

To resolve this, changes within social media and self-awareness should be promoted, so this is less likely to happen.

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Implementing and Evaluating Online Revision Sessions for the MRCPsych Paper A Examination

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Aims. Preparing for postgraduate examinations is stressful for many doctors, with psychological, financial, and social impacts. Ensuring that doctors feel supported with exam preparation is likely to improve their well-being and performance, whilst also potentially addressing workforce retention and differential attainment. This quality improvement project aimed to improve the confidence and preparedness of trainees taking the MRCPsych Paper A exam in the North West School of Psychiatry.

Methods. Six weekly online revision sessions were held for trainees preparing for the MRCPsych Paper A examination. One session was devoted to each major curriculum topic, whilst two covered neurosciences. The sessions were held over Microsoft Teams for 1 hour and chaired by senior trainees and Consultant Psychiatrists. The sessions incorporated a combination of PowerPoint slides, discussion about relevant theory, and interactive practice questions using Slido. A baseline survey was completed to ascertain trainees current levels of exam preparation and confidence. Questionnaires were administered at the end of each revision session to measure their impact and gather feedback. Trainees indicated the extent to which they felt confident with each curriculum topic and their responses were compared, at group level, before and after the revision sessions (1 = strongly disagree with feeling confident, 5 = strongly agree with feeling confident).

Results. 40 trainees completed pre-session feedback and 56 trainees completed post-session feedback. The mean confidence scores of trainees improved by between 25.4% to 51.5% after the revision sessions, with the lowest pre-session mean confidence score being observed for neuroscience and the greatest improvement being observed for psychopharmacology. 77.8% of trainees rated the revision sessions as 'extremely useful' and 22.2% perceived them as 'useful'. All trainees agreed (43.4%) or strongly agreed (56.6%) that their knowledge improved after attending the sessions, and all trainees agreed (23.6%) or strongly agreed (76.4%) that they would recommend them to colleagues. Trainees favourite aspects of the revision sessions included completing multiple choice questions, combining Slido polling with PowerPoint slides, and the speakers explanations of difficult concepts. Suggestions for improvement included offering more frequent and longer revision sessions, concealing group voting choices on Slido until revealing the correct answers, and teaching more relevant theory alongside practice questions.

Conclusion. Online group revision sessions combining interactive polling and didactic teaching are popular and useful amongst trainees preparing for MRCPsych Paper A. These sessions appear to

improve trainees' self-reported confidence with exam curricula content, although further evaluation is required to determine whether they improve examination pass rates.

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Equality, Diversity & Inclusion in the Workplace: Exploring the Experiences of Psychiatry Trainees Across the North West of England

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Aims. Everyone in the NHS deserves to work in an environment that is safe, welcoming, and free from discrimination, however recent surveys have highlighted that this is often not the case. Alarming, it has been recognised that few psychiatrists report any forms of discrimination and of those who have, there is often dissatisfaction with the response received from their employer. Due to a paucity of data relating to the experiences of psychiatry trainees in the North West, we sought to understand their lived experience and to co-design proposals for future work that may improve the status quo.

Methods. All psychiatry trainees across the North West of England in 2022 and early 2023 have been invited to complete an electronic, core training or sub-specialty specific higher training survey. Basic demographic details were collected. Respondents were asked a range of questions around their experience of discrimination in the workplace and good practice observed in managing this. Subsequently, each group of higher sub-specialty trainees were invited to a two-hour reflective session held face-to-face or via an online platform. Two further reflective sessions were arranged in Liverpool and Manchester for core trainees. During reflective sessions, attendees were presented with vignettes of workplace discrimination, developed from the results of the initial survey. Session facilitators guided a discussion on the feelings evoked by each vignette, whether attendees wanted to discuss their lived experience of similar incidents and to consider ideas for what may be done to support a trainee in these situations. A post session questionnaire was circulated.

Results. Over 100 individuals have completed the pre-session survey and attended a reflective session. Survey respondents were predominantly trainees who identified as Asian, Asian British, Black, Black British, Caribbean or African ethnicity, with a roughly 50:50 split between Male and Female.

Themes highlighted include:

That the vignettes used in the reflective sessions are representative of everyday workplace discrimination.

That training in microaggressions should be given to trainers, trainees and other clinical staff on a regular basis.

That the burden of managing discriminatory behaviour should be on the institution and not the trainee experiencing discrimination.

Conclusion. Many psychiatry trainees across the North West have lived experience of workplace discrimination and systems need to