

G33

TRAINEE ADVANCED NEONATAL NURSE PRACTITIONERS CAN USE THE SAME CURRICULUM AS PAEDIATRIC SPECIALTY REGISTRARS: EVALUATION OF THE RCPCH PILOT STUDY

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Aim To present the findings from trainee practitioners' evaluations and reflections on the usefulness and relevance of the RCPCH eportfolio.

Method A one year pilot of the RCPCH eportfolio and ASSET for evidencing trainee advanced neonatal nurse practitioners skills and knowledge acquisition while in training.

Student questionnaires were used to evaluate eportfolio and ASSET during the pilot. These were collated into themes: navigating the e portfolio and ASSET; ease of use; linking RCN advanced practice standards to the RCPCH neonatal skills; uptake of eportfolio as an ongoing record of clinical training. Additionally, a reflective account of the challenges of embedding the RCPCH eportfolio within an academic programme of learning.

Results **Navigating the eportfolio and ASSET:** After three initial workshops, trainees learned quickly how to navigate the system. Medical trainees were a source of on going education in the use of the system.

Ease of use There were challenges when linking the RCN standards to evidence, solutions were found but this could be improved upon.

Linking the RCN neonatal advanced practice standards to the Level 1 and 2 neonatal skills The use of a mapping grid helped the trainees to embed these into the portfolio of evidence.

Uptake of the eportfolio as an ongoing record of skills and knowledge acquisition All seven trainees have decided to continue with the eportfolio citing ease of use and a means of capturing their growth and development as a practitioner, including a clear record of ongoing competency for the NMC.

The review of the eportfolios and ASSET, for the purposes of assessment demonstrated that it was a robust mechanism to assess student performance. Additionally, the trainee practitioners could document the beginning mastery as a practitioner. It was possible to triangulate the eportfolio to the course documents such as the RCN skills log.

Conclusion The use of RCPCH's eportfolio and ASSET can evidence skills and knowledge acquisition for nurses and met the needs of the academic rigours of the programme with scope for further development.

G34

INTEGRATING ELEMENTS OF UNDERGRADUATE CURRICULUM LEARNING

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Rapidly advancing practice and recognition of nursing, midwifery and medicine as a vital interrelated workforce, implies a need for a variety of curricula opportunities. This project

addresses the challenge for healthcare educators to widen student engagement and participation through inter-professional education by creating learning environments whereby student interactions foster the desire to develop situational awareness, independent learning and contribution to patient advocacy.

Overall aim of this 'Feeding and Nutrition in Infants and Children' project is to provide opportunities for integrated learning to enable students to advance their knowledge and understanding of current best practice.

This Inter-professional (IPE) student-lead workshop was initially implemented in 2006–07 in collaboration with the Centre for Excellence in IPE, within the curricula of medical and nursing programmes.¹ Supported by the development of a student resource pack, this project is now being offered to Learning Disability nursing and Midwifery students since September 2014.

Methods Fourth year medical students, undertaking a 'Child Healthcare module', alongside nursing and/or midwifery students are divided into groups with three or four students from each profession. Each group focuses on a specific feeding problem that is scenario-based on a common real-life issue prior to the workshop and then present their findings/possible solutions to feeding problem. They are observed by both facilitators and peers, who provide constructive feedback on aspects of performance including patient safety, cultural awareness, communication, decision making skills, teamwork and an appreciation of the role of various professionals in managing feeding problems in infants and children.

Results Participants complete a Likert-scale questionnaire to ascertain their reactions to this integrated learning experience. Ongoing findings suggest that students evaluate this learning activity very positively and have stated that they value the opportunity to exercise their clinical judgement and decision making skills. Most recent comments:

'appreciate working alongside other student's/multidisciplinary team approach'

As a group students engage in this team problem-solving exercise, drawing upon their strengths and abilities to learn from each other. This project provides a crucial opportunity for learning and knowledge exchange for all those medical, midwifery and nursing students involved.

REFERENCE

- 1 Purdy J, Stewart M. Feeding and nutrition in infants and children: an interprofessional approach. *Clin Teacher* 2009;**6**(3)

G35

HEALTH CARE PROFESSIONALS' KNOWLEDGE AND ATTITUDES TOWARDS PAEDIATRIC PAIN IN ONE UK HOSPITAL

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Aims This study aimed to ascertain and compare the knowledge and attitudes of health care professionals in one UK hospital relating to paediatric pain.

Methods A cross-sectional survey was administered to a convenience sample. The *Paediatric Pain Knowledge and Attitudes Questionnaire*, a previously validated tool¹, was administered as an online survey using Survey Monkey®. Participants were asked to

respond to the survey items on a six-point Likert scale. Data were analysed using IBM SPSS Software Version 21.

