systematically gathered since 2022, has been pivotal in continuously refining the curriculum and teaching methods, ensuring they remain up-to-date and effective.

Results. The bootcamp demonstrated notable success in enhancing the preparedness of new psychiatry trainees for on-call duties. Post-course evaluations revealed an improvement in participants' confidence levels when managing psychiatric emergencies and various on-call situations. Through the practical and interactive nature of the training, trainees reported a deeper understanding of acute psychiatric care and an increased ability to apply theoretical knowledge in real-life scenarios. The hands-on experience with simulated scenarios was particularly effective in bridging the gap between classroom learning and clinical practice. Trainees expressed greater comfort in handling challenging situations, such as rapid tranquilisation and emergency detention under the Mental Health Act, which were previously areas of concern.

Conclusion. The Psychiatry Bootcamp represents a targeted and effective approach to preparing new psychiatry trainees for the demands of on-call duties. By focusing on key areas of need and employing a variety of teaching methods tailored to enhance practical skills and confidence, the bootcamp successfully addresses the gap between theoretical knowledge and clinical application. Preliminary feedback underscores the value of such programs in psychiatric education, suggesting that this model could be beneficial for similar settings seeking to improve trainee preparedness and overall patient care quality.

Bringing Simulation-Based Education in Psychiatry Into the Virtual Sphere

Dr Thomas Scurr[1]*, Dr Abdallah Adbelkerim[2], Dr Jessica Scott[3] and Mr Stephen Haupt[1]

[1]Devon Partnership Trust, Exeter, United Kingdom; [2]Devon Partnership Trust, Barnstaple, United Kingdom and [3]Livewell Southwest, Plymouth, United Kingdom
*Presenting author.

Aims. Simulation-based education (SBE) is widespread in both undergraduate and postgraduate medical education, but less frequently in psychiatry. Despite this, the relatively small evidence base suggests high levels of participant satisfaction and educational benefit from SBE in psychiatry. Bringing SBE into the virtual environment presents another set of challenges we identified both through current medical education research and through our own experience. Our poster will demonstrate our current model of virtual simulation, the evidence base we used to develop this, and the feedback we have had from this new venture.

Methods. Background – As part of our undergraduate CAMHS teaching, where students spend 1 week within our service as part of a 3-week psychiatry clinical placement, we provide a single session of CAMHS SBE. This is delivered by 2 facilitators and a professional medical actor providing the role of the adolescent patient. Our virtual simulation teaching session has now been integrated into our teaching program. We have developed this session in line with current medical education research, and have presented this at the Annual Medical Education Conference and integrated feedback on our session into the current model.

Results. We have successfully adapted this session to be delivered remotely, and have received overwhelmingly positive feedback from our students, citing improvements in their confidence and learning after our session. Along with the challenges to engagement, participation, and patient involvement of remote teaching, we further adapted our session to accommodate increased numbers of students attending – a national trend. However, from current research and our experience, there are also benefits to both educators and students from virtual SBE.

Conclusion. Our results show that simulation can be used effectively in psychiatry through virtual media to expand student clinical experience and provide excellent educational opportunities. We present our model for virtual SBE and the evidence base we have used to develop this session, along with the feedback we have had from students, staff, and teams across the country.

Tailored CAMHS Educational Sessions for Primary Care Staff

Dr Anna Sherratt[1]* and Dr Michael Foster[2]

[1]Midlands Partnership NHS Foundation Trust, Telford, United Kingdom and [2]North Staffordshire Combined Healthcare NHS Trust, Stoke-on-Trent, United Kingdom
*Presenting author.

Aims. To develop and evaluate a tailored teaching session for local non-medical primary care staff on common CAMHS (Child and Adolescent Mental Health) conditions. It was hypothesised that quizzes administered before and after the educational session would evidence an improvement in clinician's knowledge of these clinical presentations.

Methods. Invitations were extended to all local PCNs to attend educational sessions held on four separate occasions in December 2022 and January 2023. Multiple choice quizzes were administered before and after a presentation on four common CAMHS conditions. The presentation and quizzes covered the presentation, diagnosis, and management of autism, eating disorders, depression and emotional dysregulation. Quizzes were scored out of a maximum 16 points with four questions per clinical condition. A paired T-test (following tests for normal variance) was performed using JASP software to compare the before and after scores.

Results. A total of 22 non-medical clinical staff attended the sessions. This included physician associates ($n = 1$), allied health professionals ($n = 5$), practice nurse ($n = 3$), care coordinator ($n = 3$), health care assistant ($n = 4$), social prescriber ($n = 1$), mental health practitioner ($n = 3$), advanced clinical practitioner ($n = 1$) and advanced nurse practitioner ($n = 1$). For the 22 pairs of quizzes, mean differences and 95% confidence intervals (CIs) were calculated between before-and-after scores. The mean difference between total score was 6.9 CI [6.1, 7.7] which was statistically significant ($p < 0.001$).

Conclusion. More than 31,000 additional staff have been recruited into healthcare roles at general practices across the country since 2019 to meet soaring demand for primary care services. Since the pandemic record numbers of children and adolescents are presenting with mental health difficulties, therefore, it is likely that primary care clinicians will encounter these