development of workplace relationships at a time where peer-support was pivotal.

The risk of poor mental health and moral distress is well recognised in healthcare professionals. With isolation and restricted peer-support, this was likely to increase. The regional Trainee Support Network launched a series of pan-regional virtual Quiz Nights to combat this.

Objectives To organise virtual quiz nights that provide a safe environment for paediatric trainees, consultants and the wider deanery 'paediatric family' to see each other and have fun, in order to improve workplace relationships and boost staff morale.

Methods A 32-week project using plan-do-study-act (PDSA) cycles was completed (table 1). We evaluated interventions via mixed quantitative and qualitative questionnaires assessing whether people would attend again, would recommend the quiz to friends, and whether attendees reported improvement in workplace relationships and morale.

A total of 6 virtual quiz nights were hosted across an 8-month period from May to December 2020.

Results The quiz was attended by a mixture of clinical, non-clinical, senior and junior paediatric staff and their families. Attendance ranged from 20–40 per quiz, peaking during lockdown. We received a total of 39 responses to our questionnaire.

100% (n = 39) reported they would attend again and would recommend the quiz to a friend or colleague. 97% (n = 38) reported they agree or strongly agree that the quiz boosts staff morale. 92% (n = 36) reported it improved workplace relationships. When asked whether they preferred the quiz to be only trainee or consultant based, 100% (n = 39) reported they wanted it to be open to all.

Attendees reported that it was a 'great initiative' that allowed people to 'connect with colleagues' at a time where this was 'not possible in groups outside of work due to COVID.' They 'loved the banter' and the 'imaginative rounds.' Thematic analysis demonstrated that what people valued most was the 'chance to see friends' from 'around the region,' 'getting everyone together,' and the 'community feel' created by these events through the 'light-hearted entertainment.'

Abstract 1301 Table 1

PDSA Cycles

- 1 Launch of Quiz Night. Variety of questions, including region specific ('Name the Hospital' and 'Guess the Consultant' childhood photo rounds) and general rounds.
- 2 Further promotion, including a regional twitter hashtag. Addition of attendee requested rounds (continuing mixture of deanery specific and general rounds)
- 3 Head of School and TPDs invited to guest host rounds and addition of further innovative (COVID face mask) photo rounds
- 4 Quiz Night held in conjunction with regional PAFTAS award ceremony evening
- 5 Special edition quizzes (Back to School, Christmas Quiz)

Conclusions Through innovative photo rounds, guest hosts, and friendly competition, the quiz was a 'wonderful way to get trainees and consultants of the region together,' improving staff morale and workplace relationships. Hopefully one day we can 'do it in a pub.'

British Association of Perinatal Medicine and Neonatal Society

1302

THE CORRELATION BETWEEN EARLY GENERAL MOVEMENT ASSESSMENT AND 2 YEAR NEURODEVELOPMENTAL OUTCOME IN HIGH RISK INFANTS

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Background Prechtl General Movement Assessment (GMA) is a reliable tool for identifying babies at risk of neuromotor deficit. We have previously compared our GMA results with standardised 2 year neurodevelopmental outcome for high risk infants, but our numbers were small.

Objectives Our aim therefore was to increase our study population and reassess this correlation.

Methods High risk infants born between 2016 and 2018 who received their neonatal care in a level 3 NICU were retrieved from neonatal databases. Those infants who had GMA were extracted and the GMA and 2 year assessments were compared.

Results 83 infants born during our study period had GMA and 2 year assessments. The infants' gestation ranged from 23⁺⁶ to 42⁺² weeks and birth weights from 488g to 4410g. All had GMA between 10 to 17 weeks of age. Most infants had 2 assessments during this time plus an early GMA between 2 to 8 weeks. All had assessments at a corrected age of 2 years using either the Bayley's III tool or a combination of telephone interview, general health and motor function questionnaire plus PARCA-R questionnaire. Of the 83, 66 (80%) had normal 2 year outcome and 63(96%) of the 66 had normal 10 to 17 week GMA; 3(4%) of the 66 had equivocal 10 to 17 week GMA. None of the 66 had absent fidgety movements. 34(52%) of the 66 had GMA between 2 to 8 weeks and 20(59%) of these were a normal pattern with 14(41%) having a poor repertoire. 6(7%) of the 83 infants had severe global disability at 2 years and in all of these fidgety movements were absent at 10 to 17 week GMA. All 6 had abnormal GMA at 6–8 weeks; 4 with poor repertoire and 2 showing a cramped synchronous pattern. 7(8%) of the 83 infants had moderate or severe motor disability without significant other disability at 2 years and a diagnosis of cerebral palsy. 6(86%) out of the 7 had absent fidgety movements at 10 to 17 weeks and 1(14%) had equivocal fidgety movements. 4(57%) of the 7 had 6 to 8 week GMA; 2(50%) of the 4 displayed poor repertoire and 2(50%) showed a cramped synchronous pattern. 4(5%) of the 83 infants had significant cognitive or language disability at 2 years but no motor deficit and all these had normal fidgety movements.

