everyone's wellbeing, especially for the most vulnerable individuals.

9 AN EVALUATION OF AN INTERNATIONAL LEADERSHIP & MANAGEMENT CONFERENCE

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Aim Our conference aimed to address the lack of opportunity for healthcare students to develop leadership skills through the traditional curriculum. As well as the need to increase students' desire and confidence to pursue healthcare roles associated with leadership and management.

Methods Pre and post-conference questionnaires were sent to conference delegates. Delegates rated their knowledge concerning health leadership and management using the scale: excellent, good, neutral, poor, very poor. Desire and confidence of delegates to pursue healthcare leadership and management roles was also assessed. A comparison of pre and post-conference questionnaires was then carried out.

Results Comparison of the questionnaires show an increase in delegate knowledge of healthcare leadership and management post-conference, with an increase of 12.2% of delegates rating 'excellent' and 32.5% rating 'good'. An increase in desire and confidence in undertaking a healthcare and management role was also evident.

Furthermore, 22.2% of delegates rated 'strongly agree' and 51.5% rated 'agree' in response to the statement 'Through the conference I have developed the relevant knowledge, skills and behaviours needed for a role in healthcare management and leadership'.

41.4% of delegates also 'disagree' and 11.1% 'strongly disagree' with the statement 'the undergraduate curriculum includes enough guidance on management and leadership', highlighting the need for opportunities to develop such skills.

Conclusion The data demonstrates that student-led, international leadership conferences are an effective way of enhancing healthcare leadership and management skills in attendees.

Additionally, with more students and healthcare professionals having greater confidence to engage in leadership roles, it allows for better patient care through efficient communication, decision making and time management as shown through previous studies.

Elisha Kailla - presenter

10 AN EVALUATION OF VIRTUAL VS IN-PERSON LEADERSHIP IN HEALTHCARE CONFERENCES

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During COVID, most conferences have moved to an online format, however, little data has been collected on how this shift affects conferences run by students aimed at university healthcare students. Our intervention was an online student-

led, international leadership conference using the platform HopIn. The post-event survey showed that 81.8% of participants felt HopIn was an excellent or good conference platform. We looked at the main reasons participants felt that an online conference was preferable to in-person and the top 3 results by frequency were: No need to travel (85.9%), Cheaper (71.1%), and Greater range of speakers who wouldn't have been able to attend in person (53.4%). On the other hand, our results demonstrated some disadvantages: Harder to Network (70.7%), Technical Difficulties (49.5%), and Unstable Internet (40.4%).

This data shows that although there are problems unique to online conferences such as unstable internet, this method of delivery maximizes delegate participation and attendance. A virtual format also enables an international reach, without excluding people from events due to time, travel, or financial restrictions.

Holly Trippe Presenter

11 AN INSIGHT INTO THE WELLBEING OF JUNIOR DOCTORS AT AN ACUTE TEACHING HOSPITAL

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NHS pressures including underfunding, workforce shortages and rising patient demands are affecting doctors mental and physical wellbeing. A British Medical Association publication highlighting this, lead us to conduct a survey to assess junior doctor's wellbeing at an acute teaching hospital.

A questionnaire was emailed to all junior doctors (n=390). 101 junior doctors completed this (25% response rate). Of the respondents: 77% <30 yo, 69% female, 49% foundation doctors, 37% core/GP training, and 14% senior doctors.

Key results included - Working hours: 66% work between 41-50 hours a week and 15% work 50+ hours a week

- Mental health: 40% felt anxious more than once a week, 24% felt anxious daily, 52% felt depressed once a month and 9% felt depressed daily

- Accessing support: 66% felt they would know where to access help if they felt anxious, stressed, or depressed. Despite knowing where to access support, 81% did not access help. 53% were concerned about having their confidentiality breached and 4% reported having previously had their confidentiality breached

- Work-life balance: 71% reported going through a working day without adequate nutrition or hydration more than once a week. 49% felt emotionally exhausted and overwhelmed by work more than once a week and 42% rated their quality of life as poor

- Desire to practice medicine: 57% had a strong desire to continue practicing medicine, sadly however, 12% regretted becoming a doctor

From this survey it is evident that working pressures are having a profound effect on junior doctors' wellbeing. To identify solutions, findings were analysed for root causes and divided into four categories – system-based, cultural, service and individual factors. Proposed solutions were discussed at