

beneficial in terms of mood, socialising, and as a distraction from difficult emotions.

Conclusion. Improving access to recreational video gaming consoles and games within inpatient settings is a valuable way to offer activities to improve mood and social interactions between young people in an inpatient CAMHS setting. Follow up research into efficacy would be of benefit.

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Of Course, Breaking Bad News Is Not Just for Patients: A Quality Improvement Project Survey to Explore How Staff Are Informed of Patient Deaths

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doi: 10.1192/bjo.2024.409

Aims. Mental health professionals are very likely to experience a patient death at least once in their careers. The Royal College of Psychiatrists published a framework for supporting mental health staff following the death of a patient by suicide. It states that 'how the news about a patient's suicide is imparted influences the emotional impact of the death and is therefore very important'. We sought to explore how healthcare professionals are informed about patient deaths within Birmingham and Solihull Mental Health NHS Foundation Trust.

Methods. A 25-question survey was devised to explore how staff have been informed about patient deaths and the impact it had on them. This was emailed to all grades of doctors, nurses and allied healthcare professionals within the trust and results were collected over 11 days.

Results. 83 healthcare professionals completed the survey. 72 respondents had experienced a patient death within the trust. Of 72, 48.6% of respondents felt they had not been informed about their most recent patient death in a sensitive manner. There was wide variability in the method by which staff were first informed. 27.8% of respondents first learned of the patient's death via an email from the trust lawyers, patient safety team or another party. Of these 20, 17 felt they had not been informed in a sensitive manner. 63.9% (n = 46) reported that they had not been signposted to any support. Qualitative data suggested that the way in which people were informed had a wide-ranging impact. Many respondents felt shocked and upset. With hindsight, people would have appreciated being informed face to face and being given time to reflect. Of the total 83 responses, 82% (n = 68) felt that there should be a specific policy about how staff are informed about patient deaths.

Conclusion. Results from this survey demonstrate a large scope for improvement in the way that staff are informed of patient deaths. Using these results, we will generate change ideas for a quality improvement project which aims to inform staff more sensitively about patient deaths. Feedback suggested implementation of a new protocol to guide team managers and consultants on how to inform staff; it may help to standardise the process and the support provided. Patient deaths have a significant impact on the mental health of staff; communicating this matter compassionately may help to alleviate immediate feelings of distress and mediate the long-term impact on staff wellbeing and satisfaction.

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Medication Required: P*RN – Promoting Healthy Attitudes and Improved Access to Pornography in Wathwood Hospital

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doi: 10.1192/bjo.2024.410

Aims. The key aim of this project was to update and modernise the hospital procedure on how patients access pornographic material whilst detained at Wathwood Hospital. Within the update, we aimed to promote inclusivity and acceptance of all patients' sexual identities as well as utilising the opportunity to emphasise healthy consenting sexual relationships.

Patients in Forensic Mental Health settings are often inpatients for a significant amount of time, with multiple restrictions imposed on their private and family life. Current policy allows patients to purchase pornography for private use in their own room. It must be material of the same nature available in a main street outlet. In practice, material is usually purchased in DVD format from the Amazon website and subsequently screened for suitability by Security staff and finally approval by the Responsible Clinician. There have been numerous incident reports involving the trading of pornographic material.

Methods. Qualitative semi-structured group interviews (up to 5 people at a time) were conducted with patients in the medium-secure forensic services of Wathwood Hospital. They were recruited from the fortnightly Patient Forum. Anonymised questionnaires involving Likert scales and free text response spaces were also distributed at the Patient Forum. Data gathered investigated the percentage of patients who were aware of the current procedure, if they felt it worked well and what they thought the impact of accessing pornographic material might be. Staff were invited to complete a similar anonymised questionnaire, again considering their opinions on the positive or negative impacts of pornography for patients. In addition, we gathered data on whether there was a difference on the degree of comfort/discomfort about pornography, depending on whether the material involved opposite sex or same sex couples. In total, there were 40 survey participants.

Results. Some key areas for concern were found, for example, only 17% of staff and 16% of patients thought the current policy works well despite 69% of staff and 84% of patients feeling it is a patient's right to access pornography. Free text and focus group feedback established many benefits to it. It was clear that there were some areas of difficulty in the hospital policy, which would benefit from being refreshed.

Conclusion. Staff and patients overall feel that access to pornography is important for many of the patients. We identified areas for improvement in how this is accessed and a need to continually be considering the need to consider meeting the holistic needs for the patients.

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