Conclusions Our study demonstrates a high level of correlation between absent fidgety movements at 10 to 17 week GMA and motor disability as assessed by standardised methods at 2 years. There is a weaker association between 6–8 week GMA and motor problems and this is well recognised in published literature. However it is notable that all children in our study with severe motor problems at 2 years and who had a 6–8 week GMA demonstrated either a cramped synchronous or poor repertoire pattern. We advocate the use of GMA for high risk neonates as a means of early prediction of

neuromotor problems. Targeted intervention can be offered to those with abnormal findings improving final outcome.

Quality Improvement and Patient Safety

1305

STAFF WELLBEING AND TEAM MORALE DURING THE COVID-19 PANDEMIC AT BIRMINGHAM CHILDREN'S HOSPITAL

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Background Covid-19 has significantly impacted the nations day-to-day life and inevitably affected the workplace too. The NHS has been under visible unprecedented stress and consequently staff have carried the burden. The general paediatricians at Birmingham Children's Hospital wanted to understand how the medical staff felt they could be supported during this difficult time

Objectives To assess the wellbeing and team morale amongst medical staff within the General Paediatrics team at Birmingham Children's Hospital (BCH) during the Covid-19 pandemic and implement a new method to improve wellbeing and team morale.

Methods A questionnaire was created and distributed to the medical staff working within the General Paediatrics team at BCH. Questions were formulated following research relating to existing staff wellbeing questionnaires and current literature regarding the effects of Covid-19 on mental health, wellbeing and team morale.

Results Twenty-two staff members completed the questionnaire which represented their experience over the last month. Fifteen (68.2%) looked forward to going to work and nineteen reported feeling 'happy, smiling and laughing at work' when asked. However, 27.3% only felt appreciated at work a few times a month or less and 31.7% stated that their good work was acknowledged less than a few times a month. Twelve felt that they needed someone to talk to at work and four felt unable to confide in a colleague at least a few times a month. 50% felt then needed some time alone during a break at work. 81.8% admitted that Covid-19 had affected their mental health or wellbeing, 50% felt socially isolated as a result of Covid-19 and 95.5% felt worried about their health of the health of family/friends as a result of Covid-19. Seventeen staff members felt that Covid-19 had affected team morale and eighteen felt that knowing their colleagues better would improve team morale and make them more likely to confide in them if needed.

Conclusions This evaluation highlights that the majority of staff at BCH felt Covid-19 had affected their mental health, wellbeing and the General Paediatric team morale. It stressed the importance building colleague relationships to support each other during this worrisome time. A 'Let's Strike Up a Conversation' matchbox activity was created in response to the findings to initiate non-covid and work-related conversation during work breaks. The matchbox had conversation starting 'Match cards' within to stimulate and improve team communications and encourage staff to get to know each other. The effects of this intervention are to be evaluated in due course. The assessment of staff wellbeing and team morale has highlighted the importance of actively surveying the team during new and unexpected changes/circumstances.

Early recognition facilitates early response and adjustments to boost team morale and wellbeing.

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1306

USE OF ESTER IMPREGNATED PH STRIPS IN IDENTIFICATION OF GASTRIC PLACEMENT OF FEEDING TUBES IN NEONATES: A DIAGNOSTIC ACCURACY AND PROFESSIONALS' PERCEPTION STUDY

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Background Naso or oro-gastric feeding tubes are essential component of care in providing nutrition and medication in neonatal units. The existing standard pH strips lack sensitivity. As a result, neonates may require re-insertion or some cases require unnecessary x-rays. A new generation of ester impregnated pH strips have been developed, utilising human pre-duodenal gastric lipase (HGL), which is only present in the stomach, to improve sensitivity of the test strips to gastric placements.

Objectives 1) to assess the sensitivity of the novel ester impregnated pH test strip compared to the standard pH strips. 2) to assess healthcare professionals' perception of the standard pH test strips and the ester-impregnated pH strips.

Methods We carried out a prospective observational diagnostic accuracy study at the neonatal units of two NHS hospitals comparing the ester-impregnated strips to the standard pH strips. The primary end point is the sensitivity of the pH tests at the recommended pH cut-off of 5.5. We also carried out an online survey with healthcare professionals involved in the study to qualitatively assess through validated scales their perceived usability, trust and acceptance of the standard pH test strips and the general perception of the HGL, enhanced pH test strip. The study was funded by NIHR Innovate UK, received research ethics approval from HRA (REC ref: 19/LO/1726) and was registered in the clinicaltrials.gov website (NCT04271995).

Results A total of 233 samples were collected from 141 infants with the median gestation age of 32 weeks (range 23–41 weeks). The sensitivities of the standard and novel pH tests were respectively 82.0% (95% CI: 77.0%-86.9%) and 90.1% (95% CI: 86.3%-94.0%) under pH cut-off of 5.5. Term babies had significantly lower pH compared to pre-term babies (mean pH: 3.7 versus 4.3, $p=0.03$). Aspirates from neonates fed by mother or donor expressed milk had significantly lower pH compared to neonates fed by formula milk (mean pH: 4.01 versus 4.78, $p<0.001$).

A total of 17 health care professionals completed the online survey, which reported a high level of perceived usability for the standard pH test strips (82.20%). As well as a