Elizabeth molyneux prize

393 REDUCING PLASTIC WASTE IN PAEDS ED

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Aims/Objectives/Background Venepuncture and PVC insertion are common procedures in Children's ED and often include blood cultures. Opening a universal dressing pack (udp) including a plastic tray, sterile swabs, gloves and 2 plastic sterile field drapes (sfd) is common practice. Our department was making a huge spend on udp's. We aimed to determine if this was necessary and if we could reduce our plastic waste.

Methods/Design A sample of 8 doctors across all grades demonstrated their set up for both procedures. We replaced udp in the IV trollies with x2 sfd pack (sfdp). Information was disseminated via weekly staff brief. Trollies are restocked each night using attached flashcards which were updated appropriately. The use and costs of dressing packs in ED was determined for April-June 2019. We planned to compare this for April-June 2020.

Results/Conclusions All clinicians were opening a dressing pack for procedures but 87.5% only used the sfd and swabs. 100% discarded gloves due to inappropriate size and 100% discarded the tray. All staff adopted the new equipment with no problems identified. 3500 udps were being used in dept in 3 months. Udp v sfdp per item costs 32p v 8p, weight 65 g v 30 g. Due to CoVID-19 pandemic the number of ED attendances significantly reduced therefore costs were based on 2019 usage. In 3 months switching from udp to sfd would save £840 and 122.5 kg of refuse weight. Volumes of stocks were reduced from 0.05 m² to 0.01 m² for 50 udp v 50 sfdp which aids storage and restocking of IV trollies releasing staff time.

We demonstrated a significant reduction in unnecessary plastic waste while also reducing costs and need for storage and restocking whilst maintaining safe practice. This has been rolled out in the neighbouring Clinical Decision Unit with anticipation of being a permanent change in both areas.

396 TEAM TIME: AN ONLINE STRATEGY OF STORYTELLING AS PART OF REFLECTIVE PRACTICE TO IMPROVE STAFF WELLBEING WITHIN A PAEDIATRIC EMERGENCY DEPARTMENT DURING THE CORONAVIRUS PANDEMIC

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Aims/Objectives/Background *Team Time* was developed by the Point of Care Foundation in response to the coronavirus pandemic. It is a 45-minute reflective practice using storytelling. It provides an opportunity for people taking part to share recent experiences of their work in health and social care, focusing on participants' emotional and social response to their work. Unlike Schwartz Rounds, the audience is restricted in numbers (maximum 30), is drawn from a single department of a healthcare site rather than from across the organisation, is run and facilitated using virtual platforms, and relays stories from the recent (not distant) past.

Methods/Design Two facilitators already trained in delivering Schwartz Rounds (one PEM consultant from the department plus one Trust clinical psychologist) were given additional specific training for running *Team Time* in March 2020.

Six sessions between April and July 2020 were held. The formats of these sessions were as per guidance set by the Point of Care Foundation (UK).

A theme for each session was set in advance, with two storytellers invited and prepared in advance by the two facilitators.

Two storytellers related a five minute story each uninterrupted, followed by a facilitated discussion with the audience to share their own experiences and/or resonances to the stories told.

Standardised web surveys designed by the Point of Care Foundation designed to collate both quantitative and qualitative feedback were distributed by E-mail to all participants the same day.

Results/Conclusions Survey respondents n=40

85% strongly agreed that *Team Time* would help them work better with colleagues.

90% plan to attend *Team Time* again.

95% would recommend *Team Time* to colleagues.

92.5% felt that the sessions overall were either excellent or exceptional.

Qualitative feedback themes included: not feeling alone; the benefits of hearing perspectives of different roles; and the advantages of sharing honest feelings in a boundaried, reflective space.

HOME LIFE

NHS
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University Healthcare
NHS Trust

Difficulty at home can mean different things for different people. For example, there may be violence from the adults or other children towards you or other people in the home. There may be difficulties with money or having enough food and drink for everyone. There may be challenges with illness and disability. If you are facing any of these issues or something else, please talk to your health care professional.

Here are some organisations you could contact:

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action · help · advice

Help and support for young carers under the age of 18

runaway helpline
CALL 116 000
free • 24/7 • confidential

Support and advice for young people thinking of running away or those who have already left home

missing people
Registered Charity No. 1020419

Dedicated to bringing missing children and adults back together with their families

Shelter

Information for young people about leaving home, leaving care and renting for the first time

THE MIX
Essential support for under 25s

UK support service for under 25's. Information on sexual health, consent, mental health, drinks and drugs, housing, work, crime, travel

Young Brent
Foundation
youngharrow
foundation

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