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Aims: Demand for child and adolescent mental health services (CAMHS) in Northern Ireland (NI) has steadily increased in recent years. Currently, over 50% of families are waiting beyond the recommended nine-week target for assessment. A regional 10-year workforce review outlined the need to expand the CAMHS workforce by 102%, with specific focus on succession planning for psychiatrists. This highlights the need to fill vacant Child and Adolescent Psychiatry (CAP) higher training posts.

By hosting a recruitment event, we aimed to provide information regarding the application process to higher training in CAP and increase exposure to the breadth of career opportunities available. Longer term aims are to sustain recruitment into higher specialty training and bolster the consultant workforce.

Methods: The event was delivered as a two hour in-person meeting. Demographic information and anonymous feedback were collected via Microsoft forms. The programme included presentations from current higher trainees, consultants and the Training Programme Director. Topics covered included the following:

Application and interview process.

Structure of training including on-call rota arrangements.

Day-to-day experience of a consultant covering a step three community CAMHS post.

Overview of specialist service provision in CAMHS including eating disorder, autism and CAMHS intellectual disability services.

The event also provided opportunity for networking and an open-ended question and answer session.

Results: The event was attended by six local core psychiatry trainees. Four attendees had previously worked in a CAP post, whereas two had no CAP experience or only out of hours exposure to the specialty. All attendees ‘strongly agreed’ that the event had increased their knowledge about the opportunities in CAP in NI. Five attendees ‘agreed’ that the event had strengthened their aspirations to train in CAP with one attendee responding ‘strongly agree’ to this statement.

Conclusion: This was the first CAP higher training recruitment event hosted in NI. Although the number of attendees was small, feedback was overwhelmingly positive. Following a year without any regional recruitment into CAP, there have been six applicants for one post advertised for August 2025. Whilst a direct causal relationship cannot be established, we hope that this event reinforced aspirations to pursue this career path. Given the current vacancies across the CAMHS workforce, there is an opportunity to expand this event to include other members of the multi-disciplinary team, to equip the future workforce for the rising demand in services.

Abstracts were reviewed by the RCPsych Academic Faculty rather than by the standard *BJPsych Open* peer review process and should not be quoted as peer-reviewed by *BJPsych Open* in any subsequent publication.

Psychotherapy Training: Educationally Beneficial or Simply Anxiety Inducing?

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Aims: Developing core psychotherapy knowledge and skills is considered a key part of the Royal College of Psychiatrists curriculum. This cross-sectional study aimed to evaluate the current provision of psychotherapy teaching and supervision for core trainees within South-West London and St George’s Trust,

identifying key concerns and proposing improvements to enhance the training experience.

Methods: 27 trainees participated in a trust-wide questionnaire, achieving a 58% response rate amongst core trainees in years two and three. The questionnaire was conducted online using Microsoft Forms, with a link distributed via email, including multiple-choice and open-ended questions, and focusing on the feelings trainees have towards psychotherapy teaching as well as the benefits and challenges they have observed. Data were analysed using Microsoft Excel and a thematic approach.

Results: A general feeling of anxiety was described by many, with some trainees describing the current system as “frustrating and disheartening”. Other key themes were the perceived lack of preparedness before starting psychotherapy cases, variation in expectations of supervisors and case allocation delays. 87.5% of trainees felt they lacked sufficient knowledge in psychotherapy before starting short-cases, 72% for long-cases. 56% stated they were providing or planning to provide sessions out of their working hours. Reasons given included fears of upsetting the patient, not providing continuity of care during their annual leave or zero days and not being able to complete their case in time for training requirements. 11% were dissatisfied with their short-case experience, 50% with their long-case experience. 61% of participants felt they would benefit from private therapy themselves, to support them during the process.

Conclusion: Results highlight concerns that trainees can have in psychotherapy training, which are being addressed locally but can also have relevance for other training programmes and practices. The perceived lack of adequate teaching prior to starting cases is striking, and could pose potential risks to patient safety. The high numbers of trainees who report offering therapy outside working hours poses risks to trainee well-being, as well as insurance coverage and patient safety. This study also revealed how a large proportion of trainees believe they would benefit from being offered personal psychotherapy, something that is not routinely offered in training. Enhancing psychotherapy training with timely, comprehensive and structured support, whilst also considering trainee wellbeing, could lead to improved educational impact, benefiting both trainee professional development and ultimately patient care.

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Attitudes, Education and Euthanasia

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Aims: Following the recent passage of the Terminally Ill Adults (End of Life) Bill (2024) through UK Parliament, we set out to understand the views of psychiatrists towards assisted dying and the nature of their education in this area.

Methods: We selected 2 previous surveys. Using a pragmatic group, we developed a survey based on previously used questionnaires in this area. We gathered demographic data including religious affiliation, and country of primary medical qualification. We surveyed 44 psychiatrists in total.

Results: 27% had experience of undergraduate education on assisted dying euthanasia while 11% postgraduate education.