

inadequate access to phlebotomy services (66%), ability to take adequate breaks (66%) and ability to fulfil training requirements (40%).

Discrepancies were noted in responses to similar questions in our questionnaire compared to the official end of placement feedback, with greater trainees answering with negative responses in this project. **Conclusion.** This project highlighted areas of high satisfaction for trainees and showed specific areas for improvement. Trainees responses have been reviewed with Educators and Trust Management for collaborative solutions, pilot schemes and future QI projects identified.

Observer bias was noted, with greater numbers of doctors answering similar questions negatively when feedback was anonymous, suggesting that they may be giving more honest answers when their identity is concealed.

Transitioning of the Northwest Learning Disability (NWLD) Academic Regional Teaching Forum (HEE-NW) to a Virtual Programme With Enhancement of Medical Education for Trainees, Trainers and MDT Professionals During the COVID-19 Pandemic- a Quality Improvement Project - QIP Project Lead & Organiser -NWLD - Dr Syeda Hasan- Northwest HEE

Dr Syeda Hasan*

Pennine Care NHS Foundation Trust, Manchester, United Kingdom

*Presenting author.

doi: 10.1192/bjo.2022.300

Aims. Despite the challenges posed by the pandemic, several resourceful initiatives were implemented, across the educational landscape. As the lead organiser of the academic forum the expectation was to develop a format for on-line monthly academic teachings with streamlining further innovative ideas of change to best effect. The key objective of this QIP, is to use virtual platform to establish an educational forum that is efficient, safe, reliable, easy to use and replicable

Methods.

- A zoom based online forum was convened using QI framework to identify gaps in the programme along with new ideas of change.
- The attendees experience new innovative practices within the programme format, in line with the original NWLD forum programme.
- A 'think-group' consisting of the previous NWLD forum lead, ID training programme director and higher trainee facilitators proposed ideas towards a varied educational topic bank, in line with the ID curriculum
- Qualitative feedback from the forum members collected at baseline and regular intervals.
- As part of the implementation of these actions, conducted workshops evaluating the impact of COVID-19 on Educational, Psychological and Clinical landscape

Results.

- There were 18 virtual sessions, 5 CPD hours per session, conducted monthly.
- 9 sessions in the first PDSA cycle from June 2020 - Feb 2021, and 9 sessions in the second PDSA from March 2021- November 2021.
- Impact of COVID-19 workshops & Complex case management workshops conducted in the first and second PDSA cycle as part of the monthly academic programme.

- Participants for the academic regional teaching included Consultant Psychiatrist, higher trainees, Core trainees, Foundation doctor, specialty doctors, Medical Students and MDT professionals.
- New members regionally, nationally and internationally became part of the academic programme both as attendees and as speakers along with the Chair of the ID Faculty.
- The academic programme helped with educational and training needs. It helped in improving social participation for our members during COVID-19 pandemic.
- Qualitative feedback has been collated and analysed. The feedback contains a wealth of comprehensive information that has been used to enhance the programme and training needs for the trainees and trainers.

Conclusion.

- The program is well-received and led to knowledge, skill, and attitude improvements.
- The depth analysis of the feedback has facilitated a targeted approach that has brought a meaningful improvement, in the quality of training and education.
- Audience participation and engagement remains a key area for improvement.

A Quality Improvement Project (QIP) Within the Bolton Learning Disability (LD) Team (Greater Manchester Mental Health Trust) Aiming to Enhance Communication Among Multi-Disciplinary Team (MDT) Professionals and Wider Stakeholders, for the Purposes of Enhanced Care Delivery and Improved Patient Outcomes During COVID-19 pandemic. Project Lead: Dr Syeda Hasan

Dr Syeda Hasan^{1*}, Dr Rachel Moir², Miss Jessica Neary² and Dr Rupa Gupta²

¹Pennine Care NHS Foundation Trust, Manchester, United Kingdom and ²Greater Manchester Mental Health Trust, Manchester, United Kingdom

*Presenting author.

doi: 10.1192/bjo.2022.301

Aims. This QIP aims to improve communication and information sharing between the community LD team, administration team, service providers and wider stakeholders, to ensure patient safety. The primary objective is to evaluate local initiatives to improve communication between MDT professionals and wider stakeholders. The secondary objective is to improve patient safety and staff satisfaction.

Methods. The COVID-19 pandemic created unprecedented communication challenges within the workforce and highlighted areas requiring review; this included information sharing among internal and external teams, collaborative teamworking, support in absence of senior clinical leadership and transition pathways from Child and Adolescent Mental Health Services to adult LD services. The QIP was initiated in March 2021.

The discovery process included an initial consultation exploring practitioners' experiences, areas for development and to share ideas for good practice.

We used QI methodology, following 'plan-do-study-action' cycles, to analyse change. Change ideas included a single point of contact for internal and external queries, regular complex case management meetings, development of a referral process and clinical review for complex cases along with teaching sessions.

