face-to-face (F2F) recruitment programme in 2018 with our first remote recruitment programme in 2020. In a world of fast paced technology, we reflect on what lies in the horizon for international psychiatric recruitment.

**Method.** The recruitment programme was organised by 4 psychiatric trainees affiliated to each mental health trust. A two-day remote programme on the Zoom platform comprising of 45-minute slots was created. Through their own experiences of inspirational speakers, trainees contacted speakers representing different specialities, teaching styles and philosophical outlooks.

Pre and Post Programme questionnaires and certificates of attendance were shared with speakers and attendees. These were compared with Pre and Post Programme questionnaires from the F2F event in 2018.

**Result.** When compared to the 2018 F2F programme, the 2020 virtual recruitment programme attracted a higher number and wider variety of applicants, in gender (62% female/38%male), nationality (UK 79%/Non-UK 22%), as well as wider distribution in age, UK deanery and training position. Despite the elimination of cost, the quality of teaching was rated higher than F2F due to the availability of high quality speakers (100% would recommend to a friend; 72% rated excellent). Whilst the programme was effective in changing minds, this did not exceed F2F recruitment rates. F2F recruitment feedback focussed on inclusion of sub-specialities, whereas virtual programme feedback focussed on ways to enhance interaction. Feedback focussed on technological applications such as interactive quizzes, breakout rooms, play-acting, and having the benefit of clinical vignettes or speakers’ personal stories to bring talks to life.

**Conclusion.** The use of remote technology transcended geographical and demographic frontiers. A variety of high-quality speakers, directly appealing to an international cohort were sourced, at no monetary cost. In future, the budget will be used in interactive applications, and time-limited session recordings. As the participants hungered for personal connections, we recommend a blended programme, with links to taster sessions, retaining the advantages of both strategies.

### Developing psychiatric resources for the new foundation programme curriculum

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**Aims.** Our aim was to develop an easily accessible, relevant and deliverable resource to meet the training requirements of the new foundation curriculum for Foundation Trainees in the West Midlands. The virtual resource needed to provide information at the correct knowledge depth, whilst also being flexible enough to allow trainees to access the materials despite the challenges of remote working. The West Midlands currently holds approximately 1,300 places for foundation training with an increase in numbers planned for 2023 and 2024.

**Method.** The United Kingdom Foundation Programme (FP) is a two-year structured, supervised training programme of learning in the workplace developed to prepare medical graduates for speciality training. The Foundation Curriculum is currently being updated in line with the GMC Standards for Post Graduate Curricula to reflect the developing and contemporary training needs of doctors and is expected to go live in August 2021.

Though the foundation curriculum is broad and does not usually include specific diseases, it is recognised that mental health disorders are common and are frequently missed. The new

### School mental health best practices institute; capacity building of teachers in mental health literacy in Pakistan

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**Aims.** Mental health disorders in children are largely unrecognized in low- and middle-income countries like Pakistan. Teachers, due to their interactions and time spent with children, are important elements in promoting child mental health. Despite this, little importance is given to school mental health (SMH) in the country, and teachers’ training in SMH is almost non-existent. With less than ten child and adolescent psychiatrists, recruiting teachers is vital to provide mental health care to children and adolescents, the majority of the country’s population. This study aims to evaluate the effectiveness of a SMH training intervention for teachers in Pakistan.

**Method.** A 3-day training intervention was planned for school teachers in collaboration with International Association of Child and Adolescent Psychiatry and Allied Professions. The School Mental Health curriculum by the World Health Organization and Stan Kutcher’s Mental Health Literature were adapted after literature review and discussions with experts, and administered as Blended Learning. The intervention was evaluated using pre-workshop, post-workshop and overall feedback surveys. SPSS 25.0 (IBM Corp., Armonk, N.Y., USA) software was used for descriptive analysis. For open ended questions, central themes were identified, tabulated, and analyzed descriptively.

**Result.** A total of 63 participants registered for the workshop. The participants’ mean age was 36.0 years, with 86% women and 14% men. Participants were mostly teachers, however, principals, administrators and counsellors also attended. Participants’ reasons for attending were that they wanted to ‘increase their knowledge’ and learn ‘practical management’ of mental health issues. When asked about student wellbeing, 43% participants said it was a neglected area. Overall, 86.9% of participants felt the objectives were met well or very well and 87.61% stated there was adequate time for discussion. In addition, 90.47% participants responded that facilitators explained concepts well and 94.39% said facilitators answered questions well. Half of all Blended Learning activities were viewed by more than 50% of participants. Activity views decreased by 63.41% from the pre-workshop activities to day 3 activities. Improvements suggested by participants included taking a more problem-solving approach and focusing on the local context.

**Conclusion.** Evidence-based SMH interventions that train teachers are much-needed in the local resource-constrained settings. This intervention met its objectives effectively, however, Blended Learning was not well-received. We have studied learning analytics and identified the potential learner’s profile of teachers as students. Adult learning principles should be implemented in future endeavours. This is a flagship project for future international collaborations between mental health professionals for cross-cultural knowledge exchange.
curriculum makes a specific statement regarding the importance of mental health and specifies a syllabus covering this important area of medical practice.

