

## The Use Of Coaching as a Novel Tool in Medical Education to Support Psychiatry Trainees in Developing Leadership Skills

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**Aims.** In recent years, there has been an increasing recognition of the importance of leadership skills to doctors. However, these skills are not usually formally taught or assessed. This study aims to evaluate the impact of using coaching as a novel technique to support Psychiatry trainees in developing leadership skills.

**Methods.** This poster summarises a primary research study which evaluated an educational intervention using a mixed-method approach.

All Higher Psychiatry Trainees at the Tavistock and Portman NHS Foundation Trusts were given an opportunity to enrol on the *Coaching for Consultant Psychiatrist Leadership Pilot Programme*. Those who enrolled (coachees) were offered five 90-minute one-to-one sessions with Psychiatry consultants (coaches) who received training in *Coaching for Leadership*. Coachees completed a self-assessment questionnaire examining their views on their own leadership skills before and after completing the programme. Questions used were adopted from the High-Performance People Skills questionnaire (HPPS) – a tool used to collect 360° feedback as part of leadership training. Coachees and coaches also attended separate focus groups to discuss their subjective experiences of receiving and providing coaching. Thematic analysis was carried out.

**Results.** Eight coaches and seven coachees participated in the study. Most HPPS self-assessment scores post-intervention have increased after completion of the course. Overall coachees' satisfaction with their leadership skills increased from 3.4/5.0 to 4.0/5.0 after completing the programme.

Focus groups yielded rich qualitative data. The themes identified were: a broad range of reasons for Trainees and Consultants to join the programme, positive impact on coaches' coaching skills, positive impact on coachees' leadership skills and ideas on how to improve the programme to inform future curriculum design or improve implementation of any educational interventions.

**Conclusion.** Psychiatry Trainees' self-perception of leadership skills can improve after receiving coaching. They find coaching helpful due to its individualised nature and the fact that it promotes the application of skills in real-life settings. Coaches also benefit by gaining new skills in coaching and leadership. Coachees and coaches share similar motivations for joining, including the desire to learn new skills, support others and be supported. More research is needed to evaluate the practical aspects of delivering coaching for leadership programmes as part of speciality training, but its potential is promising.

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.

## Communication in Education – Improving Student Engagement With Mental Health Online Learning

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**Aims.** Our mental health placement has a longitudinal design and students spend one day per week in psychiatry throughout their academic year, attending clinical placement and academic days on alternate weeks. Academic days include a small group tutorial, Balint group and self-directed learning, during which students are expected to complete a 'virtual patient' (VP) e-learning module. VPs align with the topic of their small group tutorial and are intended to facilitate their learning. Despite this, only a minority of students complete them. Our aim is to investigate and iteratively design interventions to improve uptake of learning.

**Methods.** Using an iterative process, we explored potential reasons for low student uptake by reviewing routine feedback from faculty and students; most tutors and students were unaware of the e-learning. We hypothesised that increased faculty awareness and promotion of VP could lead to an increase in student access numbers. The intervention was therefore of improved communication amongst faculty by fortnightly newsletter emails which include the topic of the academic day, explanation around what is expected of students with the website link to the VP, and other useful resources tutors may wish to use. Emails are sent by medical education administrators in the week before the academic day to all tutors. Access logs for the previous (2022–2023) and current (2023–2024) academic year were obtained so comparison could be made pre- and post-intervention.

**Results.** Results are available for 4 modules; thus far we are yet to see significant differences in engagement. There was a technical glitch for one module and for the other modules the difference in student access has been minimal (<5%). We also have qualitative feedback from 5/28 tutors. One was confused and thought they were being asked to do additional work, one requested for information about the VP without realising it was included in the newsletter email, and three said they found it helpful.

**Conclusion.** Fortnightly email newsletters is a simple and cost-effective way to possibly improve communication within faculty. It is likely difficult to promote student engagement with activities that their tutor is unaware of or perceives as invaluable. However there remain real challenges of using email as a communication tool for busy clinicians and is unlikely to make a difference as a stand-alone intervention. For future development we plan to include medical students and clinical supervisors as recipients in the mailing-list and spend time on a faculty development day to further explore this issue.

