Doctors in training should have protected time to attend high quality, relevant education and this should be audited. Before 2018, Regional Level 3 Paediatric teaching was delivered on a mainly ad hoc basis, with deficiencies reported in addressing curriculum competencies by recent GMC and NES (NHS Education for Scotland) surveys.

Aim To assess the success of a new regional Level 3 teaching programme in providing accessible, relevant teaching to trainees.

Methods A new committee of senior trainee volunteers, with a Consultant Supervisor, was set up. Themes from the RCPCH Progress Curriculum were identified, to be delivered monthly on a rolling annual basis. Focus groups of committee members organised and led each session. Attendance was taken, and attendance certificates were awarded after feedback form submission. After one year of implementation, trainees completed an online survey assessing their opinion of the new teaching programme. Members of the teaching committee filled in an additional survey relating to their role.

Results The average number of trainees attending per session was 19. Overall, attendance was 51% ST6, 29% ST7 and 20% ST8. Percentage of trainees present per session from total trainees at site (over 6 sites) ranged from 23% to 62% (Median 45%). 83% provided feedback. Each session score was above 4 (on a scale of 1–5) with a range of 4.06 to 4.92. 95% of trainees found the sessions accessible, and 76% enjoyed the face-to-face nature. 90% agreed or strongly agreed that the teaching was relevant to their stage of training.

56% of committee members were ST8, 33% ST7, and 11% ST6. 100% reported that they had a clear idea of session focus and 86% that it was easy to record attendance and feedback. Committee members felt well supported in 100% of cases. Formal feedback was provided to speakers in 100% of cases.

Conclusions The programme is well received by trainees, who find sessions accessible and useful. Volunteers find organising straightforward and well supported. Attendance, however, varies by site and grade. Our next steps are to evaluate future NES and GMC surveys, and facilitate improved attendance.

G209(P) WHAT IMPACTS PAEDIATRIC TRAINEES' PERCEPTIONS OF BLOGS?

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Aims To explore what affects paediatric trainees' views about blogs as learning tools.

Methods Trainees volunteered to complete an online survey and/or participate in a 1:1 interview, all responses were pseudo-anonymised. A modified constructive grounded theory approach was used to analyse the results.

Results Twenty-three trainees participated, table 1:

Blog experiences can be categorized as being determined by: self, others and organisational factors.

Self: Trainees' blog use was found to be on a spectrum ranging between: non-user, casual user, active follower and sharer. No participants identified as blog creators, which could be an additional subgroup. Trainees who reported being non-

Abstract G209(P) Table 1

Trainee Grade	Survey	Interview	Both	Total
ST1-3	8	1		9
ST4-5	5	2	1	8
ST6-8	4	1	1	6
Total	17	4	2	23

users were sceptical about the 'accuracy of the writing on blogs as the information may be unchecked especially if unreferenced.' ST1-3. Whereas, for others the gains from reader-ship outweighed doubts, although tension between trusting blogs fully was pervasive throughout all interviews. Benefits relating to clinical practice included: improved communication skills, affirming practice and knowledge acquisition. Other advantages included: perspective and connectivity.

Others' Influence: Blog access was influenced by direct recommendations, which were mostly made by registrars and/or consultants. These nudges also occurred from institutions: 'by having the stamp of approval [Organisation] [this] was something ... of an endorsement' Blake. A blog writer's reputation could also influence trainees in deciding whether to engage; for example, when a blog is written 'by a Dr whom I know is one of the leading people... I feel quite safe....that it's pretty reputable' Taylor.

Organisational Factors: This can relate to stylistic features such as ease of access which was the most important influence on user experience. Equally support at an organisational level also 'gives it that little bit of extra sway... [for trainees] to start engaging with it' Blake.

Conclusions This project illustrates there are a myriad of inter-linking factors that influence trainees' perceptions and experience of blogs. An understanding of this complexity may aid future development and design of blogs and online educational content.

Association of paediatric emergency medicine

G210 ADDRESSING PAEDIATRIC OBESITY IN THE EMERGENCY DEPARTMENT: CLINICIANS CURRENT ATTITUDES AND THE BARRIERS THEY FACE – A PERUKI STUDY

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Background Rates of childhood obesity are increasing. Traditional strategies including school nurses are overwhelmed. Strategies to discuss weight and impact on health, including 'Make every contact count', are challenging in the Emergency Department (ED), in part due to rising attendances and an increasingly strained service. Other 'Quick-win' interventions (e.g. smoking cessation) have been attempted in ED. Ascertaining the current attitudes of clinicians towards addressing obesity in the ED and the barriers they face can support development of long term solutions to obesity management in children.