Abstract 1125 Table 1 Demographics of NEC vs SIP

n (%)	NEC (50)	SIP (31)	P value
* IQR			
Gestational age *	26.77 (25.14–28.21)	26.19 (24.42–27.28)	0.16
Birth weight *	912.7 (735–1065)	879.68 (660–1015)	0.45
Male	34/50 (67%)	17/31 (53%)	0.22
Multiple	15/50 (29%)	11/31 (32%)	0.77
Age at onset of symptoms (days)	24 (15.75–38)	6.4 (4–7)	<0.0001
CGA at onset of symptoms *	30.72 (28.85–32.82)	26.42 (25.14–28.14)	<0.0001
Age at first feeds (days) *	3.46 (2–4.25)	3.89 (2–4)	0.31
First milk type (mEBM)	37/50 (74%)	24/31 (77%)	0.73
Blood transfusion	7/50 (14%)	22/31 (71%)	<0.0001
PDA (medical treatment)	20/50 (40%)	14/31 (45%)	0.65

Abstract 1125 Table 2 Outcomes of NEC vs SIP

n (%)	NEC (50)	SIP (31)	P value
Mortality	19/50 (38%)	6/31 (19%)	0.08
ROP treatment	7/31 (14%)	7/24 (29%)	0.16
ROP treatment/death	26/50 (52%)	13/31 (42%)	0.38
BPD (home oxygen)	14/31 (45%)	15/24 (63%)	0.11
BPD/death	33/50 (66%)	21/30* (73%)	0.49

* One patient lost to follow up as transferred at 32w CGA

differentiate between NEC and SIP, both to identify potentially causative associations, and to better predict complications and outcomes.

Association of Paediatric Emergency Medicine

1126 IMPROVING PSYCHOSOCIAL CARE OF YOUNG PEOPLE IN ED POST COVID-19

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Background At the start of the COVID-19 pandemic, the care of 16 and 17 year old patients in the Emergency Department (ED) at St Thomas' Hospital was moved from adult ED to the adjacent paediatric ED in order to reduce the pressure on the adult department. Paediatric emergency clinical staff work with an embedded safeguarding team, hold a weekly psychosocial review meeting and so comprehensive adolescent assessment may be improved in paediatric ED.

Objectives The objective of this study was to compare the psychosocial care of 16 and 17 year old patients in the adult and paediatric emergency departments.

Methods

Setting The Emergency Department at Guys and St Thomas' NHS Foundation Trust is a large (>140,000 attendances/

annum) inner city department. The adult and children's (part of Evelina London Children's Hospital) departments are physically adjacent. There is separate Paediatric Emergency Medicine staffing.

Methods Attendances of 16 and 17 year old patients were retrospectively observed. ED notes from 100 random patients from both September 2019 and September 2020 were reviewed.

September 2019 was before the COVID-19 pandemic, and September 2020 after the first wave of COVID-19 in the UK. In September 2020 the majority of schools were open and despite no national lockdown there were still significant restraints on socialising/recreational activity in London.

Expected standard of care was that a HEADSS (psychosocial history) assessment was completed for each attendance.

Presenting complaint, completion of HEADSS questionnaires and need for referral to psychosocial services were assessed. Quality of HEADSS questionnaire was also scored using a grading system agreed amongst the team.

Results Primary mental health presentations had increased from 3% of total presentations in 2019 to 6% in 2020. Alcohol/recreational drug presentations increased from 1% to 4%.

HEADSS questionnaire completion increased from 20% to 53% between 2019 & 2020. Comprehensive completion increased from 7% to 40%.

Subsequent referral to psychosocial services (CAMHS (Child and Adolescent Mental Health Service), social care or liaison youth worker service) increased from 8% to 18% of all 16 and 17 year old presentations between the two periods.

Individual case reviews during the observed period showed that comprehensive completion of HEADSS questionnaires identified psychosocial issues which would not have been identifiable from presenting complaint or basic history alone.

Conclusions The departmental change brought about by the COVID-19 pandemic enabled a comparison between the care of 16 and 17 year old patients in adult ED and paediatric ED and how this might impact their psychosocial care.

In paediatric ED young people of 16 and 17 years old had a higher completion of comprehensive HEADSS questionnaires, there had been an increase in referrals to psychosocial services and we have seen evidence of psychosocial issues being identified and managed in paediatric ED when HEADSS questionnaires have been completed.

With an increase in mental health and drugs/alcohol presentations, a comprehensive psychosocial assessment is vital to ensure safeguarding and social needs are met.

Paediatric Educators' Special Interest Group

1129 YOUTH PRODUCTION OF 'WHAT MATTERS TO ME' IN HOSPITAL VIDEOS

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Background Before the COVID-19 pandemic began, the Youth Forum (Youth Empowerment Squad – YES) had identified a paucity of educational information for health care staff about the key issues for young people in hospital. YES decided to collaborate with a film-maker to produce videos about what matters to young people when in hospital. When the pandemic hit, and in-person forum meetings