



However, structured support – through supervision, peer networks, and resilience training – can mitigate its effects. Future research should assess the long-term effectiveness of interventions and explore how training institutions can better integrate trauma-informed approaches into curricula. By prioritising trainee well-being, psychiatry programmes can promote a more resilient mental health workforce.

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Child Psychiatrists' Knowledge and Attitudes on Medication Reimbursement Schemes in Ireland

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Aims: The Long-Term Illness Scheme (LTI), funded by Ireland's Health Service Executive (HSE), provides free prescriptions at the primary care level for 16 specified physical and mental health conditions. This scheme is non means tested and is facilitated under the Primary Care reimbursement service via the HSE. It was initiated in 1970 under the Health Care Act and was last revised in 1975. This survey aimed to assess Child and Adolescent Psychiatrists' knowledge of the scheme, its usage, and the perceived barriers or enablers to its utilization.

Methods: A mixed-methods cross-sectional survey was conducted among Consultants and Higher Specialist Trainees in Child and Adolescent Psychiatry in Ireland (N=60) on an anonymous, opt-in basis.

Results: The findings revealed low levels of knowledge and utilization with a minority (41%) of respondents reported being somewhat aware of the scheme. 58% felt uninformed about the medications reimbursable. Qualitative analysis highlighted significant barriers, including restrictive and confusing inclusion criteria, administrative burdens, and time constraints in clinical practice.

Conclusion: These results underline the need for national training on the LTI scheme, a systematic review of inclusion criteria to align with international best practices, and streamlined administrative processes. Addressing these gaps could reduce barriers for clinicians and improve access to psychotropic medications for children and adolescents with mental illness. Such measures are crucial to enhancing equitable care and alleviating administrative strain on consultants, ultimately benefiting both clinicians and young patients in Ireland. Equipping psychiatrists with the necessary tools and knowledge is essential to effectively utilize health reimbursement schemes and advocate for better mental health care.

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Implementation of Realist Findings to Create an Innovative Pathway for Weight Gain Associated With Anti-Psychotic Use in Patients Living With Severe MENTAL Illness (SMI) – IMPLeMENT

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Aims: Antipsychotic medications are essential in treating patients with severe mental illness (SMI), but they are associated with rapid weight gain, significantly increasing the risk of cardiovascular disease and diabetes. These physical health complications contribute to reduced life-expectancy and development of preventable physical health conditions. The NIHR-RESOLVE study (REF:HSDR131871) explored non-pharmacological interventions for antipsychotic induced weight gain, and highlighted the urgent need for a structured, preventative pathway to support patients at risk.

Fragmentation between physical and mental health services, can leave patients with SMI without adequate physical health support. Despite national guidelines recommending annual physical health checks, interventions often come too late, typically after significant weight gain has already occurred. Additionally, stigma surrounding weight gain exacerbates mental health difficulties.

Methods: IMPLeMENT, an impact study funded by Aston University, facilitated three online workshops, and one in-person event to co-produce a person-centred preventative pathway to manage antipsychotic-induced weight gain. In collaboration with The McPin Foundation, sessions were attended by psychiatrists, dietitians, occupational therapists, policymakers, managers, commissioners, pharmacists and service users. Findings from RESOLVE served as a foundation for discussions, and healthcare professionals from the UK and international mental health services (including learning disabilities, forensic psychiatry, and early intervention in psychosis) shared experiences and discussed how they may implement change in local settings.

Results: Thematic analysis of workshop transcripts and notes revealed key challenges and opportunities in developing an effective preventative pathway. Stakeholders highlighted several areas for improvement:

Holistic approaches – current interventions are often fragmented, lacking integration across services.

Shared Responsibility – The need for collaborative care among different HCPs and services was emphasised.

Improved access to information – service users and professionals expressed the importance of psycho-education and clear, accessible resources to facilitate proactive management.

As a direct result of this work, multiple healthcare organisations are implementing and evaluating preventative weight management