evidence and practice and can be a valuable basis for training, an agenda for supervision and a guide for self-monitoring and personal development for people working in the role.

Methods. The competence framework was developed by the National Collaborating Centre for Mental Health (NCCMH). The work was overseen by an expert reference group, comprising experts in training PAs in mental health, PAs, researchers and experts by experience, all selected for their expertise in research, training and service delivery. The completed framework was then sent to relevant stakeholders including the Faculty of Physician Associates and patient groups for comment and adapted accordingly.

Results. The completed framework has been arranged into seven domains: Knowledge of Mental Health, Professional/Legal Issues,

Engagement and Communication, Diagnostic Assessment and Treatment Planning, Interventions, Team Working and Metacompetences. This reflects the expected roles and responsibilities of PAs working in mental health.

Conclusion. The Competence Framework for PAs will help those involved in mental health care services who wish to deepen their understanding of the PA role, and will be useful to team members working with PAs, to their managers and to commissioners. It will support the work of PA supervisors and peer coordinators, and those delivering education and training to them. It also brings a level of standardisation of the role. More work will be needed to adapt the Competence Framework for PAs for specialist contexts, such as in dementia care or children and young people's services.

Curriculum Development: A National Curriculum for Physician Associates in Mental Health

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Aims. Physician associates (PAs) are becoming more commonplace in psychiatric services in the UK to help address long term workforce difficulties. The 2019 NHS Long Term Plan detailed a commitment to transforming mental health care in England recognising that services were not meeting current or future increase in demand. Health Education England's (HEE) report, *Stepping Forward to 2020/21: The Mental Health Workforce Plan for England*, described a longer-term strategy to expand the mental health workforce, including recruiting 5,000 people into 'new roles' including physician associates. The NHS Mental Health Implementation Plan 2019/20–2023/24 stated an aim of recruiting 140 PAs to the workforce over five years in addition to the requirements specified in the HEE report. A curriculum for PAs working in mental health would set out the competencies required to work in mental health services.

Methods. The curriculum was developed by the National Collaborating Centre for Mental Health (NCCMH). The work was overseen by an expert reference group, comprising experts in training PAs in mental health, PAs, researchers and experts by experience, all selected for their expertise in research, training and service delivery.

Results. The overarching aims and objectives of the curriculum was to convey a practical understanding of the attitudes, knowledge and skills that underpin the role, thus enabling PAs to offer effective and value-driven support to patients.

The completed curriculum has been arranged into seven modules: Knowledge, Professional/Legal Issues, Engagement and Communication, Diagnostic Assessment and Treatment Planning, Interventions, Managing the Interface of Mental and Physical Health and Team Working. This reflects the expected roles and responsibilities of PAs working in mental health.

Conclusion. HEE and the Royal College of Psychiatrist have recommended all mental health organisations implement an educational programme for new PAs. The curriculum will inform the training requirements for PAs and standardise the training they