to seven days beforehand as well. DNA rates for November were analysed to assess the impact of intervention one and December for intervention two. Patient characteristics were also examined monthly to identify any trends among those who DNA. The analysis comprised 109 patients (69 for pre-intervention, 27 for intervention one, and 13 for intervention two).

**Results.** Pre-intervention DNA rates were 13.4%, 17.5%, and 13.5%, respectively. The incidence of DNA increased to 19.9% after intervention one. However, this was lower than November 2022. The rate for intervention two was 11.6%, lower than that of December 2022. Being White, having a mood disorder and having mental health disorders which fell under more than one category were prominent among those who DNA.

**Conclusion.** Increasing the frequency of text message reminders of appointments had a significant impact on reducing DNA rates, highlighting a potential intervention which can be implemented in CMH to tackle the issue of DNA.

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.

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**Empowering Psychiatric Trainees: Enhancing Portfolio Competence Through the Café of Royal College of Psychiatrists (CoRP) Quality Improvement Project**

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**Aims.** The Quality Improvement Project (QIP) for the Café of Royal College of Psychiatrists (RCPsych) Portfolio (CoRP) was initiated to address the challenges faced by UK postgraduate psychiatric trainees in utilizing the RCPsych Portfolio effectively. The primary objective of this project is to enhance trainees’ confidence and competence in using the portfolio. Additionally, CoRP aims to establish a robust, sustainable ecosystem of peer coaching and mentorship to support continuous learning and development among trainees.

**Methods.** The CoRP employs a unique, multi-faceted approach, leveraging a scalable coaching and mentoring model. Firstly, the program focuses on increasing its visibility among trainee groups through targeted communication and marketing efforts. Secondly, CoRP provides on-demand sessions to cater to the varied schedules and job plans of trainees, offering flexibility and accessibility. The sessions offer a mix of coaching, mentorship, and guidance, tailored to the specific needs and learning styles of each trainee. Furthermore, the project fosters an environment where trainees can learn from peers and experienced professionals, enhancing the learning experience and promoting a culture of collaborative learning.

**Results.** The implementation of the CoRP has led to significant improvements in trainees’ confidence in using the RCPsych Portfolio. This outcome is evidenced by the data collected from pre- and post-session surveys, which show a marked increase in trainees’ self-reported confidence levels. The project has successfully conducted a series of sessions that focus on various aspects of portfolio management and learning. These sessions have been well-received, with positive feedback from participants indicating that the program meets its intended objectives. However, the project acknowledges the need for long-term data to understand its impact on the Annual Review of Competency Progression (ARCP) outcomes and to assess its sustainability over time.

**Learning Disabilities: Reducing CTPLD West Psychiatry Clinic DNAs by 20% by Offering a More Person-Centred Service**

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**Aims.** To explore reasons why patients under the learning disability community psychiatry team were not attending their appointments.

To explore patient preferences for type of appointments offered (P2F, telephone or video) aiming to improve access and attendance, whilst promoting reasonable adjustments for patients with learning disabilities.

To improve efficiency in terms of number of patients seen and reduce wasted clinical and admin time in relation to DNA appointments, by reducing the ‘did not attend’ (DNA) rates by 20%.

**Methods.** With the support of the QI team using methodology including fishbone diagrams and PDSA cycles, electronic data on the number of DNA psychiatry appointments were collated from January 2022 onwards and recorded monthly.

Each DNA appointment was coded with a reason given for non-attendance. The data was then reviewed and analysed to identify any common themes around non-attendance.

A questionnaire was initially trialled with a small sample of patients who had not attended to explore reasons for non-attendance and preference regarding appointment type. The questionnaire was then sent to all CTPLD patients who had missed