Conference: Provided a platform for trainees to showcase achievements, network, and gain insights from external speakers.
Results: Quantitative and qualitative feedback was collected.

Day 1: Overall satisfaction of the day averaged a score of 4.5/5. 48% of attendees rated the content as "very good" and 52% rated it as "good". Participants praised the interactive breakout rooms and emotional intelligence sessions, with suggestions for enhanced face-to-face elements.

Day 2: Overall satisfaction of the day averaged 4.63/5. More specifically, 77% of attendees were "very satisfied" with the content. The practical consultant preparation talks and scenario-based discussions were highly valued. Feedback emphasised the value of real-world insights.

Day 3: Overall satisfaction of the day averaged 4.52/5. More specifically, 79% of attendees rated the content as "very satisfied". The engaging role-playing activities and QI workshops were key highlights. Suggestions from feedback included more examples of successful QI projects.

Conference: Overall satisfaction averaged 4.53/5, with 80% reporting that they were "very satisfied" with speakers. 61% stated expectations were met, while 39% said expectations were exceeded. Networking opportunities and personal leadership insights were praised. Suggestions from feedback included a broader range of topics and more external speakers.
Conclusion: The programme addresses a critical gap in psychiatry leadership training by blending theory with practice and fostering collaboration. High satisfaction and positive feedback highlight its success. The conference enhances its impact by showcasing achievements and fostering networking. Future iterations will refine content, broaden participation, and assess long-term outcomes.

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Enhancing Psychiatry Residency Training: Restructuring Didactics and Morning Reports to Improve Resident Education and Engagement

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Aims: The psychiatry residency programme in Qatar recently faced challenges with didactic activities, prompting the formation of an educational committee composed of trainees and supervisors. Their mission was to revamp the curriculum to meet competency-based standards and address accreditation concerns. A pivotal change was designating one uninterrupted day per week for education. This structured day now starts with a redesigned morning report focused on real-time discussions of overnight emergency cases, integrating various disciplines to broaden clinical insight. Following this, residents engage in newly established, two-hour resident-led sessions covering DSM–5 diagnoses, multiple-choice question (MCQ) practice, simulated learning, and psychiatric disorder management. Afterward, junior residents join Balint groups for reflective practice, while senior residents participate in psychotherapy supervision. Additional activities include case conferences, journal clubs, and workshops, culminating in didactic lectures led by senior clinicians.
Methods: To evaluate the impact of this revamped schedule, the committee conducted a cross-sectional, anonymized survey among all psychiatry residents. The survey contained six core questions, each rated on a five-point Likert scale (1=strongly disagree to 5=strongly agree), supplemented by a free-text section to gather qualitative feedback. Of the 30 residents invited to participate, 22 (73%) completed the survey. Quantitative data were then analysed to assess perceived benefits, identify challenges, and guide further adjustments.
Results: Results indicated that first- and second-year residents reported substantial gains from both the structured teaching and the opportunity to collaborate closely with peers. In contrast, third- and fourth-year residents suggested splitting certain sessions by training level to better match their advanced needs. Another noted concern was the level of faculty engagement, with respondents requesting increased direct supervision, more robust involvement in lectures and case discussions, and pre-assigned case presentations. Residents also expressed a desire for more frequent mock interviews and for simulated sessions in additional languages, targeting the diverse patient population seen in Qatar. Dedicated sessions for MCQ practice were requested to enhance board exam preparation.
Conclusion: Overall, these curricular changes have produced a more interactive and clinically relevant educational experience. However, the survey highlighted clear areas for improvement, particularly with regard to tailoring sessions to various training levels and expanding faculty participation. Further refinements will rely on continuous resident feedback, systematic assessment of learning outcomes, and enhanced faculty development. By maintaining an adaptive and trainee-centred approach, the programme aims to strengthen psychiatric education and foster the clinical competencies necessary for high-quality patient care.

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Addressing Differential Attainment Among International Medical Graduates

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Aims: The aim of this project was to gain a better understanding of clinical and professional areas that international medical graduates find difficult and often these areas can be a barrier in further career progression. This project was undertaken as part of the Leadership and Management Fellow Scheme organised by the Royal College of Psychiatrists. The idea was to align the learnings to broader goals at organisational level.
Methods: A survey questionnaire was created to gather information about the areas that international medical graduates struggle with in their professional career. In response to this a 'Resource Hub' was created to provide concise information on clinically relevant topics and this was made available for all participants to access. Feedback was obtained about the utility of those resources and this was used to further broaden the 'Resource Hub'.
Results: The areas where people struggled to gain competence ranged from membership exams (22%) to research and development (35%), mental health legislations, and trust protocols (50%).