Results A total of 96 clinicians responded to the questionnaire including doctors (n = 64), nurses (n = 27) and Operating Department Practitioners (n = 3). Overall participants scored more highly on attitudes (64.6%) than knowledge (63.7%). Participants scored the highest on sociology and psychology of pain (68.0%) (significantly higher than every other subscale) and lowest in physiology of pain (61.0%). No significant differences were found between doctors and nurses or between specialties. Participants who had either more than 50%, or 100% of their practice in paediatrics had better pain management knowledge and attitudes scores than those who had less than 50% or no paediatric practice.

Conclusions This study is the first to compare paediatric pain knowledge and attitudes across professional groups. Gaps in knowledge exist across professions and specialties. Nurses and medical staff have similar gaps in their knowledge and attitudes. There is a need to address these knowledge gaps and erroneous attitudes. Current methods of pain management education also need evaluating to ensure they are effective as possible.

REFERENCE

- 1 Twycross A, Williams A. Establishing the validity and reliability of a pediatric pain knowledge and attitudes questionnaire. *Pain Manag Nurs*. 2013;14(3): e47–e53

G36

USING REFERRALS FOR PSYCHOSOCIAL SUPPORT AS A QUALITY INDICATOR FOR AN EDUCATIONAL INTERVENTION

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Aims To assess the feasibility of referrals for social support as a locally designed Quality Indicator in the West Bank.

Methods Three quality indicators (referrals for social support, safe prescriptions and exclusive breast feeding at 6 months) were piloted to evaluate the success of a RCPCH supported Masters in Child Health (MACH) at Al Quds University. This MACH student collected data on the referral rate of children to a local psychosocial centre from her clinic population in Nablus and the data informed interventions.

Results In her reflection on the project DN wrote ‘after May I felt that there is something wrong because I advise people to go and I told the doctor working in my clinic to complete the referral form but the results didn’t improve. I thought I might need further help, so a friend working in the municipality as a social worker to go and to do home visits to these families and give me feedback’.

What emerged from the social worker was ‘people thought a referral to the Al Makhfia centre is just like a referral to the mental hospital, so even giving them a referral form they will not go there. The centre will not accept a patient without a formal referral, and didn’t do home visits. So my friend who was working with disabled children as a social worker, and already doing home visits as a follow up and treatment session, was the key to successful referrals’.

Conclusion Referrals for psychosocial support was sensitive Quality Indicator in this health system. Simply collecting data resulted in changes of behaviour at the clinic led by the MACH student and her conclusion at the end of the pilot was ‘I think that if we can arrange a day during the week or the month for the social worker to be with the team in the clinic, it will be very helpful to the patients and their families’.

G37(P)

AN ELEMENT OF COMPETITION CAN IMPROVE JOURNAL CLUB ENGAGEMENT

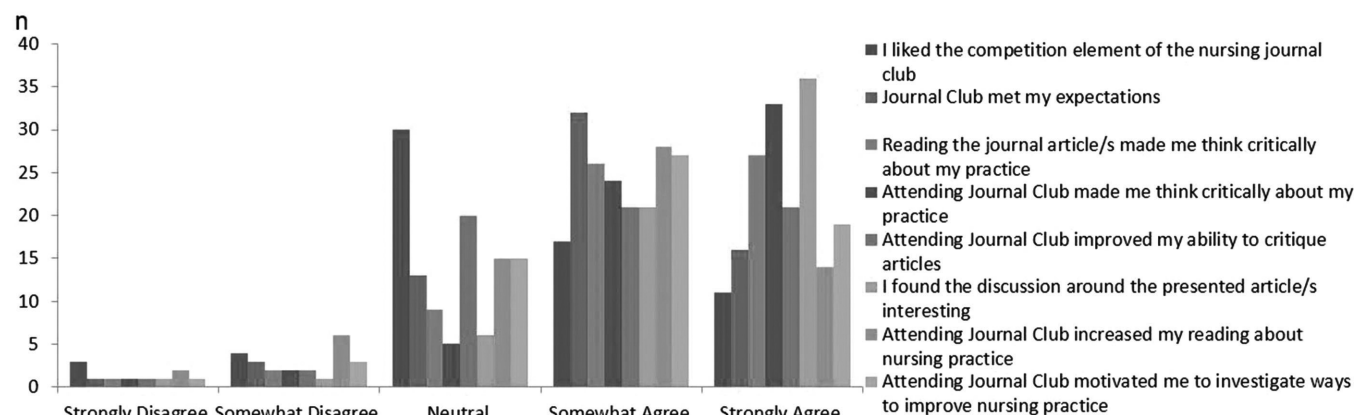
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Background Journal clubs (JC) can increase critical appraisal skills and aid in promoting evidence based practice.¹ Often, after an initial flourish, a JC’s popularity wanes.^{2,3} Innovative approaches to improving JC participation are required² but few have been described. In 2013, to increase nurse’s engagement with a hospital-wide nursing JC, a competition format was convened.

Aim To obtain an understanding of a competition elements impact on paediatric nurses JC engagement.

Method Twelve departments, of a dedicated paediatric hospital, were randomly assigned a month to present JC. Departmental nurses were supported to evaluate an article according to a



Abstract G37 Figure 1 Engagement by attendees with the nursing journal club (n = 65)