

the pandemic changes and how this created an opportunity to address challenges. We evaluated patient and staff experience using specifically designed questionnaires.

On 56% of the days, the average time to discharge was less than 36 hours compared to 48 hours prior to relocation during COVID-19. 67% of cases were completed in less than 45 minutes. On 33% of days during the relocation period, all cases were in theatre before 09:15am compared to 20% prior to relocation. There were no HDU admissions and 7 postpartum haemorrhages (EBL <1000mls).

Overall positive patient feedback was obtained from the 17 completed questionnaires during the relocation. However, only 65% of women felt they were given adequate information about the birth of their baby and 53% about their postnatal recovery. 50% of trainees felt that their learning experience had improved with respect to performing ELCS.

This work has shown that challenges like the COVID-19 pandemic can present opportunities for innovative solutions to be developed and implemented at short notice.

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DOES SIMULATION TRAINING IN ANSWERING A BLEEP IMPROVE CONFIDENCE AND PERFORMANCE IN ON-CALL SITUATIONS FOR FY1S DURING COVID-19 RESPONSE?

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10.1136/leader-2020-FMLM.193

Background Several studies have shown that new medical graduates feel unprepared for their role as clinicians. In October 2019 Salisbury District Hospital (SDH) piloted a successful 'hold-the-bleep' simulation day for 5th year Southampton medical students. In March 2020, in response to COVID-19, medical students were given early registration. The majority of FY1s had not received or missed out on formal bleep training due to graduating early.

Methodology Over 2 days 8 FY1s were issued with a bleep for a half-day period, continuing normal daily tasks whilst being bleeped for phone advice or to assess a simulated patient. 4 clinical stations and 4 phone calls were designed to simulate roles of FY1s with SIM-Man simulating the patients. Immediate feedback was recorded and generic themes discussed at a structured session, discussing what went well or was challenging. Each FY1 completed a feedback for assessing confidence and wrote a reflective piece.

Results Feedback was qualitatively and quantitatively positive. All found the SIM session useful and would recommend it. 7 of 8 candidates had a numerical increase in confidence in managing and prioritising calls.

Conclusions and recommendations The stations addressed communication skills, prioritisation, clinical and practical skills, and drug prescribing. The improvement in FY1s confidence and skills is likely to lead to improved patient outcome and satisfaction. Faculty who role played, reported an improvement in the trainees' performance. These results are similar to those from Liverpool and previous bleep SIM sessions we held at SDH.

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RAPID ESTABLISHMENT OF A COVID-19 BIOBANK AT UNIVERSITY HOSPITAL COVENTRY AND WARWICKSHIRE (UHCW)

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10.1136/leader-2020-FMLM.194

Various hypotheses are currently explored regarding COVID-19 and its pathogenesis; however, the clinical spectrum of symptoms, severity and outcomes are not fully understood. Identifying how host response and co-morbidities impact disease presentation and progression are important to enable the development of treatments and predictive markers.

In March 2020, Coventry and Warwickshire Pathology Service began saving clinical samples from COVID patients for verification of new assays. Ethical approval was obtained to continue, thus providing a biobank for future collaborative research efforts. Challenges included; the need to establish an effective detection system for samples, the standardisation of procedures to enable timely processing, the organisation of DNA extraction and the storage of samples in an HTA approved facility.

Daily search routines were developed to generate lists in a standardised template, enabling staff to identify and retrieve samples quickly. Sample processing was centralised and managed by re-deployed staff. Given supply chain issues with RNA extraction consumables for automated platforms, a manual approach to DNA extraction was taken with the help of local university research staff. Finally, collaboration with the UHCW Arden Tissue Bank enabled the storage of samples, complying with all legislation and regulatory procedures.

As a result of the strategies employed, over 10,000 samples have been stored, with numbers continuing to rise. Clinical information has been sourced including; ethnicity, co-morbidities, ventilation, and patient outcome. This has enabled grouping of patients based on disease severity. Since multiple samples from single patients were saved, this has allowed for disease trajectory focussed projects.

Not only is the biobank providing samples for trust-led research, through Arden Tissue Bank, samples and ethics can be supplied to academic, commercial and charity organisations - both nationally and internationally.

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CAPTURING THE EXPERIENCE AND LESSONS FROM JUNIOR DOCTORS WORKING AT THE NIGHTINGALE NORTH WEST: A QUALITATIVE STUDY

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10.1136/leader-2020-FMLM.195

NHS Nightingale Hospital North West (NNW) was a new temporary hospital within the NHS designed to rapidly expand capacity to care for patients during the COVID-19 pandemic. Within 2 weeks, Manchester Central Convention