4. COVID-19 (2020): Role of hand wash, respiratory hygiene and social distancing in infection prevention.

Coverage

- Organised events in 110 educational institutions.
- Involved over 10,000 students and general public.

Feedback The reflections of medical students from their participation:

‘Speaking and communicating to a crowd is much different experience from medical school setting’

‘Surprised at the amount of stigma, taboo and ignorance about menstruation’

‘Speaking about depression really made us connect with the audience’

‘The interaction with community has given us a new perspective of medical practice’

Future plans

1. Collaborating with other student bodies and NGOs to complement our work.
2. Aggressive outreach on social media platforms.
3. More structured schedule to balance academics and outreach activities.

175

SPARSH – A NOVEL APPROACH TO HEALTH EDUCATION. BY THE MEDICAL STUDENTS, FOR THE COMMUNITY: REACHING OUT, BEYOND THE CLASSROOM

Manukonda Garata Reddy, Vijay K Yelamanchili, Satyanarayana Murthy pusuluri. Pinnamanneni Siddhartha Institute of Medical Sciences and Research Foundation, Chinna Avutapalli, Vijayawada, Andhra Pradesh, India

10.1136/leader-2020-FMLM.175

SPARSH (Students of Pinnamanneni to Achieve Awareness and reach out Social and Sustainable Health) is a non-profit voluntary organization started by medical students of Dr.PSIMS &RF, Andhra Pradesh, India. Started by four students who wanted to raise health awareness in the community, nurtured by Dr PSN Murthy, it rose into a dynamic medical student body dedicated to raise awareness on basic health issues through outreach campaigns for the past four years.

Objectives

1. Raising awareness on specific health issues rampant but generally ignored.
2. Fanning the spark of leadership qualities and communication skills in medic students.

Themes

1. Menstrual hygiene (2016): Menstrual hygiene; Raising awareness on taboos and Issues regarding menstruation.
2. Breast Cancer (2017): Busting the myths on breast cancer and raising awareness about self breast examination; Mobilised mass hair donation for cancer survivors.
3. Depression (2018–19): Aim to create a stigma-free society for people with mental illness. On caring for loved ones and seeking help.
4. COVID-19 (2020): Role of hand wash, respiratory hygiene and social distancing in infection prevention.

Coverage

- Organised events in 110 educational institutions.
- Involved over 10,000 students and general public.

Feedback The reflections of medical students from their participation:

‘Speaking and communicating to a crowd is much different experience from medical school setting’

‘Surprised at the amount of stigma, taboo and ignorance about menstruation’

‘Speaking about depression really made us connect with the audience’

‘The interaction with community has given us a new perspective of medical practice’

Future plans

1. Collaborating with other student bodies and NGOs to complement our work.
2. Aggressive outreach on social media platforms.
3. More structured schedule to balance academics and outreach activities.

Occupational Health

176

LEADING THE DEVELOPMENT OF LOCAL CONTACT TRACING SERVICES ACROSS THREE NHS TRUSTS

Alice Palmer, Bernadetta Btari Adityani, Gabriella Clark, Jessica Mcindrie. Royal Cornwall Hospital, University Hospitals Plymouth Trust, Royal Cornwall Hospital, Royal Cornwall Hospital

10.1136/leader-2020-FMLM.176

During the COVID-19 pandemic, NHS Occupational Health services in Plymouth and Truro quickly recognised the need for accurate identification, monitoring and management of exposure to nCoV-19 virus in the workplace.

We had recognised several issues arising as the pandemic began to intensify. These affected a) the health and wellbeing of NHS staff exposed to COVID-19 in the workplace, b) patients, as high risk exposure increases the risk of transmission of the virus, preventing outbreaks within a clinical environment, protecting staffing levels and allowing healthcare services to continue.

A system of identification and assessment of staff and their risk from contact with COVID-19 was developed. Using this assessment, staff were advised on action, ranging from no additional action needed, to a swab with no isolation period to full 14 day isolation. There have been positive outcomes since the introduction of the system. At RCHT only 18% of staff whom have had contact with a COVID-19 positive patient or staff member have been required to self-isolate. This is a vast improvement over the potential 100% whom would have had to self-isolate were simple guidance of isolating after any contact followed without exploring the risk further.

By the end of April 2020, the contact tracing services in UHPT and RCHT were well established; the only local services in the country at the time. Public Health England (PHE) were kept informed of our policies and aided in some of the finer details. Multiple NHS trusts across the South West have started to implement similar systems working in close collaboration to ensure consistency across the region. Weekly regional meetings now take place virtually between occupational health services across the region, facilitated by the occupational health service at RCHT. The development of the service has left the participating trusts in a much better