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## Say NO to Online Mindfulness - a wellBEHing Initiative

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**Aims.** Trainees in Barnet, Enfield and Haringey (BEH) Mental Health Trust reported feeling isolated and burnt out after COVID-19. Offers of "online mindfulness" or "resilience training", as a substitute for in-person gatherings, felt very inadequate. Well-being initiatives are known to improve staff morale, mental health, patient care, recruitment and retention of trainees. We created and delivered a pilot well-being programme to improve the well-being of trainee psychiatrists working within BEH between September 2022 and January 2023.

**Methods.** We developed a WellBEHing brand for our trust and a committee of trainees dedicated to improving the well-being of themselves and their colleagues.

We ran a focus group for all trainees to submit ideas for sessions and activities they would enjoy.

We developed a programme of monthly WellBEHing events during protected well-being time, that was funded by medical education and the local division.

We surveyed trainees pre and post WellBEHing autumn/winter programme to record the impact on their sense of well-being. We also collected qualitative data on their experiences of being part of a WellBEHing community.

**Results.** Prior to the WellBEHing autumn/winter programme we surveyed 40 trainees in BEH and only 12.5% of them rated their well-being as good or great. 35% of trainees felt undervalued or uncared about at work.

At the end of the autumn/winter WellBEHing programme 73% of trainees felt valued at work, with 60% of trainees feeling "happy and cared for".

Some of the qualitative feedback showed the impact well-being events can have on trainees "Seeing everyone in person, and being able to do so during the working day made me feel that BEH values me enough as an employee to prioritise my well-being. The quiz was also excellent and had clearly had a lot of effort put into it."

**Conclusion.** Meaningful well-being initiatives take time, effort and funding. They require the support of management and consultants. Our results demonstrate that when well-being is designed and led by trainees, they feel valued and cared for as employees. We are beginning the second phase of project development where we will focus on making the programme sustainable and embedded in trainee life at BEH long-term.

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## Depicting Perinatal Mental Illness in *Hollyoaks* – Diane and Liberty's Plotline Analyses

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**Aims.** The 2018–2020 MBRACE report highlights that 1.5 women per 100,000 die by suicide during pregnancy or up to 6 weeks postpartum in the UK, a threefold increase since the 2017–2019 report. Raising awareness of the variety and severity of perinatal mental illness is vital in order to reduce stigma and ultimately save lives. *Hollyoaks* is a soap opera with a target audience aged 16–24 years. In 2020 the show aired the storyline of Liberty Savage, a woman whom developed postpartum psychosis. In 2021 the show aired the story of Diane Hutchinson as she develops symptoms of Obsessive Compulsive Disorder (OCD) during her pregnancy. In this article we analyse both storylines for clinical accuracy and consider the impact that this may have.

**Methods.** EC and AS held structured discussions in order to assess the accuracy of the portrayal of each illness, comparing each presentation to diagnostic criteria. Further discussions were held to establish themes and to consider the impact of the information/misinformation delivered to viewers.

**Results.** The production team worked with the charity Action on Postpartum Psychosis when producing Liberty's story. The storyline addresses that Liberty hallucinates, although creative licence is used. She is emotionally labile and highly anxious with a fixation on her baby's well-being.

Unfortunately there are many elements of Liberty's storyline that do not accurately portray post-partum psychosis. She has no delusional beliefs, no thought disorder and is fully orientated. Liberty is consistently immaculately presented and while there is mention that she is sleeping poorly this is not explicitly seen. We do not see any interaction with a psychiatrist and Liberty is not admitted to hospital.

Diane's story begins when she falls pregnant during the COVID-19 pandemic. The production team worked with the charity OCD UK.

Diane's presentation is focused around contamination. Her intrusive thoughts are voiced out-loud for the viewer to hear yet are distinguishable from the spoken dialogue. Her intrusive thoughts escalate during labour and in the immediate postpartum period and her distress is palpable throughout these scenes.

Diane's storyline concludes with an evaluation from a supportive psychiatrist who gives a clinically accurate explanation of her presentation and offers reassurance.

**Conclusion.** The mainstream media can provide a useful tool to raise awareness of perinatal mental illness in the general population and may play a vital role in reducing stigma. However, variations in clinical accuracy are likely to be present, even within the same television programme, limiting potential positive impact.

