actions, for example through legislation and security measures, have contributed to a sharp decline in child deaths in tractor accidents.

**P72** THE ROLE OF SCHOOL EXPERIENCE IN MEDIATING THE ASSOCIATION BETWEEN CONDUCT PROBLEMS TRAJECTORIES AND NOT BEING IN EDUCATION, EMPLOYMENT OR TRAINING (NEET STATUS) AT AGE 20

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Previous research has shown that children and adolescents on different CP trajectories are exposed to a higher risk of being not in education employment or training (NEET) in young adulthood/adulthood. However, there has not been much research on factors that may mediate the association between CP trajectories and NEET status at age 20. In the present study, we investigated the role of school experience at age 14 years in mediating the association between CP trajectory group defined from age 4 to 13, namely Early-Onset Persistent (EOP), Adolescent-Onset (AO) and Childhood-Limited (CL), and Low (L) and NEET status at age 20. Using G-computation, we estimated the natural direct and indirect effects of CP trajectory group on NEET using data from ALSPAC. We found that school experience mediates the relationship between EOP trajectory and NEET status at age 20. The impact of attrition on these results was also investigated via imputation of missing values under the assumption of missing at random. These findings highlight the role of schools in potentially minimising the risk of becoming NEET in high-risk youth.

**P73** THE MIND BUBBLE™- A PATIENT EMPOWERMENT TOOL

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Aims Empower our young people and encourage self-management and advocacy - that remains the overarching principle at our diabetes clinic. A key component of this is to understand the expectations of young people and answer questions they seek answers to. By using their checklist and not our own, we may cover fewer items but are more likely to have a purposeful and eventually fruitful conversation. Our aim was to identify each patient’ individual goals and tailor discussions accordingly.

Methods We distributed questionnaires, in the form of a ‘mind bubble’, to young people over 12 years attending paediatric diabetes clinics in our hospital over a two-month period. A ‘mind bubble’ is a simplified visual questionnaire designed to be user-friendly and engage with young people. Young people were asked ‘What would you like to discuss today at your diabetes clinic?’ and their responses were then addressed at that attendance.

Results We received 32 completed ‘mind bubbles’. The most common response was for advice on hypoglycaemia and hypoglycaemia management (44%). 7 responses (22%) were regarding practical advice on holidays and exercise, 6 responses (19%) for specific questions regarding insulin pumps and infusion sets, and 3 (9%) regarding the use of associated computer programmes. 3 responses (9%) asked for education on ketones. Feedback from these were very positive specially from parents who felt their young person was empowered to articulate exactly what they wanted from us.

Conclusions The ‘mind bubble’ provides a practical way for young people to inform the diabetes team of their expectations for each clinic visit. The wide variety of responses highlights the challenges of engaging with young people with complex, life long conditions, and the need for patient centred care to enable our young people grow in confidence.