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THE DEVELOPMENT OF PAN-PROFESSIONAL PSYCHOEDUCATIONAL MATERIALS FOR YOUNG PEOPLE WITH POST-COVID-19 PRESENTATIONS: INTERLOCKING PDSA CYCLES

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Objectives Post COVID-19 presentations, including Long COVID in children and young people are new and little is known about the long term prognosis and course of these conditions. The NHS has lagged behind patient groups in the development and publication of resources. The following NHS England tasked project was initiated to produce, high quality, evidence based resources to meet the needs of children and young people and their parents/carers.

Methods Allied Health Professions, Nurses and Psychologists with established track records in providing therapeutic input for similar conditions were drawn together from five London acute hospital trusts. Using two interlocking PDSA (Plan, Do, Study, Act) cycles, we developed a set of six psychoeducational leaflets and used a live group format to pilot content for webinars. Feedback on the leaflets was sought from a PPI group of young people with long COVID, their parents and professionals working with young people with post COVID-19 presentations and related issues. Leaflets were edited by the Evelina London Patient Information Team and evaluated using an online 'Readability' tool. Pre and post session measures were gathered for each group session and adaptations made through an iterative approach until all topics were finalised. The leaflets were presented at the NHS England Editorial Board which comprised of professionals and patient representatives.

Results The text of the leaflets was found to be below a reading age of twelve years. Feedback on the leaflets content was overwhelmingly positive and appropriate adaptations were made. All group participants and their parents reported at least one area of significant change in terms of their overall understanding and confidence in managing their post COVID-19 symptoms. Participants requested additional information on how to communicate their needs effectively with schools.

Conclusions The first set of leaflets on Managing Daily Activities, Sleeping Well, Eating Well and Managing Emotions and Feelings have now been included in the new Children and Young People section of the *Your Covid Recovery* website. Further work is taking place with the Department for Education in order to ensure that advice given regarding school participation is consistent with their policies and guidelines. The live group content is currently with the support of NHSE being transformed into recorded webinars for publication on the above website. As our knowledge about the course of Long COVID, increases we need to ensure that this information continues to be relevant and rooted in the existing evidence base. While the majority of young people with Long COVID identify as White British, we must also ensure that the style and content of both the leaflets and webinars are culturally appropriate, relevant and accessible to all young people.

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IMPROVING THE TRANSITION OF PATIENTS FROM PAEDIATRIC TO ADULT MEDICAL CARE SERVICES AT GISBORNE HOSPITAL

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Objectives Transitional care involves the movement of '...young adults with chronic physical and medical conditions from child-centred to adult-orientated health care systems' (Bhakta *et al.*, 2000). Often the timing of this transition coincides with uncertainty for young people who '...undergo a change that is systemic and cultural, as well as clinical (Jin, Chen and Chien, 2016).'

The audit looks to assess the adequacy of preparation provided to Paediatric patients at Gisborne Hospital (GH), with the overall aim to improve the experience for the adolescent population moving into adult care and to engage young people in their ongoing disease management.

Throughout New Zealand, health inequalities between the Maori, indigenous, and the Pakeha, White European population exist and are recognised (Milne *et al.* 2012). Taking place in an area with a substantial Maori population, the audit had a secondary aim to identify whether discrepancies translated across to the readiness or support provided for our paediatric Maori patients.

Methods The 'Ready, Steady, Go' transition programme formed standards. Developed by Paediatricians from Southampton Children's Hospital, the tool highlights 8 main indicators of readiness for transition; knowledge, self-advocacy, health and lifestyle, daily living, education and work, leisure, managing emotions, and transfer to adult care.

Through retrospectively reading clinic letters at discharge from paediatric service, the audit evaluated how well areas were discussed by Paediatric clinicians at GH; areas were deemed as discussed if specifically documented within the clinic letters.

The cohort involved 26 patients, aged 15–18, seen between 2019–20 before discharge to adult care. Of these, 14 were male, and 12 were female. Ethnically, 12 were Maori, 13 European and 1 noted as Maori/European.

Results Knowledge was the best addressed area; knowing medication regimes and how to seek help if their condition deteriorated. Domestic situation was almost universally documented, with key relationships noted in 25/26 clinic letters. Again, self-advocacy, whether a child could be seen independently or understood shared decision making, was widely documented.

Certain areas of health and lifestyle were less well explored, with minimal documented discussion around drugs, alcohol or smoking, alongside sexual health or pregnancy advise. Managing emotions and where to seek help pastly, were other areas not extensively covered.

Conclusions Initiation of a similar transition programme was proposed to the department. Such an aid enables discussion around the more sensitive topics and thorough education of family and patient. It was also aim for a standardised approach to preparing our adolescent population, regardless of socioeconomic and cultural background.