## The Association of Black Psychiatrists-UK Culture Club: The Experience So Far and Proposed Future Directions

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Aims. Media coverage and representations in popular culture can positively and negatively impact wider social attitudes to mental health and illness.In the light of the George Floyd and Tyre Nichols murders and the discussion about racism and its legacy on Black mental health, it has become especially important to discuss the effect of popular culture on Black mental health and vice-versa. The Culture Club was formed in 2021 as an offshoot of the Association of Black Psychiatrists-UK (ABP-UK) with the aim of analysing popular culture and black mental health with a view towards finding recurring themes about Black mental health and our lived experiences of racism and racial trauma. The Culture Club comprises doctors at all levels and medical students affiliated with ABP-UK. We initially started off reviewing films as the cinema offers an accessible and enjoyable way to explore the link between popular culture and mental health. The proposed future direction is to further incorporate other media to offer a more holistic experience and to further support public education efforts.

**Methods.** Media from across the world featuring the intersection of racial trauma and black mental health are selected. The feature is watched individually, with a club discussion occurring virtually. Discussions are centred on the plot, characters, mental health correlations, and themes relative to our own lived experiences. We then note major or recurring themes for further exploration.

**Results.** To date, we have discussed "Thirteenth", a documentary by Ava DuVernay, "Da Five Bloods" by Spike Lee, "Red, White and Blue" by Steve McQueen, The Nollywood blockbuster series "Blood Sisters" created by Temidayo Makanjuola and "Queen and Slim" by Melina Matsoukas.

The emerging critical themes from the screenings and our lived experiences are systemic racism, differential attainment, vicarious trauma, stigma and its impact on mental health, and the law.

**Conclusion.** Key themes underpin black mental health and racial trauma. These themes, if studied further, could potentially be

targeted to improve the lived black experience and, in turn, black mental health.

Popular culture remains an important tool in understanding Black mental health.

We welcome further ideas towards improving the culture club experience.

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.

## Psychiatry Pitstop – Can an Established Face-to-Face Communication Skills Teaching Programme Be Delivered Online?

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**Aims.** Psychiatry Pitstop is a communication skills teaching programme for fourth year medical students that is led and run voluntarily by trainee psychiatrists. Initially, the format was a 6-week course after working hours, with each week covering a different topic and three simulated patient scenarios using professional actors. Since 2020, this programme has been run online. Aims: 1. To use pre and post-course questionnaires to study whether online delivery is comparable to face-to-face. 2. To gain qualitative and quantitative data from students to assess advantages and disadvantages of online delivery.

**Methods.** Pre- and post-course questionnaires using Likert scales have been used since the Programme's 2015 inception. Additional questions asked about medical students' views on the online delivery. Pre- and post-course questionnaires were analysed using Chi-squared to determine whether there had been a subjective improvement in communication skills, and online courses were compared to face-to-face.

**Results.** 17.9% students agreed with "My communication skills in psychiatry are good" before the face-to-face course, compared with 81.32% of medical students afterwards (p < .01). 26.47% agreed before the online course, compared with 80.95% afterwards (p < .01).

22.7% students agreed with "Talking to patients about mental illness makes me uncomfortable" before the face-to-face course, compared with 6.87% afterwards (p < .01). 11.77% agreed before the online course, compared with 14.29% of students afterwards (p = .785).

51.55% students disagreed with "I do not know how to ask about symptoms of mental illness" before the face-to-face course compared with 91.2% afterwards (p < .01). 47.05% disagreed before the online course compared with 80.95% of students afterwards (p < .01).

Students enjoyed online delivery, feeling it was realistic and reflected current consultations. Online delivery also made sessions more accessible and time-efficient. However, students reported that they would prefer at least one session to be face-to-face.

**Conclusion.** The study shows that online delivery of Psychiatry Pitstop leads to a similar improvement in medical students' subjective assessment of and confidence in their communication skills, and an increased knowledge of questions to ask in a psychiatric history. The face-to-face sessions have been shown to reduce the level of discomfort experienced by medical students when talking to patients with mental illness. This improvement was not replicated with the online delivery of teaching, but as this result was not statistically significant, further data should be obtained.

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

# 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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**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. Secondarily, 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.

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

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

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