

Introduction: Burnout is a widespread problem with far-reaching implications for mental health. Recent studies on working conditions in Morocco have drawn attention to the increasing prevalence of psychosocial hazards, notably stress and burnout, in various professions. The emergence of burnout is mainly determined by the intricate interplay of organizational, environmental, and individual factors. In education, the teaching profession is susceptible to various burnout symptoms. Educators can mitigate this syndrome by maintaining a positive outlook driven by a strong sense of self-efficacy.

Objectives: This study investigated the correlation between academic burnout syndrome and personal resources, specifically a sense of efficacy.

Methods: A cross-sectional survey of 160 Moroccan trainee teachers, with an average age of 27.94 ± 5.44 years, was conducted. Data were collected through a self-administered questionnaire that included the Maslach Burnout Inventory-Student Survey (MBI-SS) and Teachers' Sense of Efficacy Scale (TSES). The MBI-SS evaluated academic burnout across three dimensions: emotional exhaustion, cynicism, and academic efficacy, whereas the TSES examined efficacy for classroom management, student engagement, and instructional strategies. The questionnaires were translated into Arabic and validated for use in the Moroccan context.

Results: The findings revealed a moderate and statistically significant correlation between efficacy for classroom management and the two components of efficacy related to instructional strategies ($r=0.32$; $p<0.001$) and student engagement ($r=0.49$; $p<0.001$). Additionally, a significant and positive correlation was observed between instructional strategies' efficacy and the efficacy for student engagement ($r=0.23$; $p<0.01$). A moderate and significant correlation was found between emotional exhaustion and cynicism ($r=0.45$; $p<0.001$), whereas academic efficacy and cynicism were negatively and significantly correlated ($r=-0.13$; $p<0.05$). It is worth noting that the key component of academic burnout, "emotional exhaustion," was significantly related to academic efficacy ($r=-0.58$; $p<0.001$). Additionally, Pearson's correlation test demonstrated a positive and statistically significant correlation between emotional exhaustion and efficacy for student engagement ($r=0.14$; $p<0.05$). Furthermore, the correlation between academic burnout and self-efficacy showed a negative and statistically significant association ($r=-0.13$; $p<0.05$).

Conclusions: Trainee teachers face a range of stressors that affect their well-being. By focusing on personal traits, well-being can be improved and burnout mitigated. This study highlights the key role of self-efficacy as a critical resource in preventing academic burnout, particularly among teachers at the start of their careers.

Disclosure of Interest: None Declared

EPV1079

Training on Addressing Patients' Values (including Spirituality and Worldview) in Decision Making

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Introduction: Patients' values are relevant in patient-centred care (PCC) as awareness and recognition of these can lead to better decision making and improved outcomes. Training in decision making is sorely lacking, especially in the area of spirituality and worldview.

Objectives: Our poster describes a training workshop to provide such medical education to healthcare professionals. The half-day training covers: importance of addressing patients' values in decision making; using decisional aids; role of spirituality and worldview of the patient.

Methods: Clinicians of the hospital, including doctors, nurses and allied healthcare professionals were invited to attend the training. The evaluations by the participants for the workshops conducted in 2021-2023 were collated and presented.

Results: Four workshops in 2021 to 2023 were conducted, with a total of 43 participants. We achieved overall ratings of above average and excellent in more than 80% of responses; content relevance and usefulness to work, presentation and facilitation were similarly rated. Most participants would recommend it to colleagues.

Conclusions: The "Addressing Patients' Values in Decision Making" workshop for clinicians will allow the hospital to promulgate a culture of quality care through patient engagement.

Disclosure of Interest: None Declared

EPV1081

"Thoroughly out of my depth - A quality improvement project to improve junior clinician's confidence in undertaking adult ADHD clinic appointments

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Introduction: There has been a 1000% increase in referrals for assessment of adult ADHD within Scotland over the past three years (The Scottish Government. 2023. *NAIT adult Neurodevelopmental Pathways Report*). These referrals are sent by general practitioners to the local community mental health team. The most junior clinicians (doctors who are pre-membership with the Royal College of Psychiatrists) in the team are often responsible for undertaking the initial assessment of these patients. Patients have on average waited almost a year to be seen and expectations are high.

