

informally and 18% neither detained nor admitted. 26% of the time substance misuse (acute / chronic) formed part of assessment.

Conclusion.

- Overall results showed that at least one NSCHT doctor was involved in 91% of assessments undertaken, with roughly two thirds of doctors being Consultants and one third Registrars.
- Focusing on assessments undertaken in the Section 136 suite, at least one NSCHT doctor was involved in 92% of assessments undertaken, with roughly half of doctors being Consultants and half Registrars.
- Focusing on out of hours assessments, at least one NSCHT doctor was involved in 89% of assessments undertaken, with roughly two thirds of doctors being Consultants and one third Registrars.

Recommendations:

- To amend the Section 136 form to add the role of the doctor in the assessment.
- Results to be presented and discussed at the Mental Health Law Governance Group-completed.
- Results to be presented to the Acute and Urgent Care Directorate-completed.
- Executive Summary to be presented to the Clinical Effectiveness Group-completed.

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.

Clozapine: How Well Are We Monitoring Patients?

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Aims. Aims and auditable outcomes: We aim to ensure 100% patients on clozapine have annual physical health checks. By ensuring all patients prescribed clozapine therapy receive an annual physical health check and medic review, we aim to improve patient safety and prevent serious harm from occurring in cases that could be avoided.

Methods. All patients aged over 18 years prescribed Clozapine, who were under the assessment and treatment service in Eastbourne, were identified using Carenotes, our electronic patient records system.

Results. 78% of patients on clozapine had been reviewed by a doctor in the past 12 months. 32% of patients had attended a physical health review within the past 12 months. One patient had not had a medical review for several years.

Conclusion. Our audit has shown that there are no clear guidelines on the long term monitoring of clozapine in regards to physical health reviews and psychiatric assessment. Using best practice it appears annual review should be the minimal standard, however further evaluation of this is recommended at trust level.

In response to these results and the current guidance, we would like to implement the following:

- Create a database for all patients on Clozapine under the care of Eastbourne ATS.
- Create a spreadsheet looked after by one member of admin staff to be updated regularly

- The physical health lead nurse to be informed of physical health checks due by admin

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Is There a Role for Digital Psychiatry in Older Adults Mental Health Services in the Post Pandemic World?

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Aims.

1. To evaluate the clinical practice and documentation of remote patient consultations in memory assessment service during COVID-19 pandemic
2. To gather the views of clinicians and patients on the benefits and challenges of remote patient consultations
3. To understand the role of digital psychiatry in our services after the pandemic

Methods. An audit tool and feedback questionnaires for patients and clinicians were completed through discussions and consensus with multidisciplinary team. RCPsych guidance for cognitive assessments was also considered.

A random sample of 20 patients was identified who had virtual consultations. Rio clinical records were used for data collection using audit tool.

Patients and clinicians were sent questionnaires

Results. Evaluation of clinical practice

The audit demonstrated that all the relevant documentation was completed in vast majority of cases and the clinical practice was not significantly affected by the consultations being carried out virtually. Mental state examination was identified as one aspect which got partially completed in 4 out of 20 assessments during the remote consultations

Patient survey

Patient survey showed that the purpose of the consultation was mostly served by remote appointments. Almost 90% feedback that the communication was clear and they were able to engage freely and effectively with the clinicians. 55% reported preference for face to face meetings in future. 28% preferred remote consultations citing not having to travel as the main reason for their choice. Another benefit identified was relatives who don't live locally could also attend the virtual meetings to support the patients and to offer useful information

Clinicians' survey

From clinicians' perspective, the main advantages were reduced travel time, improved time efficiency, and reduced risk of infection. The main disadvantages were inability to get the full clinical picture compared to face-to-face appointments, technological challenges, and lack of personal touch. 43% reported that the job satisfaction has improved from hybrid working

Conclusion. There are certainly benefits and advantages for remote consultations from the perspective of both patients and clinicians. While majority of clinicians prefer a combination of remote working and face-to-face consultations, more than half of patients expressed preference for face-to-face appointments. This audit demonstrates that, although remote consultation is not the gold standard method in assessing cognitive functions and