educational aspect and negatively impacted team working skills, whilst others valued this.

Conclusion: The findings of this study suggest that escape rooms could provide an innovative approach to teaching methods in undergraduate psychiatry. In this study, students found the escape room an enjoyable and beneficial experience that improved their knowledge, and they perceived a benefit for revision as the day was situated close to final year examinations. Equally, escape rooms could be used in a myriad of other ways to support learning in different contexts. Given the popularity of experiential learning in medical education this may be an option to provide positive experiences in undergraduate psychiatric education as well as meaningful educational experiences.

Assessment of Knowledge of Learning Disabilities and Workshop for Palestinian Primary School Teachers: A Single-Center Study

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Aims: To assess primary school teachers' knowledge of learning disabilities, and design interactive lectures targeting revealed gaps.

Methods: A 30-question survey was designed based on previously published research alongside a discussion with teacher supervisors. It was comprised of true-or-false or multiple-choice questions, divided into five parts: demographic details, learning disabilities general knowledge, specific learning disabilities, developmental disorders, and management.

A Four-session workshop was held at Terra Santa College in Bethlehem from December 2024 to January 2025, provided by a speech therapist and a psychiatry resident, with the support of Pro Terra Sancta (Bethlehem). Each session was two hours long providing knowledge and interactive activities followed by discussion. The sessions correlated with the different parts of the questionnaire. The first session focused on normal child development, learning disability types, and manifestations. The second session covered specific learning disorders: dyslexia, dysgraphia, and dyscalculia. The third session had an emphasis on developmental disorders: autism spectrum disorder and Attention-Deficit/Hyperactivity Disorder. Finally, the fourth session was about multidisciplinary management, the role of teachers, and individualized learning plans.

Results: Twenty-eight Palestinian primary school teachers filled out the pre-assessment survey. They were all female, of different age groups (9 teachers under 35 years old, 12 between 36–45, and 7 older than 45), and several disciplines (including 9 teaching Languages (32.1%)). Among the participants, 57.1% had related training previously, 92.9% said they teach a student with a learning disability, and 75% described teaching these children as 'very challenging' (n=4) or 'challenging' (n=17). The teachers' average overall score on the pre-assessment was 55% correct, with the highest section mean being developmental disorders (62%), compared with specific learning disorders (34%). Interestingly, most mistakes were related to the misconception that learning or development disorders can be diagnosed primarily with brain imaging. A quick analysis, using RStudio 2024.04, showed a significant difference ($p<0.05$) in overall scores when comparing those who had prior similar training (mean=60.6%) and those who had not (mean=51.5%), with no significant differences among other demographic measures.

The feedback was overwhelmingly positive, with teachers reporting more confidence and enthusiasm to interact with students with learning and developmental disabilities. Specifically, they cited the activities as interactive and relevant to their experiences.

Conclusion: Teachers have a big role in identifying and supporting children with learning disabilities, therefore, awareness campaigns should target this population. Such small studies can lay the groundwork for future research and workshops.

Lessons Learned From a National Student-Led Audit by SPARC (Student Psychiatry Audit and Research Collaborative) on Emergency Department Management of Self-Harm in Under-18s

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Aims: National audits provide valuable experience in research, leadership, and clinical governance. However, student-led initiatives present unique logistical and methodological challenges, including variability in training, data consistency, and long-term engagement. The Student Psychiatry Audit and Research Collaborative (SPARC) conducted a national audit to assess Emergency Department (ED) management of self-harm in under-18s across UK EDs between 2021 and 2023. This study aimed to examine the challenges encountered during the audit process and identify key lessons to inform future student-led research projects. Given the complexity of a multi-centre audit, we anticipated difficulties in training, data collection, and sustaining student engagement over two years.

Methods: Medical students were recruited as regional leads via university networks and psychiatric societies. A multidisciplinary committee of doctors and students oversaw the audit, which reviewed nearly 500 ED records across nine medical schools from 2021 to 2023. Data collection, based on National Institute for Health and Care Excellence (NICE) guidelines, involved a retrospective review but was complicated by a mid-audit guideline change, necessitating adaptations in data extraction. A snowball teaching method was used to train data collectors, who joined at different stages of the project. Following audit completion, challenges at each stage were analysed and compared with similar national audits to develop recommendations for future student-led initiatives.

Results: Nine medical schools participated, each led by a student regional coordinator responsible for local data collection, governance, and team management. However, 25% of records were excluded due to data quality issues, including errors in record eligibility and inconsistencies in questionnaire completion. The decentralised, peer-driven training model resulted in variable knowledge transfer, underscoring the need for structured training frameworks, clearer data verification processes, and automated data collection tools to improve consistency and accuracy.

