## IN PRACTICE

A38

### SIMULATING PAEDIATRIC MENTAL & PHYSICAL HEALTH EMERGENCIES: AN IMMERSIVE, MULTIDISCIPLINARY APPROACH TO INTEGRATING MENTAL HEALTH, PHYSICAL DETERIORATION, AND RESUSCITATION IN PAEDIATRIC MENTAL HEALTH CARE

**Emma Sang**[1], Polly Clarke[1], April Glory[1], Helen Jarvis[1], Meril Labarge[1]; [1]*Birmingham Women's And Children's NHS Foundation Trust, Birmingham, United Kingdom,*

**Correspondence:** emma.sang@nhs.net

10.54531/JCHN7900

**Introduction:** This initiative aims to address the critical training gap in paediatric mental health services by implementing simulation-based education (SBE), with a focus on equipping healthcare professionals to respond effectively to mental and physical health emergencies. Simulation-based education is well-established in acute and physical healthcare settings but remains underutilised in mental health services, particularly in paediatrics [1]. This gap persists despite evidence that simulation can enhance clinical confidence, interprofessional collaboration, and patient safety [2]. Within the new Simulation Strategy launched at BWCFT, the recognition of the need for both physical and mental health simulation support was paramount. The goal was also to begin growing expert faculty trained to deliver simulation-based education within our mental health setting.

**Methods:** A series of immersive simulations were conducted within our inpatient unit, combining physical and mental health scenarios such as respiratory/cardiac arrest following ligature incidents and severe hypoglycemic patients with eating disorders, alongside post-incident risk assessment. Sessions were delivered in-situ, with a flexible approach to environment and staff availability. Multidisciplinary team members, including those less confident in managing physical health emergencies, were actively encouraged to participate.

**Results:** The simulations facilitated engagement from a broad range of staff, enhancing competencies in airway management, A–E assessment, advanced life support (ALS), escalation protocols, and secondary assessment. Participant feedback indicated improved confidence in recognising and managing physical deterioration, strengthened interprofessional communication, and a greater sense of preparedness for real-life emergencies. Staff specifically reported "a better understanding of checking for vital signs when completing physical observations and interacting with an unwell young person." Another participant commented, "I really appreciated the training; it mimicked real scenarios that we encounter, particularly with decision-making under pressure," highlighting the realism and relevance of the scenarios. The initiative also fostered a culture of continuous learning and collaboration within each ward, as this was completed through a multi-agency approach. The need for regular simulations has now been identified, and the growth of our core expert faculty has greatly supported this delivery.

**Discussion:** Integrating simulation into paediatric mental health settings addresses a critical training gap, promoting holistic care that encompasses both mental and physical health emergencies. This approach not only enhances clinical skills but also strengthens team dynamics and patient safety. The success highlights the potential for simulation to drive cultural change and improve outcomes in mental health services. Future directions include expanding the range of scenarios and conducting longitudinal evaluations to assess the impact on clinical practice and patient care.

**Ethics Statement:** As the submitting author, I can confirm that all relevant ethical standards of research and dissemination have been met. Additionally, I can confirm that the necessary ethical approval has been obtained, where applicable

## REFERENCES

1. Attoe C, Hegarty J, McKenna H, et al. Managing medical emergencies in mental health settings using an interprofessional in-situ simulation training programme: A mixed methods evaluation study. Nurse Educ Today. 2017;59:103–109.
2. Hasson F, McKenna H, Keeney S, et al. Interprofessional simulation training for community mental health teams: Findings from a mixed methods study. J Interprof Care. 2018;32(3):346–353.