

outcome if transplant is made affordable and accessible as most patients are from lower socioeconomic groups. Awareness about these disorders may improve the diagnosis of these conditions and help in appropriate management. There is a need to share experience and data on these rare conditions and build support groups to guide patients and families afflicted with these ominous disorders.

Association of Paediatric Emergency Medicine

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PARENTAL PERCEPTIONS OF PAEDIATRIC EMERGENCY DEPARTMENTAL ATTENDANCE IN CHILDREN DURING THE COVID-19 PANDEMIC IN UK (PPEDIC). THE QUANTITATIVE OUTCOMES

¹Lorraine Wicksey, ¹Marylyn Emedo, ¹Tina Sajjanhar, ¹Anthony Hemeson, ²Emmanuel Singogo, ¹Gayle Appleby, ¹Benjamin Cahill, ¹Sophie Keers, ³Alastair Yim, ⁴Alexandra Wharton-Smith, ¹Maggie Nyirenda. ¹Lewisham and Greenwich NHS Trust: University Hospital Lewisham; ²University of Northern Carolina; ³Lewisham and Greenwich NHS Trust: Queen Elizabeth Hospital; ⁴London School of Hygiene and Tropical Medicine

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Background Since March 2020, National lockdowns in UK to control the spread and impact of the COVID-19 pandemic have resulted in a reduction in children attending Paediatric Emergency Departments (PED) nationwide. At our Trust, there was a 46% reduction in PED attendances in 2020 compared to the same two-month period in 2019 (6631 v 12092).

Objectives The study aims were to analyse the impact of lockdown on PED attendance in our Trust, identify reasons for reduced attendance, drivers of change in behaviour, the clinical conditions, timing, and outcomes of PED attendees.

Methods This quantitative sub-study was part of a prospective mixed methods study that recruited caregivers of children ≤16 years attending PEDs in our Trust during November-December 2020. A semi-structured questionnaire was used to collect data including demographics, details on reason for attendance, source and type of advice sought prior to attendance, the form of transport used to get to PED and clinical outcomes of the attendees. Likert scales were used to assess fears and drivers of change in behaviour around PED attendance. We used frequencies, proportions and Spearman's correlation coefficient to summarize the data. Likert scale data was analysed using measures of central tendency (median) and dispersion (interquartile range).

Results A total of 98 caregivers who attended PED with their children during the study period were recruited randomly. Most participants were female (79.6%). About 92% of the participants disclosed their ethnicity: with 57/90 (63%) were white, 19(21%) identified as black and 14(16%) were other races including people of Asian and Hispanic descent.

Over 60% of participants came to PED within 2 days of illness, with mode of transport being: by ambulance (13%), drove their own cars (59%) and used public transport (13%). The commonest clinical presentation was injuries 29/98 (30%), followed by respiratory conditions 11/98 (11%). A total of 76 (78%) were discharged while 17(17%) were admitted.

The main concerns related to PED attendance were; risk of contracting COVID-19(41%); and concerned about overburdening the NHS (25%). Just under half, 42/98 (43%), of participants stated that they would have attended PED in

the same time frame as they did in contrast to 32/98 (32.6%) of those who felt they would have attended earlier if there was no pandemic. Whilst 22/98 (22.4%) were not worried about attending PED at all. There was no correlation between self-rated level of worry about coming to PED and time taken to PED attendance (spearman correlation co-efficient = 0.1399)

Most participants 60/98(61.2%) discussed their child's illness with another person prior to presentation. 5/98 (5.1%) of the participants were advised not come to ED but they decided to attend anyway. 28/98 (28.6%) participants contacted GPs followed by 19/98 (19%) who consulted the NHS 111 service.

Conclusions This study demonstrates that in line with national figures, PED attendances fell dramatically during the Covid pandemic, especially in the area of respiratory illness. For the carers who brought their children to the PED, there was a high level of concern about safety and infection control for themselves and their children that needs to be addressed.

Quality Improvement and Patient Safety

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IMPROVING THE QUALITY OF NEONATAL HANDOVER: A QUALITY IMPROVEMENT PROJECT

Karim Noordally, Preethika Mosali. *Royal Berkshire NHS Trust*

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Background Effective handovers facilitate safe, error-free and efficient continuity of care of patients through the sharing of information between two engaging parties. This requires one party to 'hand over' relevant information succinctly to the recipient who should be able to read, question, digest and therefore understand the patient's issues, before resuming their care. Several guidelines from the National Patient Safety Agency, as well as the Royal Colleges emphasise the importance and benefits from effective handovers.

Following on from several 'near misses', handover practices within our medium sized DGH providing Level 2 neonatal care were reviewed between 2019 and 2020.

Objectives To introduce a system of formal handover within the Neonatal Unit and Postnatal Ward and to assess its effectiveness amongst relevant team members.

Methods Team members:

Consultants, Trainees and Nurses of all grades, were invited to participate in an electronic survey to gain further insight into the current handover arrangements and to identify possible improvements in these processes. The survey was designed via the 'Survey Monkey' web interface. The survey aimed primarily to address the safety and effectiveness of handovers. Questions were reviewed and validated by both internal and external colleagues prior to being sent to all team members. The initial survey period was between June 2019 and July 2019. Changes were subsequently implemented from September 2019, followed by a period of re-evaluation between May 2020 and July 2020. The period of evaluation during the second survey was slightly longer than the initial survey to account for the impact of the COVID-19 pandemic.

Results A total of 35 invitations for participation were sent out to the medical team. There were 26 completed responses for the initial survey (74% completion rate; ranging from consultants to foundation year trainees) and 28/35 (80%