Conclusion. It was possible to see modest improvements in the ward-based management of BPSD using quality improvement methodology, including more favourable psychotropic prescribing. However, total patient numbers are small and further interventions, such as more PDSA cycles, may add value and encourage sustainability.

Timeliness and Quality of Response to Referrals Received by a Psychiatry Liaison Service for Older Adults During a Pandemic

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doi: 10.1192/bjo.2022.279

Aims. To improve timeliness of response and provide a committed plan to referrals received by the liaison service for older adults in Croydon University Hospital. Background: A quality improvement project in 2019 aimed to evaluate effectiveness of the liaison referral pathway. A questionnaire distributed to ward staff revealed some comments regarding 'non-committal advice' given by the liaison team.
Methods. Data were collected from 44 referrals received by the liaison team in June 2021. Variables included referral date, reason for referral, date of first assessment, plan documented in the notes, date and details of committed plan of action.

Multi-disciplinary team (MDT) discussion identified that more committed advice could be provided by the following, which were implemented at the start of September 2021.

1. Huddle at the start of each day to triage and allocate referrals to appropriate members of MDT.
    a. Prompt discussions with senior members of the team following assessment to discuss diagnosis and management.
    b. Team teaching sessions were organised once a week, in the form of case-based discussions and role play, to improve communication skills, confidence and history-taking.

Data were then collected from 48 referrals received in September and October 2021.
Results. Of the 44 patients in June, average time taken from point of referral to assessment was 1.27 days and to providing a concrete plan 1.80 days.

Of the 48 patients between end of September and October, average time to assessment was 1.31 days and to providing a concrete plan 1.88 days.

In June, 75% of patients were seen on same day or within one day and 50% had a concrete plan within one day.

In September/October, 65% of patients were seen on same day or within one day and 52% had a concrete plan within one day.
Conclusion. These results highlight that assessments by older adult liaison service require detailed collateral history, investigations and MDT discussions.

While 'obtain collateral history' may not seem as committed a plan as prescribing medication, it remains an important part of old age psychiatry.

Given the rapid turnover of patients and increased pressures during the pandemic, it is the responsibility of the liaison team to communicate effectively with the wards and offer a timeline for completion of plan.

Following above changes, another questionnaire has been sent to request feedback on effectiveness of the liaison team.

Improving Access and Confidence in Learning Lessons From Serious Incidents: A Quality Improvement Project Aimed at Junior Doctors

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doi: 10.1192/bjo.2022.280

Aims. Birmingham and Solihull Mental Health Foundation Trust (BSMHFT) previously developed some methods of learning lessons following serious incidents. However, despite various systems available, frontline junior doctors were not regularly exposed to important learning opportunities. This potentially resulted in doctors not being aware of learning from serious incidents, and not feeling embedded within the organisation, with potential effects on their training experience. As we identified an unmet need within the Trust in learning lessons from serious incidents amongst junior doctors, we aimed to improve access and confidence in learning from serious incidents by starting a Quality Improvement project on this theme.
Methods. The current approach involved a comprehensive quarterly bulletin circulated by email to staff. An initial survey confirmed that this was not very effective in delivering learning lessons information to junior doctors.

Using a QI driver diagram, we identified potential areas for change. Selected change ideas were sequentially trialled including shortened email bulletins, supervision templates and remote learning lessons sessions. Initial PDSAs highlighted difficulties with communication via email, with many trainees failing to read/engage with this format.
Results. The use of remote interactive learning sessions yielded positive results, with improvement in the confidence in learning from Serious incidents. We therefore continued to refine this method to wider groups.

During the COVID-19 pandemic we experienced multiple setbacks and created a timeline to support team morale, maintain team energy, visualise progress and motivate the team. We therefore managed to persevere and strengthened the group by recruiting members to the team and complete the project.
Conclusion. The team have been able to create a sustainable, effective and interactive short teaching session which has shown to be effective in engaging trainees in this vital area and help us meet our aim. This format further has the potential to be refined and implemented locally and nationally.

Have You Seen the NEWS Today? - a QI Project

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doi: 10.1192/bjo.2022.281

Aims. The main focus of this QIP was to improve the documentation of NEWS (National early warning scores) and subsequent escalation as appropriate in an Old Age Psychiatric Ward setting.

https://doi.org/10.1192/bjo.2022.280 Published online by Cambridge University Press