To improve these rates we devised change ideas:

- screening questions co-designed with parents,
- '123 fight inequality' leaflets of practical resources co-produced,
- presentations and workshops with local parents who had suffered hardship.

Despite these and regular communications to staff, poverty screening rates worsened during the pandemic. In October 2020 we re-launched Connected Communities (CC) and the provision of support workers within the hospital. Staff reported feeling empowered knowing that practical help would be given. A poverty screening guideline was drafted with case studies and recommended screening using framing like:

'Since the pandemic we know more parents are finding it difficult to pay bills/debts, afford food or find employment, - do you?' Or asking 'do you worry that your housing is affecting your child's health?' We delivered teaching together with CC support workers in February 2021.

In March 2021, 43% of doctors and nurses surveyed reported they had screened the last patient they saw; 79% were aware of resources and; 67% had signposted someone to help in the last 3 months. From zero introductions to Connected Communities in October 2020, a staggering 95 parents have been screened and recommended to contact our support workers. Only 23 have engaged so far and they have received help with housing, finances/benefits and citizenship. Ten do not speak English but will be supported to access advice.

Conclusions

Tackling health inequalities takes commitment By seeing, screening and intervening, we help reduce stigma and identify vulnerable families. Our close partnership with Connected Communities increased staff confidence and increased introductions. More work is needed to determine why only 23/95 parents take up the offer but language barrier, parental expectations or clerical factors may contribute.

British Association of General Paediatrics

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VIRTUAL ART THERAPY: MEETING THE PSYCHOSOCIAL NEEDS OF CHILDREN AND YOUNG PEOPLE WITH A LONG TERM HEALTH CONDITION DURING THE COVID-19 PANDEMIC

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Background Children and young people (CYP) with a long term condition (LTC) are known to have increased psychosocial needs. This is also true for siblings of CYP with a LTC.

The current COVID-19 pandemic has had an adverse impact on the psycho-social wellbeing of CYP, especially those with a LTC and their siblings. This has resulted in an increase in demand for psychosocial support which has presented a challenge as to how these needs might be met.

During the pandemic, a Children's Hospital, in partnership with Teapot Trust (a charity providing art therapy) offered a virtual art therapy intervention to CYP with chronic kidney

disease in order to support their psychosocial needs. The art therapy was delivered virtually via Zoom.

Objectives To explore the feasibility and effectiveness of delivering a virtual art therapy intervention and measure the impact of the intervention on Children and young people psychosocial wellbeing

Methods The hospital MDT identified and shared referrals with the Teapot Trust art therapist. CYP completed a Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS) survey at the start and end of the intervention to assess impact on psychosocial wellbeing.

From August – December 2020: 8 CYP (aged 6–14 years) received virtual art therapy support. Sessions were either delivered 1:1 (N=4) or group (N=4). The art therapist delivered the therapy via Zoom. All CYP received an individual art resource pack. Youth workers participated in sessions where considered helpful. CYPs needs were identified at their initial session and a support plan put in place. Progress was reviewed after 8 weeks and sessions extended if needed. At the end of the intervention CYP also completed an enjoyment feedback form. Parent's feedback about their child's well-being and enjoyment was collected at the end of the intervention.

Results The CYP received a mean of 8 (range 6 – 18 weeks) sessions.

CYP:

N=8. 87.5% (N=7) completed the WEMWBS survey. Average WEMWBS score increased from 82.7 (high) at baseline to 91.3 (high) post intervention which is a positive change across the whole group.

All 100% (N=7) showed improved self-esteem, improved mood, increased energy and motivation, and increased relaxation.

Parent feedback:

62.5% (N=5) completed the feedback forms. 100% (N=5) responses were positive.

CYP said 'it helped me understand all those feelings that were hidden for such a long time.'

Parent feedback 'the difference in R's mental health from when she started the art therapy and finished was like night and day'..... 'being very proactive in her own self-care, seemed happierextremely pleased with the result'.

Conclusions

Delivery of a virtual art therapy intervention appears to support improvement of the psychosocial wellbeing of CYP. More research is needed to assess the effectiveness of virtual art therapy.

Paediatric Educators' Special Interest Group

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INCREASING CONFIDENCE IN USE OF ULTRASOUND GUIDED INTRAVENOUS ACCESS (US IVA): IMPLEMENTATION OF A PILOT PROGRAMME IN A TERTIARY CHILDREN'S HOSPITAL

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Background Establishing peripheral intravenous access (IVA) in children forms a significant constituent of clinical activity in