BJPsych Open S109

Aims. The skill of critical appraisal is mandatory for evidence-based psychiatric practice although the process of learning can be tough for busy psychiatrist trainees. Ironically, reading alone does not translate into skill acquisition. The accessibility to conventional journal clubs may also be limited for doctors working in busy non-academic training centres. Therefore, attending an intensive workshop on critical appraisal skills can be a viable solution. This study elucidated the experience of using an innovative approach, i.e. Multiple Mini Journal Clubs (MMJC), to improve Malaysian trainee psychiatrists' critical appraisal skills.

Methods. A one-day workshop was conducted for 19 participants who were preparing for MRCPsych Paper B, using the combination of 1) a pre-recorded video lecture with a two-hour question and answer session; 2) three 45-minute stations in a group of three persons to practice critical appraisal of a cross-sectional, a validation, and a randomised controlled study. A standardised approach, i.e. Critical Appraisal in Five Expressed Steps (CAFES), was used by facilitators. CAFES involved asking and answering the following big heading questions while incorporating other standard critical appraisal techniques under each of the headings: 1) What is the research question; 2) Can the research methodology answer the question; 3) Does the result make sense; 4) Are the findings translatable to my setting; 5) How to improve the study if I were to conduct a similar study. Three formative assessments were carried out using Single Best Answer and Extended Matching Items. Qualitative feedback and informed consent were collected.

Results. Hundred per cent of participants agreed that their objective of attending the workshop had been achieved through the MMJC, i.e. learned both the theory and skill of critical appraisal which allowed immediate translation into practice during the MMJC. Nevertheless, there was no statistical difference in participants' achievement for pre-, mid- and post-workshop formative assessments, i.e. median of 7/25, 7/28, and 8/27 respectively. Positive responses toward MMJC included less performance anxiety in a small group, active interaction, individualised feedback, and fun. The challenges faced included the need for strict time management and a big group of facilitators. Suggestions for improvement included the extension of the workshop duration and breaking up the lecture into several sessions.

Conclusion. Further improvement and re-evaluation of the effectiveness of MMJC is required to optimise learning outcomes.

Abstracts were reviewed by the RCPsych Academic Faculty rather than by the standard BJPsych Open peer review process and should not be quoted as peer-reviewed by BJPsych Open in any subsequent publication.

Leadership Development as a Medical Educational Fellow in Psychiatry: Reflection After Two Years

Dr Jiann Lin Loo* and Mrs Andrea Taylor-Clutton Betsi Cadwaladr University Health Board, Wrexham, United Kingdom

*Presenting author.

doi: 10.1192/bjo.2024.307

Aims. The disruptive force of the COVID pandemic has highlighted the importance of leadership for all medical educationists to prepare the future workforce with the ever-changing healthcare practice. Early career medical educators must attain leadership skills as early as possible. The only way to learn leadership is through experiential learning, i.e. learning while leading. Therefore, this self-study is aimed to share the reflection on the journey of a psychiatrist specialist trainee from North Wales in leading different psychiatric educational projects.

Methods. This is self-study research on the reflective experience of working as a medical educational fellow while undergoing specialist training in psychiatry from January 2022 to December 2023. The data reflected were sourced from publications, end-of-project reports, meeting minutes, participant and peer feedback, personal records, educational portfolios, and appraisals. Results. Nine psychiatric educational quality improvement projects (QIPs) had been conceptualised and implemented, i.e. three series of mock exams (Special Preparation in CASC Exam), continuous coaching and mentoring in portfolio-based learning (Café of RCPsych Portfolio), continuous mentorship in academic writing (Mini North Wales-Academic and Research Clinic), continuous peer supervision in psychotherapy (Gogledd Cymru-Peer Supervision in Psychiatry), mock interview for job application, digitalisation of departmental induction, psychopathology training (3P: Psychopathology for Postgraduate Psychiatrists Trainee), and two international collaborative educational programmes (Perinatal Psychiatry Perinatal and Infant Psychiatry Educational Programme of Wales, Tanzania, and Malaysia; and Bhutan Old Age Psychiatry Educational programme). Five peer-reviewed publications had been completed while the other academic writings were ongoing. Three of the projects (33.3%) were expanded from a Welsh initiative to the whole United Kingdom and a bigger team was formed to ensure sustainability could be achieved. Two projects (22.2%) started as an international collaborative project. All projects provided opportunities for the members of the QIP to obtain workplace-based assessments and evidence for yearly appraisal while improving the educational experience of trainees and professionals in the field of mental health.

Conclusion. All challenges come with the opportunities to be innovative in problem-solving. Communication skills and people management are crucial for resource gathering and conflict resolution. Lastly, talent development is required as part of the effort to sustain all the projects.

Abstracts were reviewed by the RCPsych Academic Faculty rather than by the standard BJPsych Open peer review process and should not be quoted as peer-reviewed by BJPsych Open in any subsequent publication.

Consult, Connect, Collaborate: Cross-Sector Approach to Recruitment and Retention in Psychiatry

Dr Nina MacKenzie 1,2* and Dr Alastair Cook 1,2

¹Scottish Government, Edinburgh, United Kingdom and ²NHS Lanarkshire, Motherwell, United Kingdom

*Presenting author.

doi: 10.1192/bjo.2024.308

Aims. Mental ill-health is one of Scotland's most pressing challenges, with an expectation of increased workload for health services. There are substantial vacancies in psychiatry specialties. Fill rates for core psychiatry training in Scotland have improved dramatically, filling at 100% since 2020. However, higher training fill rates have remained lower, with 68% filled in 2022. In response, the Scottish Government established a working group to examine the issues, both common and unique, to the whole psychiatry pipeline from training through to the consultant workforce, over two phases. The group aims to:

- Set out the current landscape.
- Consider the factors which influence recruitment and retention.
- Collate and analyse quantitative and qualitative evidence.
- Develop a set of recommendations.