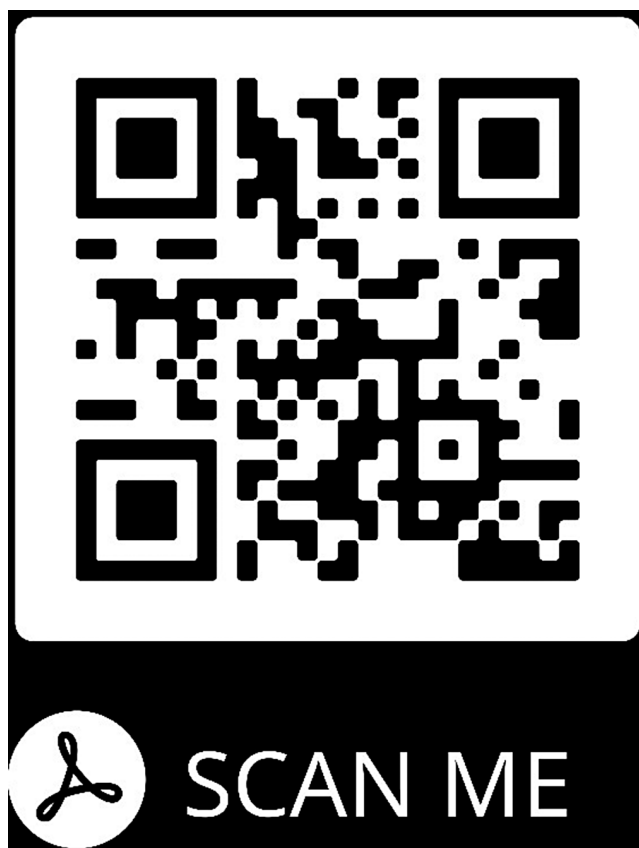
Objectives: The diagnosis of ADHD can be challenging, and adult ADHD is still a relatively new and evolving diagnostic entity. We set out to explore how junior clinicians were coping with this in their daily practice.

Methods: We developed a questionnaire that was sent to all junior clinicians working within Argyll & Bute ($n=8$) via an anonymised email link. The link was open for 1 week and then results were analysed.

Results: The response rate to our survey was 87.5%. Prior to starting their current roles none of the respondents had ever undertaken an ADHD assessment before. All respondents answered "No" when asked if they felt they had adequate

knowledge on ADHD in order to perform assessments. Only 14% (n=1) felt they had access to adequate resources about how to make an ADHD diagnosis. Participants were asked on a scale of 1-10 (1= not at all, 10= very) to rate their confidence in conducting ADHD assessments. The average confidence score was 2.43. There was a space for free text feedback in which participants reported the following: “felt thoroughly out my depth”, “I felt chucked in the deep end”, “I felt very under qualified”

Image:



Conclusions: Our results showed that junior clinicians did not feel confident or knowledgeable about undertaking adult ADHD assessments. In response to this we have now produced, in association with the consultant psychiatrists within our health board, an informative and engaging quick reference poster which explains how to undertake an ADHD assessment (see QR code attached as Image 1). It contains useful pointers about diagnosis, and more importantly guidance on language/phrases to use when explaining to patients whether or not you feel a diagnosis of ADHD is appropriate. It then also explains next steps that can be offered i.e. psychological support/medication options and how to prescribe these. We plan to send out a repeat questionnaire to the next cohort of junior clinicians to assess if they have improved confidence in managing and diagnosing ADHD following this intervention.

Disclosure of Interest: None Declared

EPV1083

Enhancing Psychiatry Resident Bonding and Education using an Escape Room Challenge Activity

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Introduction: An “escape room” is a game requiring teamwork and problem-solving during which a series of puzzles are solved to escape a locked room. Various escape room activities have been designed for healthcare professionals, including internal medicine residents and nursing students (Anderson *et al.* Simulation & Gaming 2021; 52(1) 7-17; Rodríguez-Ferrer *et al.* BMC Med Educ 2022; 22:901; Khanna *et al.* Cureus 2021; 13 (9) e18314). Escape rooms provide an opportunity for social activity, an important component of resident wellness (Mari *et al.* BMC Med Educ 2019; 19(1):437). This abstract describes an escape room challenge designed and implemented at our psychiatry residency program quarterly wellness afternoon event, which is an afternoon session dedicated to resident wellness.

Objectives: The objective of this project was to design and implement an escape room challenge containing multiple game mechanics, including hidden roles, information asymmetry, acting, logical deduction, and spying. This activity was conducted to enhance bonding among residents while reinforcing knowledge in psychiatry.

Methods: We designed and implemented an escape room for 22 residents. Residents were divided into four teams each tasked with completing a sequence of puzzles to open the final lockbox. Two novel mechanics were added to the activity. Each team had a “clue holder” with clues to help solve all the puzzles. This team member had to conceal their identity because, if any of the other teams identified this person, the original winning team would have to give up the prize to the team that guessed the identity of this person. One member of each team was assigned a “spy” role whose mission was to make it hard for the clue holder to reveal all the clues. An anonymous post-activity survey was completed using Google Forms.

Results: The script was set in a fictional, abandoned psychiatric emergency room. The first task was a visual puzzle of a historic figure in psychiatry. The second activity involved residents guessing the psychotropic medication being acted out by another resident in the style of charades. The third activity required residents to apply developmental milestones to decode a combination lock. The fourth puzzle involved residents solving riddles by using information gathered from resident profiles on the residency program website.

Eleven (50%) residents completed the post-game survey. All residents answered true or very true that they enjoyed the game and that participation helped them better connect with their peers. Eight (73%) residents answered true or very true that they learned something from the activity.

Conclusions: An adapted escape room challenge is a novel wellness activity that enhance resident collegiality, teamwork, and bonding. All residents who completed the post-activity survey indicated that