

In-situ child and adolescent mental health simulation with human factors feedback delivered by airline pilots

Megan Fisher^{1*}, Alexander Jolly², Mumtaz Mooncey³, Kerry Robinson¹, Robert Lloyd¹ and Dave Fielding²

¹Whittington Health NHS Trust; ²Airline Captain and ³University College London Hospital

*Corresponding author.

doi: 10.1192/bjo.2021.388

Aims. To encourage multidisciplinary team learning by introducing Child & Adolescent Mental Health (CAMHS) in-situ simulation training.

To provide focused Human Factors feedback through the expertise of senior airline pilots.

Method. The integration of the WingFactors in-situ simulation programme to multiple departments at Whittington Health NHS Trust has transformed the education landscape. The programme has received unanimously positive feedback, and the potential benefits for not only physical, but also mental health training, have been quickly recognised. A total of 90 simulations have been performed. A number of CAMHS scenarios have been designed with the primary aims of encouraging multidisciplinary training and increasing the focus on Human Factors in Psychiatry.

Simulation scenarios were performed in real clinical environments with primed actors, thus enabling high-fidelity in-situ simulation. Immediate 'hot' debriefs were delivered by clinical faculty and uniformed airline pilots, with emphasis on psychological safety to encourage participation from all team members. The key learning points were then detailed in written documents and circulated to the wider team as a valuable learning resource.

The first CAMHS simulation involved the acute management of a collapsed patient in the Emergency Department toilet, with a ligature tied around her neck and accompanied by a distressed patient. Another scenario addressed de-escalation techniques when dealing with a patient presenting with an overdose, who was threatening to leave the ward and posing potential risk to herself.

Result. The nature of these in-situ simulations enabled the multidisciplinary team to analyse practical considerations in the management of acute clinical situations. Scenarios were designed to focus on areas which had been identified as needing improvement for patient safety.

The observations provided by airline pilots increased the focus on Human Factors training. A number of key themes were identified, including the importance of effective team-briefing, distraction management and task allocation. This is of particular significance when managing a distressed patient and anxious relative, in a busy high-stress clinical environment.

Conclusion. In-situ simulation is a newly emerging concept in the field of Psychiatry, and the success of this programme has been highlighted through consistently positive feedback from participants, and nomination for the HSJ Award (Best Education Programme 2021). The involvement of airline pilots has promoted collaborative learning amongst the multidisciplinary team, and increased the focus on Human Factors in Psychiatry, clearly demonstrating the value of in-situ simulation training in this field.

Novel approach to providing child and adolescent mental health education to allied health services

Michael Foster^{1*} and Sally Arnold²

¹The Darwin Centre and ²Harplands Hospital

*Corresponding author.

doi: 10.1192/bjo.2021.389

Aims. To create and deliver a positive educational session for allied health services on prominent child and adolescent mental health conditions. It was hypothesised that delivering tailored teaching sessions on a range of child and adolescent mental health conditions would help improve the knowledge of allied health services. A quiz was administered at the beginning and end to assess the effectiveness of the sessions.

Background. In early 2019, a request was made by Staffordshire youth drug and alcohol service for an informal teaching session on prominent mental health conditions experienced by those under 18. The team often encountered the requested conditions but had no role in managing or treating them resulting in weaknesses in their knowledge. There was a strong desire to learn more about what the cause, presentation, diagnosis and management was of these too. An interactive, 60-75 minute session was requested on ADHD, autism, depression, anxiety, emerging emotionally unstable personality disorder, bipolar affective disorder, and schizophrenia.

Method. Sessions were conducted at the local drug and alcohol service, and at 2 regional social services, in autumn 2019. A 21 question quiz, 3 questions on each topic, was taken at the start and end of each session. The quiz content was covered within the teaching session, as well as time for questions, then marked and converted into a percentage.

Result. 19 quizzes were taken; either by individuals or within pairs. The average score before the teaching was 43%, increasing to an average of 90% after the teaching. The quiz showed good knowledge on anxiety and depression before the teaching, with an average pre-test score of 66%, whereas knowledge on the other topics was less. Post-test scores increased to 100% for most areas, but scores for ASD and bipolar were both 66%.

Conclusion. Feedback from the sessions was positive and staff across both services demonstrated a significant improvement in their understanding of prominent CAMHS mental health conditions. Further education and a change of approach to teaching is required for autism and bipolar affective disorder, both of which are challenging and broad topics.

The pre-teaching results do however demonstrate there is a need for better inter-agency education within teams, as well as reciprocal teaching so that knowledge from different teams can be shared. Further sessions are being proposed for other social services and general practises.

Recruiting medical students from underrepresented backgrounds to a project to identify support challenges amongst their peers whilst encouraging early career engagement in psychiatry

Heather Gail McAdam^{1*} and Debbie Aitken²

¹University of Edinburgh and ²University of Edinburgh, University of Cambridge

*Corresponding author.

doi: 10.1192/bjo.2021.390

Aims. To engage lived experience individuals to run a project identifying the mental health challenges unique to medical students who self identify as belonging to marginalised groups;

To use the project findings to inform mental health support and education during medical training and beyond;

To encourage the individuals to engaged mental health policy and education whilst also using the process to inform their future medical careers, including in the field of psychiatry.

Method. Lived experience individuals were recruited to the project following open applications from medical students. The role