Background and aims Medical school is a stressful time for many students, who report higher rates of anxiety and depression than the general population. Mentorship can provide increased support to medical students, and improve their academic performance and overall well-being.

We developed and evaluated a novel mentorship programme for third year medical students undertaking an integrated BSc in paediatrics and child health.

Methods The integrated BSc is the first paediatrics-specific BSc in the UK. Mentors were paediatric trainees selected by competitive application; mentors received training prior to starting and ongoing support over the year. Each mentor was matched to one or two mentees and met with them at least two times. Participants were e-mailed an anonymised questionnaire at the end of the programme; responses were analysed thematically.

Results Sixteen medical students and 11 paediatric trainees (mentors) participated in the programme. Eighty six percent of mentees would recommend the programme to other students with 43% reporting that it was 'very helpful' and 43% 'a bit helpful.' Thematic analysis of free text responses identified four major benefits: personal support, feedback on assessments, guidance on paediatrics as a career, and advice on life issues outside medicine.

100% of the mentors would recommend the programme to their colleagues. 88% thought it had 'definitely been helpful' for their future career in paediatrics. They identified four main benefits: Skills and experience in mentorship, practice providing support to junior colleagues "very helpful for future roles such as becoming an educational or clinical supervisor", a greater understanding of the undergraduate experience, and approaching paediatrics through fresh eyes. Mentors found it enjoyable and rewarding: "It gave me a lot of satisfaction." Challenges included finding the time to meet students and "worrying that the students did find it useful."

Conclusions Our novel mentorship programme utilised current paediatric trainees to enthuse and mentor potential future paediatricians. There were bilateral benefits to both mentors and mentees. We anticipated that students would gain from the experience, but it was also highly valuable to the paediatric trainees who developed transferable skills in mentorship and supervision, both essential but difficult to achieve competencies in the paediatric training curriculum.
Parents about safeguarding concerns and understanding referral and legal processes.

**G182(P)**  
**SURVEY TO INVESTIGATE NEONATAL KNOWLEDGE AND EXPERIENCE AMONGST NEWLY QUALIFIED GENERAL PRACTITIONERS**  
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10.1136/archdischild-2015-308599.176

**Aim** To investigate level of neonatal knowledge and experience amongst newly qualified General Practitioners (GPs) who completed the vocational training scheme (VTS).

**Method** An online survey distributed via email to GPs who qualified from two GP Deaneries since 2009. The survey consisted of 24 questions, mainly multiple choice and self-rating scales, and was completed between May and June 2014.

**Results** There were 38 respondents. Of these, 58% had completed a paediatric placement during their VTS. Placement length varied from 3 months (1 responder), 4 months (11 responders) to 6 months (10 responders). Forty-five percent (17/38) gained neonatal experience, comprising of neonatal life support courses, neonatal ward rounds, attending high risk deliveries and completing baby checks.

Eighty percent of responders were less than 2 years post VTS qualification, with a median age of 31–35 years. Despite completing their VTS and 60% receiving formal teaching on newborn examination, 25% of responders did not feel confident in completing a 6–8 week newborn examination. In 50% of practices where our study population are currently based a dedicated health professional undertakes the baby checks.

The GPs portrayed good knowledge of common neonatal problems such as gastro-oesophageal reflux disease, and on self-rating, the majority were confident of their ability to diagnose mongolian blue spots, port wine stain and a significant heart murmur. However, over 35% displayed definite uncertainty in diagnosing naevus flammeus and erythema toxicum. Only 12% felt confident in recognising cow’s milk protein intolerance and 36% were unaware of when to diagnose prolonged jaundice.

The main information source used by the newly qualified GPs was GP notebook, with 72% identifying this source and less than 30% consulting formal guidelines.

**Conclusion** A significant number of GPs qualify from the VTS without completing a paediatric placement and even fewer are gaining neonatal experience. Post-qualification, there continues to be limited exposure to infants as dedicated health professionals complete their routine care. It is essential to recognise this lack of exposure and make appropriate changes to GP training to provide basic, structured neonatal experience, thereby ensuring confidence in neonatal assessment and management amongst front-line medical practitioners.