Background Child and Adolescent Mental Health Services, or CAMHS, are the NHS services involved in the assessment and treatment of children and young people with mental health concerns.

Data from the UK found that up to one in ten young people have a diagnosable mental health disorder. Those who present to hospital and are awaiting specialist input for or for a tertiary bed to become available are often admitted to general paediatric wards.

The number of CAMHS admissions to general paediatric wards is increasing across the country and the vast majority occur out of hours, when trainees may be without on-site senior support. Medical and nursing personnel frequently report difficulties in this area, including with stigma around mental health and the difficulties of multi-agency working. Young people and their parents also commonly describe negative experiences with mental health services.

There is little formal CAMHS training for general paediatricians, and multiple surveys support the need for additional teaching. In order to try and improve available training in this high-risk area, we designed a novel course featuring simulated acute mental health scenarios for general paediatric teams.

Summary We designed a one day course for general paediatric doctors and nurses to cover multiple aspects of acute mental health presentations. Faculty included Paediatric consultants, CAMHS consultants, simulation technicians, and ‘planted’ staff, and trained actors as simulated patients.

Scenarios were a mix of high fidelity manikins and simulated patients, with some using a mixed modality approach. Small group workshops were interspersed after relevant sessions led by CAMHS Consultants. Topics included acute psychosis, legislation, verbal de-escalation and rapid tranquillisation.

Results Two courses have run so far in the last four months, with 11 candidates, including medical and nursing staff. All participants highly rated the realism, the relevance of the course to their training and reported increased confidence managing acute mental health crises. Specifically regarding rapid tranquillisation, self-reported confidence improved from 3.1 out of 5 pre-course to 4.4 post-course.

Discussion, conclusion and recommendations The course helps promote the ‘parity of esteem’ – the concept that mental health should be on equal standing with physical health – as promoted by the Royal College of Paediatrics and Child Health.

The course will continue to run approximately four times a year. Future courses may include dates for emergency department and mental health professionals.

SC8 DEVELOPING A MICROCONTROLLER-POWERED PAEDIATRIC CPR FEEDBACK DEVICES
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This short communication aims to present a microcontroller-powered feedback device for the paediatric CPR manikins that do not have feedback features built-in.

A considerable amount of research was undertaken upon identifying that the paediatric mannequins were the only CPR trainers in the institution that did not have built-in feedback devices for compression rate and recoil. The latest CPR guidelines from the American Heart Association were studied, where it was found that by January 31, 2019, all adult AHA courses will require the use of an instrumented directive feedback device or mannequin, with paediatric and infant courses to follow suit (AHA, 2017). Inspiration for the build was drawn from a project found online (Escobar, 2016).

Parts were sourced and individually tested before completing a basic prototype circuit (Appendix). The input parameters were tested and the software was programmed to reflect the input data on the visual outputs (LEDs, LCD). The CPR mannequin was taken apart and the sensors were placed inside at suitable positions for collecting data. The device tested was tested extensively and was programmed to provide feedback.