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The Young Psychiatrists' Network (YPN) is a rapidly growing network of Early Career Psychiatrists (till 40 years of age or 5 years since completion of speciality – unless otherwise specified in home country) and Psychiatric trainees.

Its aims include, global development of psychiatry through close collaboration of YPs worldwide, expanding knowledge and sharing experiences, and facilitating the evolution of YPs from different parts of the world and improvement of their knowledge, skills and abilities.

From 30th September – 4th October the 5th YPN Meeting was held in Porto Heli in Greece. It was the biggest Young Psychiatrists Meeting ever held with more than 150 participants from 42 world countries and it was an absolute success. The state of the art scientific program included plenary lectures by renowned psychiatrists such as Prof. Nik. Bouras and Prof. Martin Prince, symposiums and workshops.

In conjunction with the 5th YPN Meeting from 27–30 September, a leadership course directed by Prof. N. Sartorius and Prof. K.H. Wittchen was held in Athens with the participation of 16 participants from 11 world countries.

The next meeting will be in Italy on September 2016.

Future plans include research collaboration, regional meetings and promoting the best possible work and educational conditions for young psychiatrists from all over the world.

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#### EV601

### **A brief survey of the impact of restructuring of clinical placement and education delivery for medical students in 5 Boroughs Partnership NHS Foundation Trust**

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*Introduction* In the United Kingdom, a drive has been initiated to duly attract and recruit medical student into career psychiatry. However, most medical students attending university find the psychiatry lacks structure and organised model in teaching delivery.

As a result, many medical students put off earlier on in their studies by psychiatry.

*Aim* We wanted to test the above hypothesis with the introduction of structure by allocating de-centralised teaching and hands on clinical experience for medical students.

*Method* The collective survey tool is devised to reflect the needs of medical students with de-centralised teaching separate but to complement university studies. This included introduction of induction package, set out syllabus, structured learning sessions. The results of the feedback from the medical students were collated and the results are discussed.

*Discussion* The results indicate the success of the decentralized and borough based teaching, with improved interest in psychiatry and higher attendance rate. The feedback has been positive, and efforts of the tutors have been appreciated. Whether this will translate into higher recruitment rate number is to be seen.

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#### EV603

### **An audit to improve prescription writing on inpatient medication cards**

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*Background* The most common intervention performed by physicians is the writing of a prescription. All elements in the complex process of prescribing and administering drugs are susceptible to error.

*Aims* To measure the extent to which information recorded on prescription cards conforms to basic standards of prescription writing.

To improve prescribing, recording and staff knowledge.

To identify common prescribing errors and focus on the same to improve our standard of practice.

*Methods* An audit tool was designed to collect data and standard was set 100%.

*Results* In the initial audit, there was significant deficiency in prescription writing, which was presented at the internal teaching to all doctors and recommendations were made. This audit was repeated after a month, which showed improvement in prescription writing and recording.

*Recommendations* Write all drugs in CAPITALS ensuring correct spelling, dose, route of administration and frequency.

Complete all fields on front of the prescription card legibly.

Document any change in prescription card in clinical notes.

All doctors to go through their current clients medication cards and ensure any gaps filled and errors corrected.

Audit report will be kept in audit folder as a reference for any rotating doctor to repeat the audit every six months in the services.

*Conclusion* Doctors should continue to improve prescription writing and reduce any adverse events or errors.

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#### EV605

### **Lessons learned from leading a Canadian psychotherapy medical education program**

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*Introduction* Under Canadian training requirements, psychiatry residents must demonstrate proficiency in various psychotherapy modalities such as cognitive behavior therapy and psychoanalytic psychotherapy.

*Objective* Building from an earlier case study of the development of a comprehensive psychotherapy education program, the current presentation explores lessons learned from the ongoing delivery of this program to psychiatrists in training. Innovative strategies, opportunities, challenges and current outcomes on the delivery of this program are explored through a case study framework. The design, implementation and ongoing operation of the psychotherapy education program are based on the Royal College of Physicians of Canada specialty training requirements in psychiatry.