

Review of a new way of teaching addictions skills to core psychiatric trainees

Mariana Vieira,¹ Patrick Horgan,² Julia Sinclair³

1) ST5 GA psychiatry, Bolton Achieve, Greater Manchester Mental Health NHS Foundation Trust

2) Consultant Psychiatrist, Greater Manchester Mental Health NHS Foundation Trust

3) Professor of Addiction Psychiatry, Faculty of Medicine, University of Southampton; Honorary Consultant in Alcohol Liaison, University Hospital Southampton

Background

The Royal College of Psychiatrists produced a report in 2020 which described challenges in developing the addiction competencies of psychiatry residents in the UK [1].

In Jan 2019, the RCPsych Council approved a change in the curriculum such that that core trainees should complete two workplace-based assessments in addictions psychiatry to progress through their training.

In 2022 the new GMC curriculum came into force and a network of Regional Tutors was set up to enable all trainees to have access to a competent addiction psychiatrist. Due to variability in addictions services in England [2], there was variation in the way these sessions could be delivered.

Feedback was collected from core trainees on these sessions using a structured questionnaire, and results were compared across two regions – Northwest of England and Wessex.

Objective and Methods

This evaluation summarises the feedback of core trainees in psychiatry to addictions focused case-based discussion (CBD) training sessions. This was completed using a structured online questionnaire.

A comparison was made between two regions using the same questionnaire to explore differences and facilitate inter deanery learning and improvements.

Core Trainees from Northwest England and Wessex completed questionnaires on a Microsoft Teams[®] Form on:

- Sign-up ease
- Discussion quality
- Training relevance
- Structure
- Interactivity

The data from the questionnaires was summarised and analysed using Microsoft Excel[®] Software.

Regional variations between participants were analysed using the Mann-Whitney U test, with significance set at $p < 0.05$

References

[1] Lovett K, Curtis V, Sinclair J, L Sell *Training in addiction psychiatry: current status and future prospects*. London, England: Royal College of Psychiatrists, 2020.

[2] Black DC. Review of drugs part two: prevention, treatment and recovery: annexes. UK: Report for the Department of Health and Social Care. 2021

Contact information

You may contact the authors via the email mariana.vieira@gmmh.nhs.uk

Results

Post-session feedback was overwhelmingly positive, with the majority rating all categories as 'Excellent' or 'Good.'



Statistically significant regional differences were found in 'Quality of Discussion' ($p = 0.013$), 'Structure and Organisation' ($p = 0.002$), and 'Interactivity' ($p = 0.044$), with Northwest participants reporting slightly higher satisfaction.

No significant differences were observed in 'Ease of Signing Up' ($p = 0.599$) or 'Relevance to Training' ($p = 0.543$).



Conclusion

The addictions CBDs appear to be highly valued and well-received.

Regional variations in feedback suggest potential differences in training delivery or participant expectations, warranting further data gathering and collaborative work. Expansion of surveyed regions would be beneficial.

In the future, we aim to include questions regarding self reported **knowledge improvement** so data can be gathered on the effectiveness of addictions CBDs.