Qualitative feedback from the team pre- and post-intervention, at baseline and regular follow-up intervals, in the form of monthly team meetings, emails, focus-groups and semi-structured interviews.

Results. A full thematic map was created after initial consultation; themes included communication improvement between teams and external agencies, timely support for complex case management, improving transition processes and development of robust clinical review processes.

Qualitative feedback has been collated, analysed and final recommendations to be shared with the MDT professionals

Conclusion. Preliminary results have shown improvements in communication among the MDT, stakeholders, and external agencies.

The consultation process highlighted that there is a substantial need for standardisation and consistency within communicative practices to promote enhanced care delivery and improved patient outcomes.

Complex Case Management Workshop for Trainees & Trainers - a Quality Improvement Project -to Enhance the Understanding of the Case Management and Complexity in People With Intellectual Disabilities for Senior Trainees and Early Career Consultants

Dr Syeda Hasan^{1*} and Dr Mark Spurrell²

¹Pennine Care NHS Foundation Trust, Manchester, United Kingdom and ²Mersey Care NHS Foundation Trust, Manchester, United Kingdom

*Presenting author.

doi: 10.1192/bjo.2022.302

Aims. Whilst there is always more to learn within any speciality, the particular zone of development for senior trainees and early career consultants is the management of the complex case. The factors underpinning complexity are varied, and can range from aspects of the service user such as complexity and severity of disorder and/or multi-morbidity, to aspects of their local social networks, to complexities arising from the service or care environment. The aim of this workshop was to offer a safe space for senior trainees and early career consultants to work through some principles that might be helpful, particularly where things seem to be getting into a pickle.

Methods.

- A 60-minute slot was proposed, as part of the Northwest Learning disability academic teaching forum.
- The structure of the workshop borrowed the informality and spirit of support from Balint groups.
- Attendees were prepared to talk about one of their cases anonymously, and why they might be getting into a pickle.
- Soundings were taken and a particular case chosen to workshop in more detail, as an exemplar for others.
- Each session focused on one or two themes from the wider set of themes suggested by the CCaRM framework (Spurrell, Potts & Shaw, 2019) currently being used by Greater Manchester and Lancashire SST to expedite their work.
- Each session concluded with an evaluation discussion of workshop usefulness.

Results.

- There were 6 virtual workshops in first PDSA cycle (June 2021-Nov 2021)

- Each workshop lasted approximately 100–120 minutes, with 8–12 people attended in each session.
- The intention for the workshop was to include senior trainees and early career consultants who are within the NWLD forum however junior trainees, senior consultants and other MDT professional also became part of the sessions.
- Each session concluded with an evaluation discussion of workshop usefulness
- Qualitative feedback has been collated and analysed from the evaluation discussion.
- The information derived from the qualitative analysis indicates that there is a substantial need for regular complex case discussions for the purposes of enhanced care delivery and improved patient outcomes

Conclusion. This approach helped in enhancing the understanding of the case management for people with intellectual disabilities among forum members

We consider that the online workshops is a success and are planning further-PDSA 2 in order to create competent and well-rounded ID psychiatrist in the future in Northwest region.

Follow-Up of New SSRI Prescriptions for Depression and Anxiety in Primary Care

Mr Stephen Hughes*

University of Nottingham, Nottingham, United Kingdom

*Presenting author.

doi: 10.1192/bjo.2022.303

Aims. The aim of the audit was to review the follow-up of new SSRI prescriptions for anxiety and depression in a primary care setting and to evaluate this against relevant guidance, including that provided by NICE. NICE guidelines recommend initial follow-up for patients newly prescribed SSRIs for depression at either 1 week or 2 weeks dependent on patients age and the perceived risk of suicide or self-harm.

Methods. An audit was carried out of new SSRI prescriptions and subsequent follow-up for 52 patients in a primary care practice in North Derbyshire covering the period January to August/September 2021.

The audit used patient notes which were manually reviewed to assess the initial consultation, prescription, documented suicide/self-harm risk assessment and follow-up plans. The length to initial follow-up and the number of subsequent follow-up appointments were also assessed.

Results. The audit found that the median time to initial follow-up was 14.5 days for patients aged 18–30 years with only 12% compliant with the NICE recommendation of 1 week to follow-up. The median time to initial follow-up was 17.5 days for patients aged >30 years with only 19% compliant with the NICE recommendation of 2 weeks to follow-up. There were no significant differences in follow-up between males and females. 96% and 77% of initial consultations included a documented suicide risk assessment for patients aged 18–30 years and >30 years respectively. 88% of the new SSRI prescriptions were for sertraline 50 mg.

Conclusion. The above findings were presented to the clinical team at the primary care practice meeting with reminders of the NICE recommendations for follow-up and how these vary between different patient groups. The practice will carry out a repeat audit in 12 months.