Around 80% of doctors are expected to have exposure to a community medicine placement, with around 40% expected to have placement within a specific mental health setting. Though other community placements may provide some exposure to the acute challenges of mental health, this is not guaranteed.

To assist in meeting the FP requirement for training in mental health we developed an online resource for all West Midlands trainees, with lectures and information available that covers all of the core curriculum requirements for the FP. These resources can be accessed at any time of the day, at any point of foundation training, with each module certificated to show evidence of the attainment of foundation competencies ready for students ARCP (Annual Review of Competency Progression).

**Result.** A programme of evaluation and effectiveness will be undertaken when the new curriculum goes live.

**Conclusion.** There is an expected expansion in the number of training Foundation doctors within the next 5 years; therefore the demand for this training is expected to increase over time. As the understanding and awareness of the interaction between physical health and mental health continues to develop, we expected the use of this resource grow into the future.

### An innovative method of expanding the support for doctors returning to training in psychiatry after a period of extended leave: the Sheffield Mindful Support Programme

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**Aims.** To offer regular continuous professional development opportunities covering both clinical and non-clinical skills to trainees and trainers and enhance their experience and skills to increase their wellbeing and resilience.

**Background.** There are approximately 50,000 doctors undertaking postgraduate training in England. Of these, 10% (5000) are taking approved time out of training at any time. A 2017 HEE survey revealed that doctors returning to work reported numerous concerns. Based on these and with the backdrop of the Bawa-Gaba case HEE’s Supported return to Training programme (SuppoRTT) was developed.

We at Sheffield Health and Social Care NHS Foundation Trust devised a unique “Mindful SuppoRTT” initiative and were successful in securing funding from HEE. Part of which was the organisation of a conference aimed at various groups of doctors including those who have previously had time out of training, are currently out of training and those considering time out.

The Sheffield Mindful SuppoRTT Programme not only aimed to provide a structured and systematic process for planning and returning from absence, but also focussed on enhancing performance through promoting the wellbeing of participants and supporting them with important clinical and non-clinical skills.

**Method.** 2-day twice yearly conferences, which covered training on speciality specific as well as non-technical skills were organised. The clinical workshops covered interactive sessions of common and emergency clinical scenarios. A wide range of non-technical skills such as an introduction to mindfulness, tai chi, resilience, team-working and leadership, “Thinking Environment” and meditation were introduced and developed using bespoke training.

Feedback was collected at the end of each conference day. The attendees were asked to use a 5-point Likert scale (5 being the highest) to rate their satisfaction with the day and to highlight which sessions they found most and least useful.

**Result.** The attendee satisfaction rate was high. The first conference had ratings of 56% of attendees scoring 5 (excellent) and the remainder scoring 4 (very good). The second conference achieved even higher satisfaction ratings with 94% of attendees scoring 5 and the remainder scoring 4.

**Conclusion.** The conference had high attendee satisfaction. The hope is to expand on its success and open it up to delegates from all specialities within HEE South Yorkshire and the Humber. Evaluation of the long-term impact of this programme is also warranted.

### An evaluation of the Royal College of Psychiatrists’ “Psych Star” scheme

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**Aims.** In 2019, the Royal College of Psychiatrists (RCPsych) launched the “Psych Star” scheme for medical students with an interest in psychiatry. The one-year scheme provides Psych Stars with a matched mentor, free registration at the RCPsych’s International Congress, financial support for psychiatry-related activities, journal subscriptions and access to two online learning platforms. This project aimed to evaluate the effectiveness of the scheme in supporting Psych Stars to explore their interest in psychiatry and in promoting psychiatry as a career choice, through use of a survey for both Psych Stars and mentors.

**Method.** Surveys were sent to all Psych Stars and mentors from the first cohort of the scheme. The mentor and student surveys contained a mixture of ranking, multiple choice, closed-ended and open-ended questions. Questions examined: clarity of the scheme’s aims and objectives; benefits of each aspect of the scheme; impact of the scheme on application to Core Training; benefits and barriers to successful mentorship; adequacy of mentor support from the RCPsych and suggestions to improve the scheme.

**Result.** Six Psych Stars and nine mentors completed the respective surveys. All Psych Stars stated the scheme was enjoyable. Five Psych Stars were more likely to apply for Core Training because of the scheme. All Psych Stars identified the most beneficial aspect of the scheme being the funded place at the RCPsych International Congress. Other aspects highly ranked included: funding to explore areas of psychiatry of interest and the opportunity to be an ambassador for psychiatry. All Psych Stars found the mentorship useful.

Mentors supported Psych Stars by providing career advice, suggesting relevant conferences to attend and assisting Psych Stars make decisions on how to use their allocated funding. Barriers to mentorship that were identified included: geographical separation, limitations related to the COVID-19 pandemic and lack of time. For mentors, areas for improvement included clearer aims and objectives and more support from the RCPsych.

Both mentors and Psych Stars suggested forming a network of Psych Stars and mentors would be useful to share ideas and experiences.

**Conclusion.** This evaluation shows that the Psych Star scheme successfully supports Psych Stars to explore their interest in