

- Resources (finance)-Expensive to support Simulated patients. We used COVID-19 recovery funds and constructed purpose-built SIM rooms in education centre, which adds to fidelity

Conclusion. Feedback: Excellent feedback received with positive comments about supportive learning, SIM facilities and debriefing.

Despite being highly resource intensive, simulation is a powerful, unique, and valuable method of training in Psychiatry. Availability of resource will continue to pose challenges, but use of digital Immersive technology and focussing on relevant areas in line with National vision strategy and with identified groups- Induction, SuppoRTT, new to NHS, Remediation, CASC preparation and enhancing capacity of learning environment where there are gaps may be a good starting point. Use of MDT integrated scenarios can offer more fidelity.

Future identified areas will be

- CTIs-Physical health skills (refresher), history taking, MSE, handover. Emergency scenarios- NMS, lithium toxicity, cardiac complications due to clozapine
- Higher trainees- Mental health act assessments, supervising doctors in training/members of MDT. Charing team meeting, handover, breaking bad news, presenting in a coroner's court

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Learning From Serious Incidents - Support Programme for Trainees

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doi: 10.1192/bjo.2023.154

Aims. A significant number of Psychiatrists will experience a serious incident (SI) whilst in training. CNTW Trainee Led Implementation Committee (TLiC) felt that the trust SI reporting process and support offered for trainees was inconsistent, anxiety provoking and at times insensitive. We decided to review existing processes to support trainees through SIs and develop a programme that addresses these areas.

Aims of programme. Improve trainers' confidence in supporting a trainee involved in SI. Establish robust mechanisms to support trainees involved in SI

Methods. The SI medical education quality team with a trainee representative, set up a comprehensive programme to address above objectives.

- Process: System for weekly notifications of incidents from trust safety team and producing a useful algorithm to decide thresholds for reporting to Live flow (Health Education North East). Trainee notification of incidents via their named Clinical and Educational supervisors.
- Trainers support: Produced a template that would form basis of discussion with trainee covering educational and governance areas, resources and support offered- uploaded to trainee's portfolio/form R for ARCP review. Workshop conducted for trainers to enhance their knowledge in supporting trainees.
- Trainee support: Rolling training programme for trainees-sessions from trust SI team, trainee sharing personal experience of involvement in SI, Coroners Inquest by trust Legal department and Interactive Human factor approach-based case studies. Ongoing support from trust safety team- immediate (team

debriefing, after action reviews) and long-term support (SI panel and legal representation) offered to all trainees. Learning opportunities offered - observing coroners and joining SI panels.

Results. We have run 5 trainee days since 2019- attended by 79 trainees in total.

- All sessions rated excellent. Sessions of trainee's perspective, legal perspective and case study discussions being rated the best.
- Almost all trainees felt that the session would have a significant impact on their clinical practice- in particular contemporaneous documentation reflecting decision making. Many felt the need for an informal peer support group that they could access.
- Workshop for trainers was also rated good/excellent

Conclusion. Creating a culture which supports reporting concerns around safety and focuses on learning is crucial. Trainers often feel ill equipped to support a trainee. Our programme which now includes a peer support group provides a comprehensive and systematic package to help address all these areas and promote a culture of openness with quality and safety being the top priorities, right from a grass root level.

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Improvement of Trainee Engagement With the Royal College of Psychiatrists (Trent Division)

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doi: 10.1192/bjo.2023.155

Aims. The Psychiatric Trainees Committee (PTC) is a national community of psychiatric trainees comprised of representatives from all College areas. Over our recent term, Dr Deepa Krishnan, Dr Kris Roberts and Dr Emma McPhail covered the Trent region. In addition to national roles, we were keen to encourage trainees to engage with the PTC to improve trainee advocacy in line with National PTC strategy. Engaged and supported trainees are vital for ensuring good standards of patient care, and for safeguarding the future of the workforce in terms of recruitment and retention, which further intersects with ongoing quality and provision of patient care. The agreed aims, which were agreed with the RCPsych Trent Executive Committee, were formulated in-line with the national PTC priorities for 2021–2022: 1, to enhance communication, visibility and reach of the RCPsych within trainees in the Trent region; and 2, being mindful of challenges around recruitment and retention in psychiatry training posts, to improve education and support for trainees.

Methods. Using quality improvement methodology, we hypothesised there to be two aspects to trainee engagement. These were conceptualised in two ways: emotional engagement (meaning feeling supported, valued, and promotion of well-being); and intellectual engagement (meaning cognitive stimulation, recognition, and access to opportunities to develop knowledge).

A free, online trainee-specific conference, the first of its kind in the Trent Division, was agreed as an intervention to address trainee engagement across both domains. Because it was run "for trainees by trainees", we were able to tailor the content to be specifically helpful and relevant to trainees.

We were keen to offer a varied program within the broad domains affecting engagement and we were delighted to be able to secure an exciting line-up of speakers both from within the Trent region and from further afield.

