Aims. To improve the information exchange between oncall junior doctors and ward teams between shifts including outstanding tasks, alerts and prompts to update clinical record systems accordingly (Rio). We aimed for the handover to be circulated to the correct recipients in 95% of cases as well as to improve its content. This would minimise loss of information and improve patient safety.

Methods. Handover document set up on MS Teams which is accessed by oncall junior doctors and day teams and can be updated live. Relevant training was offered to trainees during induction. We measured the number of days the document is updated and distributed and also measured the tasks not completed or not documented. We measured doctors’ satisfaction via a survey.

Results. We found that on average the handover document is updated and circulated correctly at a rate of 94.8% since the new MS Teams system was implemented. Participating doctors’ survey showed that they felt that this system is safe and easy to use as well as reliable and more efficient than the previous system. They also noted that the training they received during induction was helpful and sufficient.

Conclusion. The digitalisation of the handover process using MS Teams, developed and improved through various PDSA cycles, has resulted in a system which the users find efficient, safe and easy to use. This leads to minimisation of information losses and improves patients’ safety.

QI: Improving Physical Healthcare Recording in a Mental Health Service for Homeless People – Working With KPI’s

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Aims. To assess the job and training satisfaction of junior doctors working in Mental Health placements in Derbyshire; to highlight areas of good practice and identify areas that need improvement to enhance their working experience.

Methods. This is an ongoing Cycle of Quality Improvement to address Juniors Doctors enjoyment of work and job satisfaction. On a 25 point questionnaire we sought feedback as open response, graded response and free text. Questions were formulated using suggestions from Royal College of Psychiatrists Supported and Valued Review and BMA Fatigue and Facilities Charter. Advised areas of improvement from the previous 2017 Quality Improvement project were also reviewed and incorporated into the questionnaire design.

All junior trainees (including Core Psychiatry trainees, Foundation trainees, GP trainees and junior trust grade doctors) working between December 2020 to April 2021 in Derbyshire Healthcare NHS Foundation Trust were sent the questionnaire.

Official end of placement feedback from January-December 2020 was also compared to our findings.

Results. 15 doctors completed the questionnaire.

Areas of trainee-reported satisfaction included training on management of common psychiatric conditions (73%), weekly teaching sessions (100%), ability to organise leave (100%).

Areas of dissatisfaction included training on management of psychiatric emergencies (40%), poor regularity of supervision (53%),