S1174 E-Poster Viewing

**Conclusions:** The majority of psychiatry residents are allocated 1 to 3 months for external rotations, but many see room for improvement in terms of flexibility, financial support, and clarity in the application process. Enhancing these aspects could make external rotations more accessible and beneficial for residents.

Disclosure of Interest: None Declared

## **EPV1979**

## Enhancing Autonomy and Supervision During Psychiatry Residency: A Residents' Perspective

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**Introduction:** The progressive acquisition of autonomy, balanced with adequate supervision, is essential during psychiatry residency. However, the adequacy of supervision and the smooth transition to autonomy remains a concern among residents. This study evaluates psychiatry residents' perceptions of the current process of acquiring autonomy from the first to fourth year of training.

**Objectives:** To assess the perceptions of psychiatry residents in Spain regarding the process of progressively acquiring autonomy and how supervision is managed throughout their residency.

**Methods:** A qualitative analysis was conducted on responses to the survey question: "What should be improved in the progressive acquisition of autonomy and supervision from R1 to R4?" Data from free-text responses were coded thematically, with common themes identified and quantified.

**Results:** Responses from 109 residents were analyzed. Thematic analysis revealed that 35% of residents emphasized the need for clearer and more structured feedback from supervisors, while 30% suggested more direct supervision during critical learning periods, particularly in the first two years. Additionally, 20% highlighted the inconsistency of supervision across different units, with some units providing much less oversight than others. Other suggestions included better scheduling of supervisory sessions (10%) and more frequent formal evaluations of their autonomy progression (5%).

Theme	Percentage (%)
Structured feedback	35
Increased direct supervision	30
Consistency across units	20
Better supervisory scheduling	10
Formal evaluations of autonomy	5

**Conclusions:** Residents identified several key areas for improvement in the process of acquiring autonomy, with a particular focus on the need for more structured feedback and increased supervision during the early years of training. Addressing these concerns may improve the overall quality of psychiatric education and resident preparedness.

Disclosure of Interest: None Declared

## **EPV1980**

Evaluating the Need for Rotation Adjustments in Psychiatry Residency Programs: A Cross-Sectional Study

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**Introduction:** Psychiatry residency programs in Spain offer diverse clinical rotations to ensure comprehensive training. However, certain rotations may require adjustments in length or structure to meet the evolving educational needs of residents. This study assesses the opinions of psychiatry residents regarding which rotations should be extended, shortened, or maintained.

**Objectives:** To evaluate the perceived need for adjustments in rotation length across various subspecialties of psychiatry, including child and adolescent psychiatry, dual pathology, and psychotherapy, among others.

**Methods:** Data was collected through a national survey of psychiatry residents in Spain. Respondents were asked to indicate whether specific rotations should be lengthened, shortened, or maintained. Quantitative analysis was performed on responses for seven key rotations: child psychiatry, dual pathology, psychotherapy, research, neuropsychiatry, community psychiatry, and geropsychiatry.

**Results:** A total of 109 psychiatry residents participated in the survey. The most frequently requested extension was for geropsychiatry, with 57% of respondents advocating for a longer rotation, followed closely by community psychiatry (48%). In contrast, rotations in research (26%) and child psychiatry (24%) were iden-

Rotation	Shorten (%)	Lengthen (%)	Maintain (%)
Child Psychiatry	24	15	64
Dual Pathology	6	11	86
Psychotherapy	10	17	80
Research	26	22	57
Neuropsychiatry	15	10	83
Community Psychiatry	3	48	55
Geropsychiatry	1	57	48

tified as those most needing to be shortened. Most residents supported maintaining the current duration of dual pathology (86%) and neuropsychiatry (83%) rotations.

**Conclusions:** The results suggest a strong desire among psychiatry residents to extend rotations in geropsychiatry and community psychiatry, while shortening research and child psychiatry. These findings highlight the need for training programs to reevaluate the duration of certain rotations to better align with resident learning needs.

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