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## Assessing the Impact of the 2024 National Student Psychiatry Conference on Medical Student Career Aspirations and Subspecialty Interest

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**Aims.** The 2024 National Student Psychiatry Conference, hosted at the University of Sheffield with the theme 'Me, Myself and I,' explored the intersection of the 'self' and the 'other.' It delved into the dynamics of individuals in the context of their lived experiences, environment, and emerging paradigms within psychiatry and beyond. Talks and workshops aimed to heighten attendees' interest in psychiatry by challenging societal stigma and traditional norms and expanding their perspectives of psychiatry. **Methods.** The pre-conference questionnaire included attendees' year of study, university/NHS trust affiliation, current likelihood of pursuing psychiatry and career aspirations, knowledge of conference themes, and ten subspecialties represented at the conference via a faculty carousel. The post-conference questionnaire enquired about changes to the above aforementioned factors, to explore changes in career aspirations. Standardized dropdown options were used in both forms to facilitate data evaluation. **Results.** 71 attendees were included in the final evaluation; 17 were excluded due to duplication or not completing both forms. Of the attendees, 31% were in their pre-clinical years, 56% were in their clinical years, and 4% were doctors. 9% of the participants were non-medical attendees.

Demographics of attendees included a majority from Yorkshire and Humber (52%), Midlands (11%), South England (6%), North England (10%), North East (8%) and Others (13%). 21% of attendees had been to a prior psychiatry-related conference and 34% were currently taking part in or had completed a psychiatry-related project in the past.

The level of interest in attendees aspiring to pursue psychiatry increased from 62% to 72%. An increased interest in medical psychotherapy (82%), forensic psychiatry (68%), and perinatal psychiatry (67%) after the faculty carousel was observed.

Following the conference, 97% reported increased knowledge of each theme. Findings from the faculty carousel revealed that, on average, over 90% of attendees reported an increased understanding of each speciality represented.

**Conclusion.** The National Student Psychiatry Conference plays a significant role in increasing exposure of psychiatry to medical students and increasing their understanding of the diverse career paths within the speciality. The conference fosters networking opportunities and facilitates meaningful connections within the field, positively influencing attendees' considerations and perceptions.

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## Virtual RAMPPS: A Virtual Teaching Method Inspired From the RAMPPS Model

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**Aims.** RAMPPS (Recognising and assessing medical problems in Psychiatric settings) training was set up over a decade ago by the then Health Education Yorkshire and Humber Task Group of Clinical skills project workers. Main aim was to address the Physical health agenda in mental health. It was felt that the clinical and support staff in psychiatric settings lacked confidence in recognising and managing physical health issues early on, possibly due to inadequate training in this area. RAMPPS course

was designed to address this gap. The course is set up as a face to face multidisciplinary, interprofessional simulation based training with simulated actors, mannequins and other hybrid teaching models. Like any such training, there is a constant need for resources, mannequins, simulated actors, space and funding which could limit the extensive use of this training. We adapted this face to face teaching model for virtual audience to deliver an interprofessional interactive adaptable teaching module using realistic scenarios.

**Methods.** We adapted some of the scenarios from the RAMPPS module which suited the virtual audience and incorporated into Power point presentation and using an interactive teaching software called Slido we developed Virtual RAAMPPS.

Conducted a few trial sessions within the team and later produced a sample scenario and presented to the medical education team at the trust. The main teaching is the interactive discussion whilst going through the scenarios allowing an impact as close to a face to face teaching as possible.

Next is to do a PILOT Virtual RAMPPS morning session delivered to a group of trainees (psychiatry and foundation trainees) and gather detailed feedback and continue to deliver the pilot teaching a few more times at other avenues and continuously modify the teaching based on the feedback.

**Results.** Collecting Qualitative feedback from PILOT conducted. **Conclusion.** The aim is not to replace simulation based face to face training, but to provide a near enough realistic virtual experience of real life scenarios and to think through them in a systematic and structured way thus enabling better management of some of the physical health dilemmas faced in our psychiatric settings.

It provides the multidisciplinary staff a functional working knowledge of common physical health conditions and its complications encountered in psychiatric setting. The teaching can be modified based on the audience by changing the scenarios relevant to that area of clinical practise or of the patient group.

Allowing anonymity in responses provides a non-judgemental and safe place to make mistakes and eventually improving patient safety and staff experience within Psychiatry.

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## Simulated Learning for Psychotherapy: A Focus Group Study of Psychiatry Core Trainees in the North West of England

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**Aims.** Competence in delivering psychotherapy is a mandatory part of the core trainee (CT) curriculum, as mandated by the Royal College of Psychiatrists. CTs who are confident in delivering psychotherapy may provide more meaningful benefit for patients receiving therapy. Simulation is a well-established educational modality but is not widely utilised to teach psychotherapeutic competencies. We aimed to ascertain the views of current CT doctors regarding the use of simulation in psychotherapy training. A greater insight into learning needs would guide development of novel simulated psychotherapy educational resources. This was deemed a priority area for Simulation Based Education in the North West School of Psychiatry.