Results. This project improved the collection of outcome data in the department from 0% to 98.16%, indicating an improvement of outcomes measurement by >98%. Other outcomes collected showed that patients were predominantly 21–30 years of age and referred to community mental health teams when discharged. The IRAC tool showed most patients were referred for assessment and diagnosis, with the majority of these aims marked as 'fully achieved'. The CGI-I tool showed most patients were 'much improved' upon discharge.
Conclusion. The collection of these outcomes led to the creation of an outcomes measure form on the primary electronic software system (Carenotes) utilized by the department and local trust. This electronic form is now currently being used by the Liaison Psychiatry department at UCLH for their patients and makes this improvement sustainable while providing an easier means to continue collecting data. Ultimately, the collection of these outcomes will guide future changes and improvements for both the liaison psychiatry department and its patients.

Communication Skills in Group Psychoeducation

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Aims. To Improve the mental health of psychiatric inpatients and caregivers. To improve communication skills of postgraduate trainees.
Methods. Setting; Consented, monitoring and observation of communication skills during weekly, inpatient Psychoeducation sessions at Department of Psychiatry and Behavioural Sciences, JPMC, Karachi.

Data collection; Retrospective, communication skill records of postgraduate trainees from last 10 sessions from July 2019 to October, 2020. Based on a 13-items self-made questionnaire for communication skill. The overall communication skills of each postgraduate trainee were recorded from excellent, very good, good, improvement needed and lots of improvement needed category based on their performance.
Results. Current practice showed that communication skills of 70% of postgraduate trainees were recorded as very good communication skill, 30% into excellent while none was noticed in another category.
Re-audit. : It was started soon after implementation of action plan from November, 2019 to January, 2020, with monitoring of weekly inpatient psychoeducation sessions similarly as done previously. The result of reaudit concluded significant improvement in individual and overall communication skill which were recorded as very good 50% and excellent 50% and none had other poorer categories of communications Skills.
Conclusion. Individual feedbacks to doctors immediately after the psychotherapy session according to the audit tool questionnaire to improve current communication skills.

Improving the Referral Process Between Acute Wards and the Psychiatry Department at Tameside General Hospital

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Aims. The project aims to address the barriers faced by the acute hospital and the psychiatry department in the referral process for a psychiatric opinion, at Tameside General Hospital (TGH). The Care Quality Commission (CQC) undertook a review of how people's mental health needs were met in acute hospitals in 2017 and concluded that there were barriers to this, for multifactorial reasons. Examples included: acute hospital staff not feeling adequately prepared to treat mental health conditions and lack of mental health care services 24/7. The current referral process at TGH for the acute hospital doctors requesting a psychiatric opinion presents a challenge for the referring doctor and psychiatry doctor in receipt of the referral. Many at the acute hospital have found the process of referral unclear, and many in the psychiatric department have found that referrals seldom contain sufficient information to determine whether a psychiatric review is required and whether it needs to be prioritised.
Methods. To understand the specific difficulties encountered during the referral process, two questionnaires were created. One for TGH acute trust doctors and one for the psychiatry doctors, asking what the perceived barriers were and how these could be overcome. Data were collected between September and October 2021.
Results. We obtained results from 17 acute trust doctors. The results revealed that most referring doctors found the referral process unclear. 100% agreed that they would benefit from guidance with the referral process e.g., a psychiatry specific referral form and/or a flow chart outlining the referral process. All responders wanted guidance around the roles and responsibilities of the psychiatric team in relation to the hospital setting.

We obtained results from 7 psychiatry doctors. Most were not satisfied with the referrals received. 100% would like to see a specific psychiatry referral form implemented in the acute hospital.
Conclusion. Key findings were: the referral process is unclear, acute trust doctors don't feel well enough equipped to manage mental health concerns, referrals don't contain sufficient patient information, and that the acute trust doctors don't know where to ask for help. The project reflected earlier CQC findings.

After discussion with the acute trust, our action plan includes creating a psychiatry-specific referral form, to be distributed together with a flow chart which directs acute trust doctors to the appropriate source for psychiatric opinions. We also aim to join departmental and junior doctor teachings regularly to distribute and educate on the process.

Urine Testing in a Local Drug and Alcohol Service: How Has the COVID-19 Pandemic Affected the Frequency of Urine Testing in Patients With Opiate Addiction?

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Aims. When a dependant opiate user seeks help from a substance misuse service, it is vital that some form of drug testing is conducted. This is commonly a urine test and will show the patient's

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