G488(P) CHILD PROTECTION TRAINING: MEETING THE UNMET NEEDS

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Background Suboptimal quality of child protection medical examination notes and reports, not only exposes the child, siblings (and at times Doctor) to an increased risk but also jeopardises the decision-making process of the court.

Aim To evaluate the effectiveness of hands-on training on child protection notes taking and report writing in a workshop setting.

Method A cross-sectional study (survey) was conducted amongst the participants to the workshop on child protection notes taking and report writing in the annual scientific meeting of British Association of Community Child Health (BACCH) in 2019.

Results A total of thirty-eight delegates attended the workshop. Twenty-five of them responded to the survey.

Participants: Forty-eight per cent were consultants, forty per cent were paediatric trainees, and twelve per cent were SAS doctors.

Previous Child protection experience: Forty-four per cent had an experience of fewer than 5 years, twenty-eight per cent between 5 to 10 years and twenty-eight per cent over 10 years.

Improvement Reported: Over seventy per cent of the participants reported an improved understanding of Child Protection processes, related laws, legal jargons and role of the professional and expert witnesses.

Over eighty per cent stated feeling more confident in dealing with Child protection queries after attending the workshop and recommended attending the workshop to their fellow colleagues.

Over ninety per cent delegates testified an improvement in their ability to record notes and write good quality Child Protection medical report.

Conclusion There is a pressing need to address the quality of Child protection training across the country in-line with the RCPCH recommendations "Safeguarding children and young people: roles and competencies for paediatricians", August 2019.

The authors also recommends incorporating notes taking and report writing skills in the annual appraisal of the consultants undertaking Child Protection work.

G489(P) A YEAR IN THE LIFE OF THE PAEDIATRIC SEXUAL ASSAULT SERVICE – PROVIDING A SERVICE FOR THE LOCAL POPULATION

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Background A medical examination may be considered in the Paediatric Sexual Assault Service when there is an allegation or suspicion of sexual abuse in a child or young person.

It is important to ensure a universally equitable service for all young people, including those with disabilities. Services delivering this must be high quality, readily accessible, open access services for all regardless of gender or sexual orientation.

Our local service has been operating for more than a year and aims to provide this high quality service.

Aims The aim of this project was to evaluate the data over a year to look at the age, sex/gender, ethnicity and address of each of the young people to ensure that the service is open to all, and to provide data to improve awareness and access to the service.

Methods We identified every child and young person who was examined in the service and collated data of their sex, ethnicity, age and any identified disabilities. Using post codes we mapped the use of the service across the region producing a pictorial representation of the use of the service.

Results There were 410 children and young people seen. 43 (10%) Male, 364 (89%) Female, 3 (1%) Transgender. The largest number of examinations were carried out for older children >13 although there was a spread of examinations across all ages 0–18.

The largest ethnic group was White British (261) followed by White-Other (29) and Black or British Black African (10).

53 (12%) had a physical or learning disability.

A map of the postcodes showed a spread across the region, with a predictable peak in each of the urban areas.

Conclusion The service provided care to children and young people of all ages and gender, across a wide spread of ethnicities and across the region. Females, teenagers and people from White British backgrounds made up the largest groups. There is still work to be done to reduce the stigma attached to an examination, to educate professionals about the holistic care provided and to ultimately improve access to the service for all.

G490(P) ABSTRACT WITHDRAWN

G491(P) INCREASING AWARENESS OF MODERN SLAVERY AMONG HEALTHCARE PROFESSIONALS

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Aims Modern slavery encompasses slavery, servitude, forced and compulsory labour and human trafficking. In 2017, there were 6,837 potential victims in the UK; around 31% (2,121) were children. From March 2017 to 2018, police in England and Wales recorded 3,337 modern slavery offences, a 49% increase compared to the previous year. One in five victims encountered healthcare services during the time they were being trafficked, yet many healthcare professionals know little about modern slavery. My research aims to identify the extent of these gaps in the training of healthcare professionals.

Methods A literature review was conducted using the search terms, 'modern slavery' OR 'human trafficking' AND 'healthcare'.

Results 303 papers were identified in Pubmed, 36 in Ovid. The search was then refined with: 'humans', 'full text' and 'English language', which identified 240 papers. 15 papers were selected with relevant title and abstract, focusing on the healthcare professional's role in identifying victims of modern slavery. A cross-sectional study found that although 91% (n=697) of healthcare professionals agreed that they have a responsibility to respond to suspected cases of human