

Results: Nine medical schools participated, each led by a student regional coordinator responsible for local data collection, governance, and team management. However, 25% of records were excluded due to data quality issues, including errors in record eligibility and inconsistencies in questionnaire completion. The decentralised, peer-driven training model resulted in variable knowledge transfer, underscoring the need for structured training frameworks, clearer data verification processes, and automated data collection tools to improve consistency and accuracy.

Conclusion: This study highlights the importance of robust training and data management systems in student-led national audits. Key lessons include the need for structured protocols, ongoing data quality assessments, and strategies to maintain student engagement. Additionally, awareness of confounding factors such as regional variation and evolving clinical guidelines is crucial. These findings provide actionable recommendations to optimise future student-led clinical audits, promoting high-quality data collection and ensuring meaningful contributions to clinical governance.

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.

Introducing a Step-by-Step Guide to ARCP and Portfolio for Higher Trainees in KMPT

Dr Maria Moisan

Kent and Medway NHS and Social Care Partnership Trust, Maidstone, United Kingdom

doi: [10.1192/bjo.2025.10290](https://doi.org/10.1192/bjo.2025.10290)

Aims: This presentation aims to support psychiatry trainees, especially those new to the UK system or returning after a break, in navigating the complexities of the new curriculum and its requirements. The introduction of the Placement-Specific Personal Development Plan (PSPDP), Higher Level Outcomes (HLOs), has created a more structured but demanding framework. This guide helps trainees understand and manage these requirements, offering a condensed and practical overview of the portfolio and ARCP process. By focusing on resilience and capability, this presentation simplifies the guidelines provided by the Royal College of Psychiatrists (RCPsych), including the Silver Guide.

Methods: The presentation uses practical strategies and case reports to highlight the common challenges faced by higher trainees. Key issues include managing an active portfolio, mapping activities to HLOs and competencies, and fulfilling WPBA requirements. Real-life examples provide insights on how to set up and maintain portfolios, assign supervisors, and plan development in line with the new curriculum. The content offers practical solutions for trainees, particularly those new to the system or returning after a break. It is also valuable for clinical and educational supervisors, training programme directors (TPDs), and postgraduate medical education (PGME) staff who support trainees' progression.

Results: The presentation was well-received in local teaching sessions, with trainees appreciating the clarity and structure it provided for understanding the new curriculum. Feedback suggested the practical guidance and step-by-step approach helped trainees feel more confident in managing portfolios and meeting new requirements. The discussion focused on engaging with the new system, the documentation processes, and balancing clinical duties with meeting competencies. Early planning, clear communication with supervisors, and a methodical approach to organizing the portfolio were emphasized to ensure the successful completion of assessments and documentation. This session, designed from the trainee's

perspective, has also been beneficial for supervisors and educators in understanding the challenges faced by trainees.

Conclusion: This presentation supports trainees, especially those unfamiliar with the UK system or returning after a gap, in navigating the complexities of the new curriculum. Feedback indicates the presentation successfully demystified the process and highlighted the resilience needed to meet the challenges. It will be included in the KSS Higher Trainees Induction and can become a regular teaching slot to provide ongoing support. A survey will be developed to gather formal feedback, improving the presentation for future trainees. The condensed content, based on RCPsych materials, makes extensive resources more accessible for trainees and their supervisors.

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.

Developing and Integrating Regular Training in Serious Incident Investigations and Coroner's Inquests Into the Higher Trainees Teaching at Kent and Medway NHS and Social Care Partnership Trust (KMPT)

Dr Maria Moisan, Ms Chiara Rubino and Dr Rachel Daly

Kent and Medway NHS and Social Care Partnership Trust, Maidstone, United Kingdom

doi: [10.1192/bjo.2025.10291](https://doi.org/10.1192/bjo.2025.10291)

Aims: This project aims to develop and integrate regular training on Serious Incident (SI) Investigations and Coroner's Inquests into the Higher Trainees Teaching at Kent and Medway NHS and Social Care Partnership Trust (KMPT). The goal is to enhance trainees' understanding and confidence in these critical areas, ultimately improving patient safety and supporting psychiatric trainees in their professional development.

Methods: Using Quality Improvement (QI) methodology, the project began with a baseline survey to assess trainees' knowledge and confidence regarding SI investigations and Coroner's Inquests. Based on identified needs, an Initial Training Event was held in November 2023, which included sessions on SI investigation processes, thematic reviews of suicides, patient safety, and involvement in investigations. The second QI cycle focused on developing and delivering a tailored training programme for Core and Higher Trainees in January 2024. This programme consisted of two sessions: "Introduction to Legal Services HM Coroner" and "Managing Serious Incidents". Feedback from trainees was gathered through questionnaires to evaluate the effectiveness of the training.

Results: The baseline survey (April–May 2023) showed that 71.88% of respondents had limited understanding of SI investigations, with 87.5% expressing interest in further training. The Initial Training Event in November 2023 had 47 attendees, with 92.86% expressing a need for additional training. The tailored training programme in January 2024 had 20 attendees, with 100% of respondents indicating that the training would improve patient safety in their clinical practice. All trainees reported a better understanding of the Coroner's Inquest process, and 100% agreed that the training should be repeated annually. Notably, the SI investigation process, including Root Cause Analysis (RCA), is now being replaced by the Patient Safety Incident Response Framework (PSIRF), which represents a shift toward a more flexible, learning-focused approach to managing patient safety incidents. The results from the baseline survey and the initial training event were published in *BJPsych* and presented at the International Congress RCPsych in June 2024.

