Complex Emotions in Pediatric Care: Unravelling the Challenges and Pathways for Staff

Dr Praveen Kumar[1,2], Dr Tharini Kumar[3] and Dr Jane Hosie[2]

[1]City Hospital, Aberdeen, United Kingdom; [2]New Craig's Psychiatric Hospital, Inverness, United Kingdom and [3]Louth Hospital, Dublin, Ireland

doi: 10.1192/bjo.2025.10496

Aims: The aim of this study was to explore the experiences and challenges faced by staff in pediatric wards when managing young patients with complex emotional and behavioural difficulties. It sought to understand the specific nature of these challenges, their impact on healthcare providers, and to identify potential strategies for improvement, particularly focusing on the staff's interaction with Child and Adolescent Mental Health Services (CAMHS).
Methods: The study involved a qualitative survey of 16 healthcare professionals, including 12 nurses, 3 administrative or support staff, and 1 doctor, working in a Paediatric ward setting. Open-ended questions were used to gather detailed insights into the staff's experiences. The responses were then segmented and analysed, focusing on the nature of the challenges faced, the impact on staff, suggestions for improvements, and the dynamics of their relationship with CAMHS.
Results: The survey revealed a multifaceted set of challenges. Staff reported a significant knowledge gap in managing patients with complex emotional issues, often leading to feelings of inadequacy and stress. These challenges were not just clinical but also emotional, affecting staff morale and mental health. The responses underscored the need for better support, specialized training, and enhanced resources. A recurring theme was the pivotal role of CAMHS, with staff expressing a need for more effective collaboration and communication. The data also hinted at nuanced challenges, such as dealing with manipulative behaviours, difficulty in patient–family interactions, and the emotional toll of such encounters. These findings highlight the complexity of emotional and behavioural management in pediatric care, extending beyond patient interaction to encompass broader aspects of the healthcare environment.
Conclusion: The study confirmed that Paediatric ward staff face considerable challenges in managing young patients with complex emotional difficulties. These challenges go beyond clinical management, significantly impacting the staff's emotional well-being. The findings point to an urgent need for targeted training and support initiatives, along with stronger collaborative ties with CAMHS. Implementing such measures could lead to improved patient care and staff satisfaction. Additionally, regular debriefing sessions and feedback mechanisms are recommended to continually adapt and optimize care strategies in Paediatric wards, ensuring a resilient and empathetic healthcare environment.

Abstracts were reviewed by the RCPsych Academic Faculty rather than by the standard *BJPsych Open* peer review process and should not be quoted as peer-reviewed by *BJPsych Open* in any subsequent publication.

Enhancing Mental Health Support for Unaccompanied Asylum- Seeking Young People (UASYP): A Collaborative Pathway in Aberdeen

Dr Praveen Kumar and Mrs Claire Hardie

City Hospital, Aberdeen, United Kingdom

doi: 10.1192/bjo.2025.10497

Aims: This initiative aimed to establish a structured and collaborative pathway to address the mental health and psychosocial needs of Unaccompanied Asylum-Seeking Young People (UASYP) in Aberdeen. The project sought to provide trauma-informed, culturally sensitive interventions while fostering partnerships with local and national agencies to ensure comprehensive support. In 2023, the UK received 3,412 applications from Unaccompanied Asylum-Seeking Children (UASC), with Scotland accommodating a proportionate share through the National Transfer Scheme.
Methods: The pathway was developed within the Child and Adolescent Mental Health Services (CAMHS) at City Links Hospital, Aberdeen, inspired by Professor Renos Papadopoulos' frameworks on refugee trauma and the "Enhancing Vulnerable Asylum Seekers' Protection" handbook. Referrals were limited to UASYP with looked-after status, ensuring targeted support for the most vulnerable. Initial network meetings involved key stakeholders, including social workers, guardians, and lawyers, to assess the young person's needs and determine appropriate interventions. Consent processes were designed to facilitate transparent communication between stakeholders and ensure ethical information-sharing. Collaborations with agencies like Aberlour, the Anchor Unit, and Freedom from Torture were integral. Data from 13 cases were analyzed to evaluate demographic trends, service engagement, and outcomes.
Results: The cohort had an average age of 17.2 years, representing countries including Afghanistan, Iran, Eritrea, and Sudan. Language barriers were notable, with Pashto, Tigrinya, and Kurdish Sorani as primary languages. Only 5% of referrals progressed to CAMHS, underscoring the selective nature of the pathway. Most referrals resulted in external partnerships, particularly with organizations like Freedom from Torture, or redirection to community resources. Guardians, managed through Aberlour in collaboration with the Anchor Unit, played a pivotal role as stable third parties, addressing the power dynamics inherent in social worker relationships.
Conclusion: This pathway highlights the value of integrating trauma-informed care with a networked, multidisciplinary approach to support UASYP. By leveraging existing frameworks and fostering agency partnerships, the initiative demonstrated the feasibility of providing culturally sensitive care tailored to the unique needs of asylum-seeking young people. Given the increasing number of UASC arrivals in the UK, further development of Tier 2 group interventions and ongoing evaluation of pathway outcomes are recommended to expand the model's impact.

Abstracts were reviewed by the RCPsych Academic Faculty rather than by the standard *BJPsych Open* peer review process and should not be quoted as peer-reviewed by *BJPsych Open* in any subsequent publication.

The Smoke-Free Law's Toll on Intensive Psychiatric Care Unit (IPCU) Staff

Dr Praveen Kumar[1], Dr Ananya Santosh[2], Dr Caio Bezzerraculas[2] and Dr Nikki Thomson[2]

[1]City Hospital, Aberdeen, United Kingdom and [2]New Craig's Psychiatric Hospital, Inverness, United Kingdom

doi: 10.1192/bjo.2025.10498

Aims: This survey aimed to evaluate the impact of the Smoke-Free Perimeter Law on the staff working in the IPCU at New Craig's Psychiatric Hospital. It focused on understanding how the law