Objectives To investigate the impact of the COVID-19 pandemic on our paediatric sickle cell service, including acute and elective activity, clinical performance and patient experience.

Methods Data on acute and elective admissions during the ‘COVID-19 pandemic year’ (1 March 2020–28 February 2021) were extracted from our SCD database and Electronic Medical Records and compared with data from the preceding 2-year period. An online survey on patient experience during the pandemic was conducted during December 2020.

Results During the COVID-19 pandemic year, we had 31 paediatric sickle cell inpatient admissions, which reflects a 47% reduction from the previous 2-year average (59). Hospital attendances decreased by 27%, and the mean length of stay (LOS) was shortened by 33% to 2.1±0.67 days. We also observed an improvement in our emergency management of vaso-occlusive episodes, with a 51% reduction in our mean ‘door-to-analgesia’ times (table 1). We had one COVID-positive case that did not require hospitalisation and no cases of delayed presentations. The number of outpatient clinic appointments was similar to the previous years, however the non-attendance rates reduced by 58%, possibly due to the selective provision of telephone consultations. Collaborating with our Specialist Haemoglobinopathy Team, we set up an outreach Transcranial Doppler (TCD) clinic locally, aiming to minimise patient travel, and the continuation of the dedicated phlebotomy service and the online forum sessions.

Conclusions Our results show that during the COVID-19 pandemic we have maintained safe and uninterrupted paediatric sickle cell services and improved our clinical performance in delivering timely emergency analgesia for acute painful sickle cell episodes. The reductions in hospital attendances, admissions and LOS are likely to have a multifactorial aetiology related to the pandemic and the associated lockdowns, including reduction of exposure to sickle crisis triggers and reluctance to attend hospital. Interventions such as online patient forums, telephone consultations and local outreach TCD clinics had a strongly positive impact and we aim to extend them to the next stages of this pandemic, and beyond.

Abstracts

British Association of General Paediatrics

865 - AN APPROACH TO IMPROVE RECRUITMENT INTO PAEDIATRICS

Christopher Dadnam, Judith VanDerVoort, Farah Dadnam. NHs UK; Cardiff and Vale healthboard; Cardiff and Vale Healthboard

Background RCPCH workforce consensus 2019 recognised that child health is suffering staffing issues across the United Kingdom. This has a direct affect on the quality and safety of paediatric care provided, trainee morale and overall departmental teamwork. Recruiting more paediatricians, including trainees, was one of 5 key RCPCH recommendations to improve workforce problems.

Objectives

- Review any current resources available for foundation trainees to gain exposure into Paediatrics in Wales.
- Develop a designated liaison post that will facilitate foundation trainee exposure and help guide those that are interested in paediatrics.

Methods

An initial review with foundation trainee groups and paediatric consultants was conducted to establish any current systems in place to help facilitate exposure into paediatrics and child health in Wales. Following this review, we would develop the role of a Paediatric Foundation Liaison Officer that focuses on 4 areas:

- Advertising and designing taster day/s programmes.
- Providing advice: out-of-programme jobs including F3, clinical fellow and academic posts, along with application and interview preparation for paediatrics.
- Developing foundation specific paediatric teaching programmes.
- Facilitating quality improvement (QI) and Audit interests.

Results

The initial review showed that foundation trainees in Wales had no direct access to paediatric experience, therefore the development of a paediatric foundation liaison officer was key to encouraging and facilitating exposure of children’s services.

Since November 2019, 16 foundation trainees have applied for the paediatric taster day programme with positive feedback. All trainees felt reassured about applying into paediatrics and half underwent QI projects within paediatrics, helping their career development. Foundation teaching has improved, with focus on: emergency management, trauma, non-accidental injuries, understanding paediatric training and advice on how to apply to a paediatric training programme.

Conclusions This initiative has demonstrated that liaison representatives are vital in highlighting and developing foundation interest in paediatrics. Having a tailored and organised programme for foundation doctors provides reassurance and encouragement, which will ultimately improve recruitment into child health services. Further development into a dedicated and enthusiastic paediatric liaison team will facilitate recruitment into paediatrics.

Abstract 863 Table 1 Yearly paediatric sickle cell activity 2018–2021

<table>
<thead>
<tr>
<th></th>
<th>2020/21</th>
<th>2019/20</th>
<th>2018/19</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital admissions</td>
<td>31</td>
<td>60</td>
<td>58</td>
</tr>
<tr>
<td>Hospital attendances</td>
<td>66</td>
<td>94</td>
<td>87</td>
</tr>
<tr>
<td>Mean LOS, days</td>
<td>2.1</td>
<td>3.4</td>
<td>2.9</td>
</tr>
<tr>
<td>Mean time to first opioid analgesia (95%)</td>
<td>25.6 (16.5, 45.8 (30.2, 59.1 (40.1, CI, minutes</td>
<td>34.7 (61.4)</td>
<td>77.5 (40.1,</td>
</tr>
<tr>
<td>Outpatient clinic appointments</td>
<td>183</td>
<td>137</td>
<td>191</td>
</tr>
<tr>
<td>% non-attendance</td>
<td>9%</td>
<td>22%</td>
<td>17%</td>
</tr>
<tr>
<td>% telephone appointments</td>
<td>44%</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>