

Conclusion: Mental health professionals on HDU demonstrated awareness of substance-related mental health risks, particularly related to class A drugs, chronic cannabis and alcohol misuse. However, variations in patient management approaches, and lack of knowledge about synthetic opioids indicate the need for enhanced training.

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A Service Evaluation: Survey of Staff Awareness of Physician Associate Role and Their Impact in Psychiatric Inpatient Wards in KMPT

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doi: [10.1192/bjo.2025.10486](https://doi.org/10.1192/bjo.2025.10486)

Aims: This project aims to assess staff awareness of the Physician Associate (PA) role and the impact of PAs on an acute male psychiatric ward and a male psychiatric intensive care unit (PICU) in Kent and Medway NHS and Social Care Partnership Trust (KMPT).

PAs are integral to supporting the effective functioning of inpatient psychiatric wards and contributing to service development. At KMPT, there are currently five PAs working across 5 inpatient wards with 880 combined admissions last year. Bed pressures have increased annually, making consistent medical support essential. PAs, due to the nature of their role, can provide continuity and act as a key point of contact for staff.

Hypothesis: We hypothesize that staff may have limited awareness of the PA role due to its recent introduction in the trust, but that PAs will have a positive impact on patient care in mental health settings.

Methods: Data was collected through a survey to assess staff understanding of the PA role and its impact on patient care, collaboration, and team dynamics. Staff across various multidisciplinary team (MDT) roles, including the medical, nursing, occupational therapy, and psychology teams in the male PICU and a male acute ward were surveyed.

Results: A total of 32 responses were received.

Staff Awareness: 81.2% reported working closely with PAs daily. While 65.6% were very familiar with the PA role, 31.2% were somewhat familiar. Notably, 17.15% mistakenly believed PAs can prescribe medication and order ionizing radiation investigations.

Impact on Patient Care: 81.25% reported PAs made a significant impact in assessing and diagnosing physical health conditions, compared with 50% for mental health conditions. 64% said PAs significantly improved patient communication and engagement with carers.

Collaboration and Team Dynamics: 65.6% found PAs to be “very effective” in collaborating with the MDT. 58.3% agreed that PAs significantly reduced workload and administrative burden, improved continuity of care, and provided a consistent point of contact for ongoing care.

Overall Impact: 71.8% of staff reported a “very positive” impact of PAs; 28.1% felt it was “positive”; and 93.7% recommended expanding the role to other mental health services.

Conclusion: This survey shows most staff have daily contact with PAs; are familiar with their role; and believe PAs have a significant

positive impact on patient care, collaboration, and continuity of care in inpatient mental health settings. However, there are knowledge gaps about specific limitations of the PA role, suggesting a need for further education to enhance staff understanding.

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Admissions to Bushey Fields Hospital, Dudley

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doi: [10.1192/bjo.2025.10487](https://doi.org/10.1192/bjo.2025.10487)

Aims: The on-call doctor at Bushey Fields Hospital, Dudley, has multiple responsibilities out-of-hours, including covering 5 wards (both general and older adults), clerking new admissions, attending reviews with the Psychiatric Liaison Team, receiving calls from CRHTT for medication advice, and carrying an arrest bleep for emergencies.

Resident doctors’ meetings have raised the issue of admissions frequently occurring out of hours, and that doctors are often unaware until the patient has arrived, giving less time to prepare. These lead to patients and ward staff waiting at late hours for assessment, delays in prescribing and administering medications, and increased workload for the on-call doctor.

The aims of this project were to: determine during which shifts patients are most commonly admitted; determine a timeline of when the bed is identified, when the patient arrived, and when clerking is completed; and look into how to involve doctors more in the process.

Methods: This was a retrospective audit conducted on admissions to all 5 wards at Bushey Fields Hospital from August to November 2024 (inclusive). The Trust audit department provided data, including patient demographics, admitting ward, day and time of admission, and whether this was in or out of hours. Out of hours shifts were established as any shift outside of 9 am–5 pm Monday to Friday.

Additional data was collected from notes on the Trust’s online system Rio; this included the date and time a bed was identified, when the clerking proforma was started, and what shifts these occurred on. 10 patients were selected at random from each ward, for a total sample size of 50 patients.

Results: During the time frame evaluated, there were 180 total admissions, of which 15% (27) were in hours, and 85% (153) were out of hours.

Of the 50 randomly selected patients, the bed was identified on a day shift for 50% (25), but 84% (42) were admitted out of hours. For 90% (45) of patients, the clerking process was started out of hours, and for 76% (38), the clerking document was started after the patient’s arrival.

Conclusion: As the results show admissions largely occur out of hours, we have suggested several recommendations. These include informing doctors of admissions beforehand, and for the patient’s parent team to pre-fill the clerking proforma sections about demographics, background and history to reduce the workload for the on-call doctor, as the document can be edited.

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