S110 Accepted posters

Methods. A representative group was convened, including SG Health Workforce and Mental Health Directorates, NHS Education for Scotland (NES), the Royal College of Psychiatrists Scotland, Health Board representatives (Associate Medical Directors, Clinical Directors, Directors of Medical Education) and trainee doctors. Representatives offer first-hand experience of training and working in psychiatry, knowledge and expertise in training programme management, workforce modelling data analysis, experience of a range of approaches to improve health workforce recruitment (including the use of financial incentives). The group has met 4 times since May 2023, with SG Health workforce directorate providing secretariat support.

Results. Through the formation of this group, several areas affecting recruitment and retention were, and continue to be, addressed: enhanced exposure to psychiatry via FY1 simulation training, and increased number of FY2 psychiatry placements; the design and recruitment of clinical development fellow doctors; flexibility of training posts and the expansion of run through training programmes; using data to better support workforce modelling; trainee support, including tailored IMG support; the use of attraction campaigns and incentives in other devolved nations/specialties; alternative ways to provide clinical supervision; examining diversification of the MH workforce; international and domestic recruitment options.

Conclusion. Several actions have been identified and progressed as the work of the group develops. Work is ongoing, and its impact will take time to emerge. This cross-functional group encouraged connectivity, conversation and network-building, striving to amplify differences and reduce power differentials, challenging traditional views. However, as with groups of this nature, there could be internal conflict where members fight strongly for 'their corner'. Such a broad membership affects the development of a cohesive identity. Membership is largely voluntary, and so competing demands from the members' existing responsibilities adds time pressure and stress, impacting commitment and productivity.

Abstracts were reviewed by the RCPsych Academic Faculty rather than by the standard BJPsych Open peer review process and should not be quoted as peer-reviewed by BJPsych Open in any subsequent publication.

Emotional Intelligence (EI) Workshops for Core Trainee Psychiatry Doctors

Dr Kuljit Mandair* and Dr Amitav Narula

Black Country Healthcare NHS Foundation Trust, Black Country, United Kingdom

*Presenting author.

doi: 10.1192/bjo.2024.309

Aims. Emotional Intelligence (EI) is a skill that can help doctors be more effective leaders, work well with others and display the ability of self-control in stressful situations so one is able to act in a calm and rational manner. It is defined as the awareness of one's own emotions and emotions in others and how this affects behaviour. It is a skill that can be developed to allow doctors to manage their emotions to support personal strengths, solve problems and influence the performance of others for positive outcomes.

In the new Core psychiatry curriculum, under 5.1 Team work, trainees are to demonstrate an awareness of how individual personal qualities, emotions and behaviours of both yourself and your team, impact on teamworking and the quality of patient

The aim of the workshop was to uncover the definition, science and core components of EI, to reflect on one's own EI and to commit to developing an action plan for building EI skill.

Methods. 4 small group-based interactive virtual workshops took place on a monthly basis from September 2022 till December 2022. They were facilitated by a Psychiatry Higher Trainee Emotional Intelligence Practitioner. 28 Black Country Healthcare NHS Foundation trust Core trainees (CT1-CT3) were invited. 60% (17) of trainees attended the 1 hour workshop and completed anonymous feedback at the end of the workshop. Results. 94% of attendees completed anonymous post-workshop feedback. The results showed the following: 100% agreed that the workshop clearly stated and met the objectives, 100% agreed that the workshop covered useful material, 100% felt that it was practical to needs and interests of trainees, 100% felt it was applicable to professional and personal life including mental wellbeing, 100% agreed that the workshop enabled them to reflect on EI skills that can be applied to work, 94% felt that the workshop is relevant and useful to doctors and 100% of participants would recommend this workshop to Psychiatry Doctors and Doctors from other specialities.

Conclusion. It can be concluded that all CT doctors who participated in the EI workshops found them helpful and relevant within their Core Psychiatry Training Programme. All participants found the benefits applicable to both professional and personal life as well as enhancing mental wellbeing. This is reflected by the positive and encouraging anonymous feedback results. Developing awareness of emotions and self-awareness is part of the new Psychiatry curriculum and therefore some teaching/training should be made available to trainee doctors.

Abstracts were reviewed by the RCPsych Academic Faculty rather than by the standard BJPsych Open peer review process and should not be quoted as peer-reviewed by BJPsych Open in any subsequent publication.

Ten Years of Inspiration and Impact: The RANZCP Psychiatry Interest Forum

Ms Sharon McGowan* and Mr Sam Dipnall

The Royal Australian and New Zealand College of Psychiatrists, Melbourne, Australia

*Presenting author.

doi: 10.1192/bjo.2024.310

Aims. To illustrate the scale and impact of the Royal Australian and New Zealand College of Psychiatrists' (RANZCP) Psychiatry Interest Forum (PIF) ten years since its inception.

Methods. Member data from 2013–2023 was analysed alongside recent event and engagement activity survey results, as well as qualitative feedback from medical students and prevocational doctors who took part in PIF engagement activities.

Results. PIF attracts and inspires the next generation of Australian and New Zealand psychiatrists.

It is a stepping stone into the RANZCP Fellowship program, and has a particular focus on increasing interest in rural careers and supporting more First Nations medical students and prevocational doctors into psychiatry.

PIF events, sponsorships, scholarships and information achieves this by:

- providing a starting point for learning and exploring the specialty of psychiatry
- fostering interest in psychiatry among medical students and junior doctors