BACKGROUND: The postpartum period is a high risk period for unintended pregnancies which can be associated with negative outcomes for mother and infant. Effective contraception is important during this time and thus the AAP advises pediatricians to ask mothers about family planning by the two-month visit. Previous work has shown family planning screening can be implemented in a pediatric resident clinic, with residents providing referrals to needed services. Letter templates are being created, reviewed by PAC, and implemented in the EMR. Data on frequency of use and post implementation survey data as well as statistical analysis will be available in March. Medical providers often struggle to intervene on legal issues affecting patient’s health. Strengthening a medical legal partnership and making patient advocacy letters easily accessible allows physicians to more effectively address their patients’ needs. The next step is increasing access to and utilization of these letter templates in our community.

OBJECTIVE: To evaluate participants’ knowledge, confidence and attitudes on diversity and inclusion topics and satisfaction with the LEAD Program.

METHODS: In 2017-2018, IRB-approved, de-identified pre- and retrospective pre/post surveys assessed learner knowledge, confidence, attitudes, and program satisfaction. Analysis included descriptive statistics and two-tailed t-tests. To measure the impact on learners’ leadership and scholarship, we measured the number of workshop presentations by LEAD scholars at local, regional, and national meetings.

RESULTS: We had 13 participants (8 residents; 5 fellows) in the LEAD Program. 100% (N=13/13) completed the pre-survey and post-survey. 100% of participants thought the LEAD Program should continue to include residents and fellows and should spread to all GME programs at Stanford. There was a statistically significant improvement in participants’ self-confidence for all learning objectives. In total, participants presented 3 local, 2 regional, and 4 national workshops stemming from the LEAD Program.

CONCLUSIONS: The LEAD Program was successful in fostering leadership and promoting scholarship in diversity and inclusion. Future steps include expansion across further GME departments outside of Pediatrics, following long-term career outcomes of LEAD participants, and developing a concurrent mentor curriculum.

93. TEACHING RESIDENTS TO MITIGATE PREJUDICE
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Discrimination in the workplace is prevalent and while more residency programs are teaching residents to mitigate their own