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## Progression and Retention of Psychiatric Trainees in Wessex

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**Aims.** To explore factors influencing the progression and retention of Psychiatric trainees in training posts within the Health Education England Wessex region. Specifically: To understand what trainees value most in their training; to determine the degree to which trainees feel supported and valued in their training; to determine self-reported burnout measures in trainees; to understand factors that have a negative impact on training experience; to understand factors that are important to trainees when considering future job roles.

**Methods.** Online questionnaire survey, capturing both qualitative and quantitative data, open to all Wessex Psychiatric trainees and doctors who had left or completed a Wessex Psychiatry training scheme since 1.1.2018. Responses were collected between 7.6.2021 and 31.7.2021. The survey included a burnout scale, questions about how supported and valued trainees felt during training, and questions regarding career intentions. This project received approval from the Health Research Authority (IRAS 296985).

### Results.

- 50 participants completed the survey and were included in analysis.
- 38% were at risk or high risk of burnout.
- Trainees felt more supported and valued by individuals such as clinical supervisors (70% felt well or very well supported and valued) than by organisations (41% felt well supported and 34% felt well valued by their Trust and Deanery).
- Trainees rated 'work-life balance' as the thing they valued most in training (64%).
- Poorly resourced services, trainee workload, lack of role models, experiences of aggression, and defensive practice of seniors were cited as reasons trainees considered leaving Psychiatric training.
- The three most important factors cited by participants when considering a consultant post were 'Position available with flexible working' (62%), 'Position available within a supportive team of colleagues' (54%) and 'Positive experience working in the Trust as a Trainee' (46%).
- 81% of higher trainees wished to work less than full time in a consultant position once they had completed training.

**Conclusion.** Flexible working arrangements and work life balance need to be considered in workforce planning. Measures to reduce burnout in psychiatric trainees need to be pro-actively explored by employing Trusts and Deaneries. Mentoring schemes, facilitation of peer support, and clear processes for how to raise concerns regarding supervision are recommended to enhance support for trainees. Junior doctor awards, improved feedback between Trusts and junior doctors and engagement of the Trust board with junior doctors are proposed to improve the sense of value trainees feel. Positive experiences as a trainee are likely to improve retention of local trainees into the local consultant workforce.

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## Surviving Your First On-Call in Psychiatry: A Bootcamp for Junior Doctors

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**Aims.** The psychiatry 'bootcamp' forms part of the psychiatry induction for junior doctors within NHS Lanarkshire. It was

developed to better prepare them for common scenarios on-call and therefore alleviate any anxieties. The session is based upon a weekend on call where a fictional patient is admitted to the psychiatry ward with a psychotic presentation. It introduces the participant to the topics of Mental Health Act utilisation, capacity, acute behavioural disturbance management, and adverse effects of psychotropic medications.

**Methods.** Focussed teaching regarding fundamental theory for each topic is provided. Following this the facilitators engage the audience through reflective group discussion. Relevant parts of the session involve practical work including individual completion of detention paperwork. Targeted teaching is provided by the facilitators for any knowledge gaps identified.

Pre and post course questionnaires are completed by participants where they provide both written feedback and score various domains between 0 (least confident) and 10 (most confident). Domains are capacity assessment, assessing detention criteria, the process of detaining a patient, and recognition and management of extrapyramidal side-effects.

**Results.** This course has been run on two separate occasions with a total of 28 participants. All domains assessed on feedback questionnaires have shown an increase in confidence amongst the participants. Following analysis of all pre and post course questionnaires session one showed an average improvement from 4.87/10 to 7.56/10 across all domains. Session two showed an average improvement from 5.34/10 to 8.6/10.

Themes identified on participant feedback included the benefit of having the opportunity to individually practice completing detention paperwork. Another theme identified was that participants found the case used for session delivery relevant to their practice. A final theme identified was the engaging nature of the session which encouraged the participants to ask questions. If a didactic approach was used this could restrict such discussion. **Conclusion.** Feedback received suggested that this session was well received by all participants and was felt to be beneficial in both preparing them for and alleviating anxieties ahead of their first shift on-call within psychiatry. Feedback demonstrated that running the session in small groups with a blended approach of direct teaching, reflective discussion, and practical work maximised engagement and was an appropriate approach for session delivery. Feedback suggests that this session has the potential to be an essential part of future junior doctor inductions due to it identifying and meeting the learning needs of the participant.

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## Balint Group Sessions for Medical Students: A Pilot Study

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**Aims.** The issue of health and well-being amongst the National Health Service (NHS) workforce has never been so prominent. Balint groups are facilitated discussion sessions aiming to help