Conclusion: This study highlights the importance of robust training and data management systems in student-led national audits. Key lessons include the need for structured protocols, ongoing data quality assessments, and strategies to maintain student engagement. Additionally, awareness of confounding factors such as regional variation and evolving clinical guidelines is crucial. These findings provide actionable recommendations to optimise future student-led clinical audits, promoting high-quality data collection and ensuring meaningful contributions to clinical governance.

Introducing a Step-by-Step Guide to ARCP and Portfolio for Higher Trainees in KMPT

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Aims: This presentation aims to support psychiatry trainees, especially those new to the UK system or returning after a break, in navigating the complexities of the new curriculum and its requirements. The introduction of the Placement-Specific Personal Development Plan (PSPDP), Higher Level Outcomes (HLOs), has created a more structured but demanding framework. This guide helps trainees understand and manage these requirements, offering a condensed and practical overview of the portfolio and ARCP process. By focusing on resilience and capability, this presentation simplifies the guidelines provided by the Royal College of Psychiatrists (RCPsych), including the Silver Guide.

Methods: The presentation uses practical strategies and case reports to highlight the common challenges faced by higher trainees. Key issues include managing an active portfolio, mapping activities to HLOs and competencies, and fulfilling WPBA requirements. Real-life examples provide insights on how to set up and maintain portfolios, assign supervisors, and plan development in line with the new curriculum. The content offers practical solutions for trainees, particularly those new to the system or returning after a break. It is also valuable for clinical and educational supervisors, training programme directors (TPDs), and postgraduate medical education (PGME) staff who support trainees' progression.

Results: The presentation was well-received in local teaching sessions, with trainees appreciating the clarity and structure it provided for understanding the new curriculum. Feedback suggested the practical guidance and step-by-step approach helped trainees feel more confident in managing portfolios and meeting new requirements. The discussion focused on engaging with the new system, the documentation processes, and balancing clinical duties with meeting competencies. Early planning, clear communication with supervisors, and a methodical approach to organizing the portfolio were emphasized to ensure the successful completion of assessments and documentation. This session, designed from the trainee's perspective, has also been beneficial for supervisors and educators in understanding the challenges faced by trainees.

Conclusion: This presentation supports trainees, especially those unfamiliar with the UK system or returning after a gap, in navigating the complexities of the new curriculum. Feedback indicates the presentation successfully demystified the process and highlighted the resilience needed to meet the challenges. It will be included in the KSS Higher Trainees Induction and can become a regular teaching slot to provide ongoing support. A survey will be developed to gather formal feedback, improving the presentation for future trainees. The condensed content, based on RCPsych materials, makes extensive resources more accessible for trainees and their supervisors.

Developing and Integrating Regular Training in Serious Incident Investigations and Coroner's Inquests Into the Higher Trainees Teaching at Kent and Medway NHS and Social Care Partnership Trust (KMPT)

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Aims: This project aims to develop and integrate regular training on Serious Incident (SI) Investigations and Coroner's Inquests into the Higher Trainees Teaching at Kent and Medway NHS and Social Care Partnership Trust (KMPT). The goal is to enhance trainees' understanding and confidence in these critical areas, ultimately improving patient safety and supporting psychiatric trainees in their professional development.

Methods: Using Quality Improvement (QI) methodology, the project began with a baseline survey to assess trainees' knowledge and confidence regarding SI investigations and Coroner's Inquests. Based on identified needs, an Initial Training Event was held in November 2023, which included sessions on SI investigation processes, thematic reviews of suicides, patient safety, and involvement in investigations. The second QI cycle focused on developing and delivering a tailored training programme for Core and Higher Trainees in January 2024. This programme consisted of two sessions: "Introduction to Legal Services HM Coroner" and "Managing Serious Incidents". Feedback from trainees was gathered through questionnaires to evaluate the effectiveness of the training.

Results: The baseline survey (April–May 2023) showed that 71.88% of respondents had limited understanding of SI investigations, with 87.5% expressing interest in further training. The Initial Training Event in November 2023 had 47 attendees, with 92.86% expressing a need for additional training. The tailored training programme in January 2024 had 20 attendees, with 100% of respondents indicating that the training would improve patient safety in their clinical practice. All trainees reported a better understanding of the Coroner's Inquest process, and 100% agreed that the training should be repeated annually. Notably, the SI investigation process, including Root Cause Analysis (RCA), is now being replaced by the Patient Safety Incident Response Framework (PSIRF), which represents a shift toward a more flexible, learning-focused approach to managing patient safety incidents. The results from the baseline survey and the initial training event were published in BJPsych and presented at the International Congress RCPsych in June 2024.