an increase in knowledge, skills and confidence in trainees transitioning from CPT to HT, both in terms of factors specific to managing CYP's care and in relation to broader human factor skills.

Recognizing Early Deterioration in Elderly Care Home Setting - a Snapshot

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Aims. Our aim is to measure the baseline physical and mental health early deterioration recognition of carers in the care home setting in Harrogate, North Yorkshire. This is part of a larger undergoing quality improvement project that looks at improving elderly care in care homes in the region by implementing a training package.
Methods. The approach was to contact local authorities, in this case, the NHS clinical commissioning group North Yorkshire to identify a struggling care home. We then engaged the care home and designated a leader to coordinate the project. We collected common themes by using focus groups with both carers and our professionals which led to the creation of a 16-item questionnaire covering deterioration literacy. Finally, we electronically and anonymously surveyed the carers (December 2021) and analysed the data via Google Forms.
Results. We had 22 responses out of 30 possible. As an overview, 100% felt confident in recognizing deterioration, however, 31.8% don't feel confident in managing deterioration. 90.9% need tools to aid recognition, from which 45.5% find tools confusing. Only 50% feel confident to appropriately escalate the incident, from which 36.4% did not know when or to whom to escalate and 13.6% were not sure if escalation was needed but will refer to secondary care regardless. 27.3% think their escalation process needs improvement. When it comes to deterioration themes, 4.6% don't feel confident in identifying confusion, 13.6% feel their knowledge on confusion could be improved and 9.1% don't know how to identify, manage, or escalate confusion. 22.7% don't feel confident in identifying mobility decline and 9.1% don't know how to manage this accordingly. 9.1% feel like their knowledge of skin changes needs improvement. 22.7% feel that their confidence in identifying toilet habits could be improved and 4.5% don't know how to manage or escalate these changes. In terms of carers' mental health, 50% and 13.6% have mild and moderate anxiety, respectively.
Conclusion. Deterioration recognition in the elderly is currently a hot topic. Recent studies highlight the need to improve deterioration management to minimize inappropriate referrals and admissions and unnecessary infection exposure of a vulnerable elderly individual. Our results show that besides improving the theoretical knowledge we also must think about a clear escalation process, an easy-to-read deterioration tool, and managing carers' anxiety as part of the training package.

Mental Health Literacy in Foundation Doctors - a Survey in the York and Humber Area

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Aims. We aimed to measure the baseline mental health literacy in Foundation Doctors in the Yorkshire and Humber area, identify any gaps in knowledge with the purpose of addressing these within the new foundation psychiatry teaching program, developed by North Yorkshire Health Education England.
Methods. In January 2021, a questionnaire comprising of O'Connor's Mental Health Literacy Scale was sent electronically to all Foundation Doctors in the York and Humber area, that were in a placement at that time. The O'Connor's Mental Health Literacy Scale (MHLS) has been used since its publication in 2015 and is a 35 item, univariate scale that demonstrated good internal and test-retest reliability. It covers the following attributes: a) ability to identify disorders, b) knowledge about seeking information, risk factors and etiology, self-treatment, resources and support available, c) attitudes about mental disorders and seeking professional help. The anonymized data were collected and analysed in Microsoft Excel.
Results. In total, we received 49 responses to the questionnaire. Overall, 85% of respondents demonstrated good mental health literacy. Breaking this down further, 91% demonstrated knowledge of core psychiatric diagnostic criteria, 68.4% were literate in etiology and risk factors, 92% and respectively 95.9% understand what resources for treatment and professional help are available. Importantly when looking at attitudes about mental disorders overall 17% of respondents showed a degree of stigma and barriers in seeking professional help. For example, 2% strongly agreed that mental health conditions are not real illnesses, 34.7% were unsure whether people with mental illness are dangerous, 40.9% neither agreed nor disagreed they would move next door with someone with a mental illness and 14.3% would not be willing to have someone with a mental illness marrying into the family. When looking at barriers to seeking help, 12% answered they would not tell someone if they had a mental health problem, with 16.3% unsure whether they would tell someone if they had a mental health problem.
Conclusion. Overall, our survey demonstrated good mental health literacy in our cohort, however, there are areas of improvement, the main ones being etiology, risk factors, and attitudes towards mental health. It is important to recognize these deficits, as they have been linked with poor health outcomes and barriers in seeking and providing care. Moving forward, standardization of teaching programs and anti-stigma training could be an evidence-based approach to tackling these issues.

Research

Differences in Remote Mental Healthcare: Minority Ethnic Service User Experiences and Perceptions During COVID-19

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