grade (p-value - 0.232). There was no significant linear trend by increasing medical grade to 'No' response (p-value - 0.346) using the *nptrend* command.

Conclusions The study highlighted that the majority of the practitioners do not appear to be following NLS/TOBY guidance. These persisted through all the medical grades surveyed and in both survey years (2015 and 2019). Though not statistically significant, a higher proportion of practitioners opted to cool prematurely in 2019. It underscores a need for studies to facilitate better evidence and clear guidance in this vital area of our clinical practice.

British Academy of Childhood Disability

1311 DISABILITY MATTERS TO MEDICAL STUDENTS: IMPROVING TRAINING IN DISABILITY DESPITE COVID-19

Elizabeth Lawson. *University of Leeds*

10.1136/archdischild-2021-rcpch.547

Background Direct patient contact has always been at the heart of medical training, yet medicine amid Covid-19 has necessitated its universal reduction. In comparison to the continuing face-to-face assessment of severe acute illness, chronic disabilities are being managed remotely. Hence, learning opportunities through direct patient contact have been limited for medical students during the pandemic, which may ultimately hinder the provision of high quality patient care for this population in the future.

Disability Matters (DM) is a RCPCH free online resource, co-authored by medical specialists alongside disabled children and their families. It consists of packages individually constructed for doctors and other professionals working with disabled children and aims to provide support in recognising the barriers that exist for disabled people, and facilitating their eradication. Notably, through pre-recorded videos and interviews with patients and their families, DM enables learners to achieve the benefits of direct patient contact, despite never facilitating face-to-face interaction.

Moreover, this efficient method of acquiring the benefits of direct patient contact is also beneficial for the participants and authors. Disabled young people and their families already frequently spend much of their time at hospital or attending medical meetings and may or may not want to spend more by sharing their often personal and sometimes upsetting accounts to help medical students learn. Through Disability Matters an interview can be recorded at a convenient time and uploaded for viewing by an unlimited number of students.

Objectives This project aimed to explore whether DM could be used for remote undergraduate education. This entailed establishing whether medical students can gain useful insight into disability medicine through this resource, whilst simultaneously keeping these potentially vulnerable patients safe from the risks introduced by increased contact in the pandemic.

Methods A final year medical student created a package of 8 sessions specific for medical students. The inclusion criteria were relevance to undergraduate curriculum, interest and post-graduate utility. The package was then peer-reviewed.

Results In an initial study, 45/46 medical students agreed that undergraduate education in paediatric disability will be limited

due to Covid-19 and 45/46 stated that they would use DM to support their learning.

Conclusions DM is valuable during Covid-19. It equips students with an enriched awareness of disability and the confidence to implement this in practice, whilst concurrently being more convenient, and safe, for patients and their families. Recognising, utilising and distributing this high quality online resource to improve care for disabled children is particularly pertinent at a time when education and the quality of future patient care is threatened. Therefore, its utilisation for the remote education of students is supported. Whether this benefit continues beyond Covid-19 merits further study.

Child Protection Special Interest Group

1312 EVALUATING AND IMPROVING SAFEGUARDING TRAINING FOR ST1-3 PAEDIATRIC TRAINEES IN THE NORTH EAST

¹Jane Mcardle, ²Andrew Villis, ²Ruth Stanley, ²Caroline Grayson, ³Emma Riley. ¹HEENE; ²Newcastle upon Tyne NHS Foundation Trust; ³Newcastle upon Tyne NHS Foundation Trust/Health Education England North East

10.1136/archdischild-2021-rcpch.548

Background Safeguarding is an important part of paediatric training and was given a greater profile in the revamped Progress Curriculum in 2018 with a domain specifically covering children's safeguarding.¹ Further guidance on mandatory competencies was then offered by the Royal College of Paediatrics and Child Health (RCPCH) in 2019.² This set out for the first time that paediatric trainees should be compliant with Level 3 children's safeguarding training by the end of their ST1 year.²⁻³

Objectives This project was carried out in order to ensure that training in safeguarding for ST 1-3 paediatric trainees within Health Education England North East (HEENE) was compliant with this guidance and facilitated achieving the required outcomes in the Progress Curriculum.

Methods A training needs analysis (TNA) was carried out by reviewing the above guidance and curriculum, with the aim of developing a new training package, mapped to these resources, including a face-to-face training session as part of the regional training programme. Qualitative feedback was sought from current ST4-5 trainees to evaluate their views on previous safeguarding training they had received, to incorporate this in developing the new package. The newly designed training package was evaluated with a pre and post training survey. In order for trainees to evidence their competencies a 'Safeguarding Passport' was also developed, which outlines training requirements and has space for trainees to record safeguarding experience and learning. Satisfactory completion of this passport was then made a mandatory part of trainees' Annual Review of Competency Progression (ARCP) within HEENE.

Results The TNA highlighted that report writing and understanding of the legal framework around children's safeguarding were key aspects to be incorporated into the planned regional training package. Pre and post training surveys showed a significant improvement in trainees' confidence levels in all areas covered, with areas of report writing and the legal framework showing the greatest improvement. Trainees still felt they needed more teaching on communicating with families and