(n=4), leading a busy out of hours shift: 12% (n=2), delegation: 6% (n=1), and complaints: 0% (n=0).

Post-course survey results showed that 100% (n=23) of trainees felt they had a better understanding of what is expected of a new Registrar after attending the day. Trainees found it useful reflecting on the potential challenges of stepping up and having time to discuss these with more senior trainees (100%; n=23), and stated that they felt less anxious and more confident about stepping up after attending the day (96%; n=22). Comments included 'reassuring to hear that a lot of the worries I have about stepping up are common', 'useful hearing personal accounts from current registrars, obstacles they faced and strategies to overcome them', and 'helped me plan how I am going to approach these situations with greater organisation, situational awareness and a more holistic approach - thank you!'.

Conclusions We have developed a new, trainee-led day to support trainees in our region with the transition to working as a Paediatric Registrar. Feedback demonstrates that trainees found the day valuable, resulting in reduced anxiety and improved confidence about the transition. Trainees found the near-peer support aspect of the day especially useful, in addition to the practical tips relating to topics such as resuscitation, leading busy shifts, safety-netting, delegation, complaints, and wellbeing. The Transition day will be embedded within our regional teaching programme; additional work to further boost peri-transition support is in progress.

1383 IMPACT OF INTERNATIONAL HEALTHCARE WORK ON WEST MIDLANDS PAEDIATRIC TRAINEES

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Background The West Midlands Deanery (WMD) offers paediatric trainees an Out Of Programme Experience (OOPE) in Malawi, via the Birmingham Women's and Children's Hospital (BWC) – Malawi partnership. This registrar placement includes ward work, on-calls and clinics in a busy Paediatric department at the Queen Elizabeth Central Hospital, Blantyre, Malawi.

Objectives To assess the impact of working in a low-middle income country on paediatric trainees in the domains of: clinical, communication, leadership, teaching, governance, leadership, and also the personal impact the placement has had on individuals.

Methods All seven of the WMD paediatric trainees who underwent OOPEs in Malawi between 2013–2018 were interviewed virtually in 2020 as part of an evaluation of the BWC-Malawi partnership using a detailed standardised proforma. One trainee had a 12-month placement and another had to return after one month due to health issues; the remainder stayed for six months. Qualitative data was analysed using grounded theory.

Results All trainees were overwhelmingly positive about their OOPE in Malawi. Three of the seven already had an interest in infectious diseases and valued the vast exposure to and clinical knowledge of tropical medicine gained in working in sub-Saharan Africa.

Table 1 identifies the positive impact of the OOPE on individual trainees in the different domains.

Abstract 1383 Table 1 Positive impact on trainees

Clinical	Increased knowledge of tropical medicine Improved acumen in the absence of investigations Improved decision-making skills and procedural skills A calmer approach to sick patients
Communication	Improved communication where language, health beliefs and understanding is difficult Understanding how to manage calls from juniors overnight
Leadership	Increased confidence leading arrest calls Experience in mentorship (each registrar is assigned a medical student to mentor) Wanting to create a positive working atmosphere
Teaching	Increased confidence in teaching abilities Developed strategies for engagement Flexibility of teaching methods to suit audience
Governance	Led to first publication for some trainees An interest in research
Personal	Renewed enthusiasm for medicine Appreciation of how resilient people can be Ability to appreciate the little things Adaptability to different environments

One trainee mentioned the benefit of a renewed passion for a career in paediatrics, without which an individual may have considered leaving training; thus demonstrating the wider benefit for the WMD. The only negative mentioned was that the trainee with health issues struggled with signposting for medical care when they became unwell.

Three of the interviewed trainees have since gained their certificate of completion of training (CCT); all mentioned their OOPE at consultant interview and felt it gave them a unique talking point.

Conclusions The benefit of this OOPE for WMD paediatric trainees is considerable. The partnership will address supervision and signposting for the placement, as trainees cannot be left unsupported during this time. In an era where many trainees are suffering from burnout, we would recommend that all Deaneries offer something similar to their trainees, where they can learn in a different environment.

'It made me realise why I did medicine. It was the best medical placement I have ever done.'

Quality Improvement and Patient Safety

1384 EVALUATION OF INTERAGENCY SAFEGUARDING REFERRAL FORMS FOR CHILDREN AT A DISTRICT GENERAL HOSPITAL

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Background Child protection and safeguarding is paramount to the role of all paediatricians. Recognising, communicating, and addressing safeguarding concerns effectively is necessary to protect vulnerable children and their families from harm. This ensures children 'grow in a safe environment' as described by the RCPCH.