1950s and has been widely adopted in education systems. Although titled 'Forest schools' it is the philosophy which is more important than the forest environment per se. It is based on regular exposure to a natural environment which offers children the opportunity to take appropriate risks and gain resilience, confidence and independence as creative learners. Improved outcomes include:

- Increased self-esteem and self-confidence
- Improved social skills
- The development of language and communication skills
- Improved physical motor skills
- Improved motivation and concentration
- Increased knowledge and understanding of the environment

Conclusions The benefits of the natural environment is little surprise considering the human race coexisted with nature for 99.99% of its evolution. The Biophilia Hypothesis recognises the biological attraction of nature to human beings and promotes the benefits of intimate contact with nature. Preliminary results suggest that contact with nature should be encouraged in health and education environments.

G174(P) ELECTRIC SCOOTERS, THEIR SAFETY AND THE LAW AROUND THEIR USE IN THE UK

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Aims To review the popularity of electric (E) scooters, their safety and the law around their use in the UK.

Methods A review of the literature.

Results E-scooters are rising in popularity in both children and adults and have the potential to provide an attractive solution to common urban mobility problems - they are fun to use, cheap to run, improve mobility around cities, reduce congestion levels and do not use traditional fuels which have severe environmental implications. They are fitted with rechargeable batteries and have speeds ranging from 9 mph to 15 mph.

Sharing schemes are popular and available in over 100 cities in Europe and US, users collecting them from various points around a city, renting them using an app and docking them when no longer required. In 2018, 84 million trips were taken on shared micromobility in the US - more than double the number of trips in 2017.

However in the UK the picture is very different. E-scooters cannot be legally ridden on the road or in cycle lanes and the Highway Act 1835 (originally written for horses and carts!) also prohibits their use on a pavement. They may only be legally ridden on private land with the permission of the landowner. This is due to their classification as 'powered transporters' or 'personal light electric vehicles' by Department for Transport (DfT) making them subject to motor vehicle laws, including the need for insurance, license, tax, MOT, visible rear red lights and number plates.

The design of E-scooters makes them portable, light and efficient but also makes them unsafe. They have two small tyres their user being inches from the road surface, resulting in a significant risk of traumatic injury, particularly when going over drain covers or potholes. Few wear helmets when riding them and there have been numerous injuries and deaths reported in various countries.

Conclusion With the shift to become more environmentally aware a 'future of mobility review' is considering how new types of vehicles, E-scooters, will change transport. It will also explore whether current laws should be changed to facilitate innovation while prioritising safety. Children need to be aware of the current laws with regard to their use and should be encouraged to wear helmets.

Children's cancer and leukaemia group (CCLG) and paediatric special interest group: british society of haematology

Plenary

P05 WHAT ARE THE SIGNS AND SYMPTOMS OF BONE TUMOURS IN CHILDHOOD? ARE THE GREAT BRITISH PUBLIC AWARE OF THEM?

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Aims Bone tumours in children/young people are often associated with significant diagnostic delay, increasing the risk of amputation. The total diagnostic interval is a sum total of the patient and system interval. The HeadSmart campaign showed a national awareness campaign based on high quality evidenced based guidance halved time to diagnosis. We conducted a systematic review and meta-analysis to identify the core signs/symptoms and a public survey to understand public awareness of these symptoms.

Methods Medline, Pubmed and Embase databases were searched from January 2005 - August 2015. Key words included 'bone tumour(s)', 'bone neoplasm(s)', 'diagnosis', 'signs(s)', 'symptom(s)', 'presentation(s)'. All papers discussing bone tumour presentation were included. Pooled proportions (%) of children with each sign/symptom at diagnosis were estimated. A face-to-face opinion survey (n=1000; 475 males) was conducted by Ipsos MORI. Questions included perception of cancer risk, confidence in recognising signs/symptoms and urgency of seeking medical advice.

Results The search strategy identified 15477 papers. 713 papers were reviewed in full; 11 met the inclusion criteria, describing the symptoms/signs at diagnosis in 1246 children. 29 symptoms/signs were recorded but only those that occurred in 2% or more of patients are reported. These were pain (76%), swelling (21%), fever (4%), history of trauma (3%), functional limitation (3%), palpable mass (3%), pain and swelling (2%), volume increase (2%), limp (2%) and pathological fracture (2%). Public awareness of the top 4 presenting symptoms of bone tumours were low. 23% of the public identified recurrent or persistent bone pain as a symptom of cancer; 27% identified swelling of bone or joint; 21% identified fever and 14% thought a slow recovery after injury or trauma could be a sign of cancer.

Conclusions This is the first systematic review on paediatric bone tumours to our knowledge. It provides strong evidence of the common presentations and will form the basis of a new RCPCH endorsed clinical guideline on the assessment/investigation of suspected bone tumours. The results of the