

Students value being able to engage in additional communication skills training and future Pitstops should consider trialling a hybrid model.

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Experience and Well-being of Trainees in a Rural Mental Health Trust

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Aims. Trainee doctors may find it difficult to express their thoughts and feelings concerning their workplace experience. It is important to gain feedback on their experiences allowing potential issues to be addressed and rectified. Identifying and managing concerns at an early stage with the provision of support may have a positive impact on trainee well-being and workforce retention in the future. This project aims to survey trainee doctors working in a rural mental health trust (Lincolnshire Partnership Foundation Trust - LPFT) on aspects relating to their experience, well-being and effect of rurality. This may allow greater insight into issues affecting trainees and allow improvements to be made.

Methods. An electronic survey, created on the website SurveyMonkey, was distributed to 43 trainee doctors within the LPFT. This sample represented all the trainees on placements in Lincolnshire.

Results. Twenty-three out of forty-three trainee doctors (53.49%) submitted responses. Analysis of responses showed some common themes of trainees reporting on supportive workplace supervisors and good relationships with staff in general. Other key findings highlighted those living a greater distance from their workplace found longer commutes difficult, especially if there was reliance on public transport. This had a significant impact on stress levels and well-being. Some trainees reported feelings of loneliness, conversely, other trainees felt fulfilled and settled in their current training programme.

Conclusion. This survey identified both positive and negative factors affecting the experience and well-being of trainees. Despite some long commutes, isolation from family and friends and other stressors (exams, fuel costs), positive factors were recognised. This included good supervisor support and relationships. Overall, 78.26% of trainees reported they felt the benefits of their training in the LPFT outweighed the drawbacks. However, it is important to recognise these conclusions are drawn from trainees responding to the survey and are not necessarily fully representative of all trainees' perspectives.

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Foundation Trainees and Their Perceived Confidence in Practising Mental Health Competencies Post Their Psychiatry Placements: An Evaluation Study

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Aims. The new United Kingdom Foundation Programme Curriculum was implemented in 2021 and emphasizes the importance of Foundation Trainees (FTs) acquiring mandatory core skills and knowledge in mental health. The primary aim of this evaluation study is to assess the effectiveness of Maudsley's Training Programme in teaching these skills. Secondly, it looks at FTs' preferred method of acquiring the mandated competencies. Finally, it aims to shine a light on an area of program evaluation that is lacking in the literature.

Methods. An outcome analysis evaluation design was used with a pre and post-quantitative questionnaire as the preferred data collection tool. The outcome measured was confidence and corresponds to Level 2 – Learning on Kirkpatrick's Evaluation Hierarchy. Our questionnaire comprised 4 stem questions, using a 5-point anchor Likert scale. The scales were tailored to reflect the core curricular competencies. Data were collected from a sample of 85 FTs between August 2021 and March 2023 and analysed using Excel functions and a Power Shell Script to calculate measures of central tendency.

Results. Entry median confidence levels were: 3 (Fairly confident) for recognition, 3 for assessment, and 2 (Slightly confident) in managing common mental health conditions. Post-training, the median confidence level in our sample increased to 4 for recognition, 4 for assessment, and 3 for management which denotes a significant positive impact. Examples of outliers are the median confidence seen in assessing Personality Disorders, which increased from 1 (Not at all important) to 3, whereas for recognizing and assessing Delirium and Substance use disorder the median did not change. Looking at teaching methods preferred by the trainees, ad-hoc training on the job and small group seminars were by far most preferred with 24% and 23.6% of responses respectively followed by Self-directed learning and Simulation with 13.8% each and the least preferred were reflective practice (Balint) and mentoring with 3.7% each.

Conclusion. There is a trend of FTs becoming confident post 4 months of psychiatric training in recognizing assessing and managing mental health conditions. Ad hoc and seminar teaching being is the preferred method of acquiring these skills. Moving forward, efforts should be made in evaluating training programs for FTs in psychiatry with the purpose of improving the acquisition of such skills and understanding the best way to teach these. Then, consideration should be given to how we apply these to FTs that don't rotate in psychiatry.

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Foundation Doctors and the New Mental Health Curricula: What They Think and What They Want

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