Conclusion There was reasonable awareness with trainers regarding IMG difficulties however there was a lack of direction as to how to approach these difficulties. A structured support system is needed to translate this awareness into action. This support system should include supervisor upskilling in the form of IMG supervision courses which was a need identified by the respondents in this study.

REFERENCES

1062 MEASURES TO IMPROVE MANAGEMENT OF YOUNG PEOPLE WITH ANOREXIA NERVOSA

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Aims Anorexia Nervosa (AN) is a mental health disorder in which one restricts their caloric intake to reduce their weight, leading to serious health implications. It has become increasingly prevalent particularly during the COVID-19 pandemic.

The eating disorders (ED) service has seen an increase in the number of young people being referred (figure 1). This has resulted in protracted waiting times from receipt of referral to formal assessment by the team and an associated strain on resources available to manage this group. I set out to explore what this has meant for patient care and whether there are ways these patients could be managed more efficiently whilst ensuring the best outcome.

Methods Measures existed within the ED service to support patients prior to assessment to reduce mental and physical deterioration. The effects and success of these haven’t been evaluated, nor are the interventions particularly centred around young people developing ED during the pandemic.

In the first instance I retrospectively reviewed the notes of 60 patients aged 10-18 diagnosed with AN between December 2019 and December 2021. I examined whether Key Performance Indicators (KPI) were breached by looking at waiting time from referral to assessment. In addition, weight for height (W4H) at referral was compared to W4H at assessment and reasons for developing AN were also reviewed. I suggested and implemented improvement measures to mitigate deterioration whilst awaiting an assessment. These measures included:

- A triage pack containing a meal plan and signposting in case of deterioration (e.g., AN charity, crisis team contact)
- Introduction of a GP letter featuring advice for monitoring and safety net advice
- Paediatric clinic appointment for those thought to need physical review prior to assessment. This clinic is run by a liaison Paediatrician working as part of the ED team

I then carried out the same analysis on patients after the measures were put in place. Comparisons have been made to ascertain whether patients referred between January and March 2022 show less physical and mental deterioration