

1848 ADOLESCENTS IN HOSPITAL, WHICH WARDS ARE THEY ADMITTED TO AND IS THIS APPROPRIATE?

¹Laura Chapman, ¹Georgina Wicks, ²Amanda Friend. ¹NHS; ²Birmingham Children's Trust

10.1136/bmjpo-2022-RCPC.H.1

Objectives Adolescents' requirements differ from those of adults or children.¹ The Teenage Cancer Trust recommends specialist wards for teenagers aged 13–18 years, coinciding with the 'You're Welcome' quality criteria emphasising an importance for age-appropriate environments.^{2,3} We aimed to identify the number of teenage admissions to Leeds Children's Hospital, and their reasons for admission over a one-year period to investigate the potential need for an adolescent ward.

Methods A retrospective service evaluation was used to identify 13–18-year-olds admitted to Leeds Children's Hospital between 1st September 2017 and 31st August 2018. PPM+ electronic records were used to identify patients' date of birth, date of admission & discharge, reason for admission, admitting ward, and specialty. Microsoft Excel Facilitated the analysis. Admissions were categorised based on admission reason, and whether they were elective or acute. Mean duration of stay, proportion of elective & acute admissions, and the proportion of outliers was calculated for each category.

Results There were 1,856 adolescent admissions during this time from 1,363 distinct patients. Acute admissions accounted for 74.5% of admissions, whilst the remainder were elective. Average duration of admission was 3.8 days. Surgery formed the majority of admissions at 27.4% and medical comprising of 23.4%. 16.9% of all patients admitted were outliers, the largest proportion of which were mental health patients, with 59.7% of admissions admitted to an outlying ward.

Conclusions A large number of adolescents were admitted to the Leeds Children's Hospital, where patients would not have been in age-appropriate environments. Considering this and the number of outliers, this study has highlighted a need for dedicated ward space suitable for adolescent needs.

REFERENCES

- Platt, H. The Welfare of Children in Hospital - PMC. *British Medical Journal* 1959;1: 167–169.
- Department of Health. Department of Health Quality criteria for young people friendly health services. (2011).
- Smith, S. & Case, K. A blueprint of care for teenagers and young adults with cancer. *Teenage Cancer Trust* (2012).

1862 THE HOLISTIC HEALTH NEEDS OF ADOLESCENTS AND YOUNG PEOPLE RECEIVING MOLECULAR RADIOTHERAPY AT UNIVERSITY COLLEGE LONDON HOSPITAL

Deborah Morris, Sara Stoneham, Connie Peet. *University College London Hospital*

10.1136/bmjpo-2022-RCPC.H.2

Objectives This project aimed to identify the complex issues faced by teenagers and young adults (TYA) attending University College London Hospital (UCLH) for molecular radiotherapy treatments (MRT). UCLH specialises in treating TYA patients with cancer and is the national referral centre for MRT. Families often travel from afar for treatments and are then admitted to hospital and placed under radio-active precautions. A Health Needs Assessment (HNA) was introduced at UCLH so that health professionals could learn more about

their patients prior to admission and treat them more holistically. The HNA also aimed to combat the potential feelings of anxiety and isolation that some patients faced when undergoing MRT. This project analysed the information gathered in the HNA in order to understand the TYA experience more fully, and to look at the resources required to respond to the issues identified.

Methods This was a retrospective case note review of TYA patients who received MRT on a paediatric ward at UCLH over a 13 month period (after the introduction of the HNA; from January 2018 to February 2019). Each patient's HNA was reviewed in order to identify the issues picked up. Notes from the radiotherapy MDT were also reviewed in order to assess the resources needed to address any issues identified.

Results Over a 13 month period, 16 TYA patients or parents/carers completed the HNA prior to their admission for MRT. These patients had an age range of 12–21 and the mean age was 17 years. Psychological issues, such as stress, anxiety or poor mental health were reported in 31% of patients and in 38% of parents/carers. 12.5% reported an issue with nutrition, but only 6% mentioned concerns around missing school or education. 44% had financial concerns, such as loss of income surrounding prolonged ill health and repeated hospital admissions. When asked about other concerns, 25% were mentioned the isolation of the treatment, 13% were worried about the unfamiliar environment, 25% expressed concerns about the success of the treatment and 19% expressed anxiety around potential side effects. 5 of the 16 MDT discussions were available for analysis; of these, 40% of patients required referral for psychological support and 60% required signposting to financial supportive services. 1 TYA patient needed input from 4 different members of the radiotherapy MDT.

Conclusions This project provided an insight into the complex issues experienced by TYA patients and their families when they are faced with difficult diagnoses and require specialist treatments such as MRT. The HNA used by UCLH is a useful tool for beginning a conversation about these issues and in understanding a patient more holistically prior to their admission to hospital. The adolescents studied in this group experienced psychological issues and financial difficulties; they were concerned about being isolated during their treatments and worried about their long-term prognosis. Of the MDT outcomes that were available for analysis, a high proportion needed input from members of the radiotherapy MDT, supporting this approach to their management.

1866 WAITING FOR NEURO: DELAYED TRANSITION FOR ADOLESCENT EPILEPSY PATIENTS IN NORTHERN IRELAND

¹Matthew Sayers, ²Natalie Costello, ²Zelda Reynolds. ¹Northern Health and Social Care Trust; ²NIMDTA

10.1136/bmjpo-2022-RCPC.H.3

Objectives It is important that there are clear transition processes for adolescent patients from paediatric to adult care. This is particularly important in adolescents with epilepsy, as these patients are often on long term anti-epileptic drugs and require specialist follow up regarding occupational health, driving and pregnancy. This audit aims to assess the clinical characteristics of adolescent epilepsy patients awaiting transition to adult neurology care, to quantify the duration of