Results. The conference proved so popular to sign up to that it had to be closed early. The conference gathered excellent feedback from participants, with 100% of trainees rating the conference overall as “good” or “excellent.”

Conclusion. The Trent PTC hopes to run the conference again in the coming year, we hope it will become a regular fixture in the RCPsych Trent calendar, to ensure that trainees are kept at the heart of division planning. This project spearheaded by trainees for trainees to improve trainee engagement and support exemplifies collaborative leadership.

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Provision of Climate Emergency Teaching for Psychiatry Trainees: A Deanery Wide Quality Improvement Project

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doi: 10.1192/bjo.2023.156

Aims. In 2021, The Royal College of Psychiatrists declared a climate emergency, stating that “The disruption to life posed by climate and ecological degradation is a crisis which presents an unprecedented threat to human health”. In 2022 the College released an updated curriculum for both Core Trainees and Higher Trainees, which included the requirement that trainees “demonstrate an understanding of the principles of sustainability and how they underpin sustainable psychiatric practice”. We aimed both to understand whether Core Psychiatry Trainees (CTs) are meeting the new sustainability curriculum requirements and to increase awareness of the connections between the climate crisis and mental health.

Methods. We used an electronic questionnaire to survey CTs baseline understanding of the climate emergency and sustainable practices in psychiatry, with reference to clauses included in the 2022 curriculum and Silver Guide. An educational module on the climate emergency was planned and delivered to CTs in 2022 and 2023. Content included sustainable practices in psychiatry and the relevance of the climate crisis to mental healthcare. Feedback was gathered afterwards.

Results. The questionnaire showed 44% of CTs surveyed disagreed or felt neutral that they could demonstrate an understanding of the principles of sustainability and 56% disagreed or strongly disagreed that they understand how the mental healthcare system can work to reduce potential negative impacts of healthcare on the environment. Feedback from the initial teaching day in 2022 included the following suggested improvements 1) Highlighting the relevance to psychiatry 2) Holding the day in person 3) Avoiding sessions with too many facts. These suggestions were incorporated into the second teaching day, along with the new College Silver guide curriculum requirements. 32 CTs attended the second teaching day (16 in person and 16 online), with some overlap in attendees from the previous year. Feedback from the second day was very positive. Respondents particularly found the session on young people and eco-distress

useful, and reported finding the day ‘educational’, ‘insightful’, ‘practical’ and ‘accessible’. Further suggested improvements were to incorporate a nature based intervention into the day.

Conclusion. Our findings showed psychiatry trainees find educational sessions on the climate crisis and psychiatry necessary and useful for their practice. This project gives an insight into how to provide this teaching in way that is reflective of the scale and urgency of the issue whilst also providing practical advice, optimism and active hope for the future.

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Supporting Well-being and Resilience: Delivering Interactive Workshops for Psychiatry Core Trainees

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doi: 10.1192/bjo.2023.157

Aims. Stress and burnout is increasingly recognised as an issue for doctors in training. The 2022 General Medical Council (GMC) National Training Survey revealed that 39% of respondents were suffering from burnout to a ‘high’ or ‘very high’ degree. 51% felt their work is emotionally exhausting. There are multiple sources of stress for psychiatry trainees, including clinical demands, adverse events, the impact of emotional labour and moral injury. The Royal College of Psychiatrists recognises the importance of supporting trainees’ well-being; this has been reflected with the inclusion of personal well-being-focused key capabilities in the new Core Psychiatry Training curriculum.

Methods. To meet these needs, we developed and delivered two interactive face-to-face workshops for Year 1 Core Psychiatry Trainees (CT1s) in the West of Scotland. Training is embedded within the CT1 educational programme and facilitated by higher trainees. The sessions cover key aspects of well-being, including the physiology of stress, risk factors for burnout and the evidence base for developing resilience. We explore the impact of errors on doctors and the health service, relevant clinical governance systems and regulatory policies, focussing on psychiatry training issues. Feedback was obtained immediately after each session via anonymous questionnaire with a mixture of Likert scale and free text responses.

Results. There were 27 responses for workshop one and 21 for workshop two. 14 respondents felt the teaching should be mandatory for core training. There was mixed opinion regarding the overall benefit and optimum timing of the sessions within the training year. Overall, CT1s valued group discussions and wanted more time for this with less focus on GMC policy. There was also split opinion on the value of discussing institutional responses to errors, including significant adverse event reviews and Datix reporting.

Conclusion. Our feedback showed differing opinions on which topics should be covered during the training and their level of detail. Overall, the opportunity for group discussion – in order to share experiences with peers – appeared to be valued most. We feel the sessions provide new CT1s with an opportunity to explore problems they may encounter in a safe and supportive environment.

We aim to provide trainees with a ‘toolkit’ to support their personal well-being within the workplace, as well as demystifying