

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.

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.

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.

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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.