Conclusion: The project successfully identified a significant gap in training regarding SI investigations and Coroner's Inquests for psychiatric trainees at KMPT. The first two cycles of the QI process have demonstrated positive outcomes, and the need for regular, ongoing training has been clearly established. As a result, this training is now integrated into the Higher Trainees Teaching programme. Future considerations include evaluating feedback from the 2025 training session and potentially introducing Mock Coroner sessions and protocols for trainee involvement in SI investigations, under the new PSIRF framework.

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.

Beyond the Conventional: PsyQ – a Space for Curiosity, Collaboration, and Cultural Sensitivity in Psychiatry

Dr Sanaa Moledina, Dr Seema Uchil, Dr Harshani Yapa Bandara and Dr Faquiha Muhammad

Northamptonshire Healthcare NHS Foundation Trust (NHFT), Northampton, United Kingdom

doi: [10.1192/bjo.2025.10292](https://doi.org/10.1192/bjo.2025.10292)

Aims: Traditional psychiatry training often prioritizes service delivery, limiting reflection and exploration. Few opportunities for intellectual discussions outside academic meetings lead to monotony and rigidity in practice. Poor networking opportunities can be isolating, especially for those unfamiliar with the UK's multicultural landscape.

PsyQ was created by doctors at Northamptonshire Healthcare NHS Foundation Trust (NHFT) to overcome these gaps. The platform aims to nurture curiosity, cultural sensitivity, and receptiveness among doctors by offering a relaxed, judgment-free space to engage in meaningful discussions. The topics covered are wide-ranging, spanning psychiatry's intersections with disciplines like philosophy, religion and spirituality, law, and social sciences, as well as issues in the contemporary social milieu.

Methods: Launched in March 2024, PsyQ has hosted discussions on a wide array of topics, including evolutionary psychiatry, the assisted dying bill, sexual orientation and the nature versus nurture debate, patient confidentiality, the experience of immigrant doctors in the UK, free will, the role of psychiatrists in preventing death, and the psychological concept of safety. To assess the platform's impact, an electronic feedback form was distributed. Fifteen participants completed the form. The survey combined Likert-scale with open-ended questions to evaluate overall participants' experience, inclusivity, topic relevance, session engagement, and suggestions for improvement.

Results: The results highlighted PsyQ's success in creating an inclusive and engaging environment. Eighty per cent of respondents rated their overall experience 4/5 or higher, while 78% found the topics highly relevant to their practice and daily lives. The platform's relaxed and inclusive atmosphere stood out, with 85% of attendees commending its openness. Additionally, 75% described the format as highly effective, citing the balance between structured discussions and open-ended dialogue as conducive to exploring diverse viewpoints. PsyQ significantly influenced attendees, with 90% reporting that sessions challenged their thinking, 85% feeling encouraged to tolerate differing opinions, and 70% gaining practical insights applicable to their work. Participants valued the diversity of topics, the safe space for discussing sensitive issues, and networking opportunities. Suggestions for improvement included adjusting

session timings, extending session lengths, and securing funding to enhance the overall experience.

Conclusion: PsyQ is a platform that allows doctors to network, think creatively, express opinions, and gain new insights. It is crucial for doctors to be flexible, culture-aware, and well-informed of broader societal perspectives. Moving forward, the programme plans to incorporate participant input, expand its range of topics and guest speakers, and develop strategies to measure its long-term impact, ensuring continued adaptability to participant's needs.

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.

Redefining Psychiatry Placements: Improving Medical Education Through the UTLA Scheme

Dr Sanaa Moledina and Dr Hetal Acharya

Northamptonshire Healthcare NHS Foundation Trust, Northampton, United Kingdom

doi: [10.1192/bjo.2025.10293](https://doi.org/10.1192/bjo.2025.10293)

Aims: Psychiatry placements can be challenging for medical students due to unpredictable settings, emotionally charged patient interactions, and potential risks. Limited hands-on experience, inadequate supervision, inconsistent teaching across the wards, and poor induction further amplify students' apprehensions, reduce engagement, and deter them from considering a career in psychiatry. To address these challenges, the University of Leicester Medical School (LMS) initiated the Undergraduate Teaching Liaison Associates (UTLA) scheme within Northamptonshire Healthcare NHS Foundation Trust to improve medical education in the mental health sector. This programme, grounded in the Near-Peer Teaching model, provides structured mentorship and personalized guidance to medical students. The quality improvement project focused on implementing and adapting the UTLA initiative specifically for psychiatry placements.

Methods: The project introduced the UTLA Blueprint, adapted from the LMS UTLA Handbook, to provide a structured yet flexible framework for guiding UTLAs in supporting students' needs. Key UTLA responsibilities included conducting ward orientation, facilitating learning outcomes, supporting portfolio development, and performing regular well-being check-ins. During induction, Medical Student Handbook and UTLA flyers were distributed, and Meet and Greet sessions were organized. A UTLA network was also established to foster collaboration and shared learning. Data collection involved student surveys and UTLA interviews to evaluate the initiative's impact.

Results: Eleven medical students participated in the survey, with 73% rating the UTLA programme eight or higher on the satisfaction scale, indicating high overall satisfaction. Furthermore, 64% of respondents found UTLA support highly accessible, and all expressed willingness to recommend it to their peers. The most frequently cited areas of UTLA assistance included arranging learning opportunities, providing well-being check-ins, and facilitating case-based discussions. The well-being check-ins and the Medical Student Handbook were distinguished as the two most useful elements. Suggested areas for improvement included clarifying UTLA roles at the start of placements, optimizing the frequency of check-ins to balance support and avoid over-contact (with 73% of students preferring 2–3 check-ins per fortnight), and educating UTLAs about required placement competencies. The UTLAs reported gaining valuable insights from frequent meetings, which