president to GMC chair. Seminars provided advice on improving your CV for the application process and information on the current and future training programmes. Delegates were invited to submit abstracts on paediatric projects they had been involved with; prizewinning abstracts were chosen. There was an interactive simulated patient management presentation. Delegates voted in real time for their preferred management option during a simulated emergency situation.

Results The conference was hosted on Zoom on Wednesday 28thApril 2021 and lasted 3 hours. A total of 27 medical students and foundation trainees attended the event. Feedback revealed 72% of delegates would be very likely to recommend attending the course to a friend or colleague. Comments from delegates included 'Excellent discussion on how to apply to paediatrics and really inspiring listening to positive accounts of paediatric training' The session on Paediatric CV development was the most highly rated. The medical students valued the platform to present their abstracts.

Conclusion This small-scale project shows that with limited resources it is possible to connect with medical students and foundation trainees to promote paediatrics as a career. We hope we will continue to develop this conference into a larger scale face to face event over time and another virtual conference is planned for late Spring 2022.

700 DEMOCRATISING AND STREAMLINING A REGIONAL ST6-ST8 TEACHING CURRICULUM

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Aims The West Midlands School of Paediatrics organises 4 study days per year for ST6-ST8 trainees in the region. A regional curriculum was written when the Royal College of Paediatrics and Child Health (RCPCH) Progress curriculum was introduced in 2018, aiming to cover all domains of Progress as well as specialty input from all paediatric subspecialties over a rolling three-year programme. Regional teaching is coordinated by trainee(s) and a handover between coordinators occurred in 2021. With Shape of Training and the subsequent reduction in training time on the horizon, this was felt to be a suitable time to revise the curriculum.

Methods A survey was circulated to senior trainees in the region, asking for their views on ST6-ST8 teaching moving forward. At the same time, historical study day feedback from 2018 to 2021 was collated and thematically analysed. The results of these exercises were analysed and used to construct a more streamlined regional curriculum. This was then forwarded to the cohort for ratification.

Results Of 39 respondents, the most popular subject requested was preparation for CCT/consultant interviews/first consultant post (87%). Non-routine problems (such as medical complexity, adolescent health, and cultural attitudes to health), broader specialty teaching (e.g. liaising with tertiary specialties, neonatal updates for general paediatricians) and preparation for START were the next most desired topics (all 77%). Trainees were most eager to replace detailed teaching on management of specific tertiary specialty and general paediatric conditions (56% and 49% of respondents respectively).

The most frequent positive historical feedback mentioned excellent speakers, the use of polls or other interactive

elements, practical approaches to problems, case-based scenarios, and the use of small groups. In free text options on historical feedback forms asking what trainees would like covered during study days, trainees suggested topics grouped into five main themes:

- Communication
- · Safeguarding, legal child death
- Clinical leadership
- · Quality and safety and
- START and consultant application preparation.

A new regional curriculum was constructed based around these themes, adding 'specialty liaison' days to give senior trainees further guidance on liaising with tertiary specialties. A START and consultant application preparation session would be included during each individual study day. This document was circulated to senior trainees for feedback and ratified by 92% of respondents after incorporating minor suggestions for improvement.

Conclusion By seeking the input of trainees both past and present, we were able to streamline the regional teaching curriculum for senior paediatric trainees in the West Midlands. Historical feedback correlated with contemporaneous feedback regarding preparation for START and consultant jobs, highlighting the importance of these subjects to senior trainees. The democratic process should hopefully mean that trainees find training more relevant to their needs and focused more on what they feel they need from centrally organised training. Ongoing feedback continues following every regional study day and the next evaluation is planned for mid 2024 after the launch of the RCPCH Progress+ curriculum.

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'NEXT SLIDE PLEASE' — HOW A MULTI-PROFESSIONAL APPROACH TO TEACHING CAN CHANGE STUDENT EXPERIENCE

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Aims In Derby we have over 100 medical students coming through our child health rotation a year. These students come for 8 week and were classically taught with a combination of lectures, ward based study and face to face workshops. Students were welcome to come to the wards to shadow doctors and spent time in all areas including outpatients, CED and the wards.

With the advent of COVID 19, social distancing changed our options dramatically. Balancing keeping students and patients safe, whilst providing students with a good learning environment was difficult but extremely important. Learning was becoming more self directed and virtual. Because of this reduction we noticed large gaps in the student curriculum that we were no longer covering and therefore sought to create teaching sessions to address these gaps.

We wanted to create some face to face teaching sessions that could cover several aspects of the student's curriculum in one go, focussing on areas of their curriculum that were now lacking. We wanted this teaching to be practical and succinct, and multidisciplinary if possible

Methods After looking at the areas of the curriculum that were lacking we identified that students were missing out on practical prescribing practice and paediatric radiology teaching.