

BJPsych Open S141

some improved scores indicating positive affect and elevated interest and pleasure.

**Conclusion.** The programme will be offered to in the next stage of the pilot to Special Schools in NI. It is hoped to show that similar positive gains can be made in the school settings for children and young people with intellectual disability in terms of promoting positive mental health and social and emotional well-being.

## 7 Day Follow-Up Arrangements Following Discharge From Psychiatric Hospital; How Do We Perform?

Miss Jemima Alston<sup>1</sup>, Miss Rozet Balliou<sup>1</sup>, Miss Naomi Erlebach<sup>1</sup>, Mr Zach Evans<sup>1</sup>, Miss Anna Grieve<sup>1</sup>, Mr Silas Hand<sup>1</sup>, Miss Shreya Jindal<sup>1</sup>, Miss Phei Yi Lim<sup>1</sup>, Mr Matt Shaw<sup>1</sup>, Miss Chukyi Wama<sup>1</sup>, Dr Ben Meadowcroft<sup>2</sup> and Dr Douglas Murdie<sup>2\*</sup>

<sup>1</sup>University of Edinburgh, Edinburgh, United Kingdom and <sup>2</sup>NHS Lothian, Edinburgh, United Kingdom

\*Presenting author.

doi: 10.1192/bjo.2022.407

**Aims.** The first 7 days following discharge from inpatient to community psychiatric services is a period that is associated with an increased risk of suicide. NICE Guideline 53 recommends that patients discharged from inpatient psychiatric services should be reviewed by relevant community services within 7 days. We aim to determine how different teams in NHS Lothian performed in meeting this recommendation, and to ascertain the outcome of a specific intervention in North-West Edinburgh (NW).

Methods. We collected data of NW, North-East (NE), South-West (SW), South-East (SE) Edinburgh, East Lothian and Midlothian patients discharged from General Adult Psychiatry wards in the Royal Edinburgh Hospital for the calendar year of 2021. East and Midlothian were used as a comparison to Edinburgh services as the former have an integrated inpatient and community team.

The data focused on the percentage of patients followed-up within 7 days of discharge. We also collected data for all NW CMHT patients discharged between January 2018 and November 2021 to analyse the intervention of using 'Estimated Discharge Dates' in ward rounds implemented in June 2020. Data were collected from NHS Lothian Analytical Services and anonymised in line with NHS Information Governance Policy.

Furthermore, qualitative data were collected anonymously from staff within NHS Lothian in the form of an online question-naire to ascertain strengths and weaknesses of the current systems. **Results.** Over the calendar year of 2021, 1,398 patients were discharged. The average age was 41 years old.

Regarding percentage of patients receiving 7 day follow-up, East Lothian (n = 191/249; 76.7%) and Midlothian (n = 95/122; 77.9%) performed better than Edinburgh services; NW (n = 173/268; 64.6%), NE (n = 172/301, 57.1%), SW (n = 155/247, 62.8%), SE (n = 123/211; 58.3%).

The intervention in NW in June 2020 did not have a significant impact on 7 day follow-up.

The questionnaire identified difficulties in transitions from inpatient to community care, particularly communication between teams.

**Conclusion.** The performance of East and Midlothian versus Edinburgh services is interesting given their integrated model. This appears to support the findings of the questionnaire.

The lack of impact of the intervention in NW will need explored further with the team to identify difficulties.

Rather than complete service remodelling, perhaps moving towards a more integrated approach such as allocated discharge-coordinating community and inpatient nurses would be worthwhile. We will involve the NHS Lothian Quality Improvement team in exploring this to improve patient outcomes.

## INSIGHT: Evaluation of the Year Four Psychological Medicine Student Placements at HMP Berwyn, North Wales

Dr Sadia Nafees<sup>1,2\*</sup>, Mrs Andrea Taylor-Clutton<sup>2</sup>, Mr Simon Newman<sup>2</sup> and Professor Rob Poole<sup>1,2</sup>

<sup>1</sup>Bangor University, Wrexham, United Kingdom and <sup>2</sup>Betsi Cadwaladr University Health Board, Wrexham, United Kingdom \*Presenting author.

doi: 10.1192/bjo.2022.408

Aims. Background: Although social determinants of health (SDOH) are to some extent incorporated within preclinical medical education, little validated educational methodology exists to provide guidance on how to integrate teaching about SDOH within the competency-based training of medical students' clinical years. This is potentially important. The COVID-19 pandemic has highlighted the importance of SDOH, and social determinants have become topical, with increasing discussion in journals about equity, inequality, and sustainability. Sir Michael Marmot's 2020 review has highlighted these Consequently, the evaluation of medical students' experience of prison placements is an interesting area to investigate. This will help us to explore their understanding of SDOH, and implications of gained knowledge for their future practice. Aims: This study explores changes in year four psychological medicine students' knowledge and attitude towards SDOH during prison placements. Methods. A mixed-methods study between Sep 2021 to Apr 2022 recruiting all year four medical students on their psychiatry placement in North Wales. Data collection involves baseline and midplacement questionnaires and end-of-placement individual interviews to explore their understanding of SDOH.

Thematic analysis will be used to describe students' reflection on placement satisfaction; explore impacts on trainee doctors and supporting staff; make suggestions to improve placement structure in the future; and evaluate the utility of placements in prison.

**Results.** Data collection is in progress. However, early indications suggest that students view these placements favourably and find them a helpful learning experience. Preliminary results will be reported at the conference.

**Conclusion.** We are hopeful that this evaluation will suggest a way forward to raise awareness about SDOH during clinical placements and will give these students confidence in working with socially excluded populations in the future.

Implication for practise, policy and research. Findings of this study may provide exploration of means of capacity building and training with improved knowledge of the SDOH in partnership between the medical school, the local health board and the prison.

We have developed systems and processes to raise awareness of social factors to be considered by medical students in their future practice. These can guide further development of such placements at HMP Berwyn and in other prisons.

This research was funded by Betsi Cadwaladr University Health Board and sponsored by Bangor University in North Wales, UK.