Following this a list of topics were brainstormed and relevant resources were added on the Trust Home page.

Feedback result for the resources was collated in terms of content (84%), precision (90%), relevance (86%), and overall effectiveness (85%). Other suggestions were taken into consideration for

additional resource linking to promote communication skills, tribunal reports, and preparation for appraisal.
Conclusion: It was a valuable project which has helped to shed light on how to facilitate provision of clinically relevant resources that would help international medical graduates in their progress and overall attainment of career goals. The recommendations have been shared across the Trust with quality improvement and medical workforce race equality standards team.

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Transcultural Psychiatry Workshop: Sharing Our Similarities and Celebrating Our Differences

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Aims: Transcultural psychiatry is a critical field that examines the influence of cultural factors on mental health, illness, and treatment across diverse societies. It acknowledges that psychiatric symptoms and disorders can manifest distinctly based on cultural contexts, beliefs, and practices.

The Transcultural Psychiatry Workshop was held face to face at the Sheffield Health and Social Care Trust Grand Round in September 2024. The aim was to aid in implementing comprehensive training programmes, leverage workforce diversity, encourage culturally sensitive interventions, share helpful learning, enhance community engagement.
Methods: The workshop was 120 minutes and was attended by 104 doctors. The workshop included a specialist panel of experts from experience, carers and professionals, presentation regarding data regarding healthcare experience of ethnic minority groups in the area and case-based learning opportunity. Pre- and post-workshop surveys were administered to assess the effectiveness of the workshop and to inform future planning and educational strategies. They used a 5 point Likert scale for most questions.
Results: There were 75 responses received for the pre-workshop questionnaire and 48 for the post-workshop questionnaire. For the question how likely are you to effectively and consistently intervene when you observe discriminatory behaviours in others, there was an increase from 29.33% to 39.58% to be very likely. Regarding awareness of local policy those answering yes went from 28.00% to 97.92%. Whereas 26.67% of respondents felt their knowledge of transcultural psychiatry was below average and 4.00% felt it was far below average, after the workshop 0.00% rated in these two categories. The understanding of potential barriers for people from ethnic backgrounds when accessing healthcare increased in the above average category from 29.33% before to 66.67% after.
Conclusion: The feedback received from participants was predominantly positive and encouraging, reflecting the workshop's effectiveness in meeting objectives.

Participants expressed particular interest in the diverse panel, including a representative from a third-sector organization, an expert by experience, a carer, a psychiatrist and chaplaincy, thereby enriching the workshop's relevance and depth. These findings indicate that the workshop effectively enhanced understanding of transcultural issues and resources, underscoring the significance of educational initiatives in fostering cultural competence within healthcare settings.

Organise further education opportunities. Include greater lived experience and scenario discussions in next workshops. Cover topics like old age psychiatry, cultural backgrounds, correct cultural terminologies and expression of mental distress. Disseminate data regionally and nationally to raise awareness.

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Citizenship-Oriented Care: Increasing Voting Participation in a Mental Health Trust

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Aims: The overall aim of this project was to encourage mental health patients to participate in the general election. To raise awareness among staff about patient voting rights so they are better equipped to encourage patients to participate.
Methods: We conducted face-to-face interviews with all patients throughout the voting process from June to July 2024 on one of the wards.

– Created a page on the trust intranet with information about voting for staff.

– Created a leaflet that was available on the intranet for staff to print out and display.

– Made an educational video on the trust YouTube account and embedded it on the trust intranet.

– Conducted a staff survey after the election to assess knowledge and attitudes about mental health patient voting rights and to evaluate the effectiveness of our interventions.
Results: A survey was conducted and was open for 1 month until 18 October 2024. This was circulated to all staff via email distribution lists. We had 18 completed surveys.

– 44% of respondents were vaguely aware or not aware at all of patient voting rights.

– 39% were not confident about which mental health patients could vote in the general election.

– 67% of respondents did not see any of the voting resources.

– 83% were not confident in supporting patients at the general election.

– 88% of staff agreed that the trust should support patients to vote.

– 93% of staff thought it was important for the trust to promote voting rights of patients; however, 5% thought it was not important at all.

– Of all the patients on the ward (N=19), 7 (36.8%) were not interested in voting, 1 was not eligible and 57.9% were already registered.

– Of those registered, 5 (45.5%) made their own arrangements to vote and 2 were supported by the ward to vote (in person and by post).

– 36.4% (4) of patients who had registered to vote and had expressed interest in voting were not able to vote.
Conclusion: There is a need to increase awareness of voting rights among both staff and patients. Survey uptake was low, but from the data collected, most staff did not see any of our resources and most