

address violations – especially in the paediatric intensive care environment.

REFERENCE

- 1 Nursing and Midwifery Council. The code: Standards of conduct, performance and ethics for nurses and midwives. NMC. London; 2008

G216

DEVELOPING NATIONAL GUIDANCE ON SPECIALIST AND ADVANCED PRACTICE FOR CHILDREN AND YOUNG PEOPLE'S NURSES

¹D Clarke, ²R Hollis, ³J Campbell, ⁴I Fairley, ⁵J Flaherty, ⁶C Gelder, ⁷A Houlston, ⁸A Jagger, ⁹K Krinks, ¹⁰F Smith, ¹¹R Tulloh. ¹School of Healthcare Sciences, Cardiff University, Cardiff, UK; ²Children's Cancer Services, Leeds Teaching Hospital NHS Trust, Leeds, UK; ³Diabetes Services, Royal Manchester Children's Hospital, Manchester, UK; ⁴Diabetes Services, Royal Aberdeen Children's Hospital, Aberdeen, UK; ⁵Unscheduled Care, Salford Royal Foundation Trust, Salford, UK; ⁶School of Nursing, University of York, York, UK; ⁷The Children's Hospital, Oxford University Hospitals, Oxford, UK; ⁸Children's Services, Calderdale and Huddersfield NHS Trust, Huddersfield, UK; ⁹Workforce and Education, Central Manchester University Hospitals NHS Trust, Manchester, UK; ¹⁰Professional Lead in Children and Young People's Nursing, Royal College of Nursing, London, UK; ¹¹Paediatric Oncology, Great Ormond Street Hospital for Sick Children, London, UK

10.1136/archdischild-2015-308599.210

Aims To explore what is meant by advanced practice in CYP nursing.

To clarify the distinction between advanced practice, and the roles of nurse specialist, advanced nurse practitioner and nurse consultant.

To promote the professional and educational guidance in this 2014 UK document.

Methods A review of the professional literature and a range of national and professional policy documents was undertaken in order to define and establish the competencies and standards for advanced practice in children's nursing, and recognise the value of specialist roles across the UK.

A group of expert children's nurses from a range of specialist and generic child health services, worked together to identify the distinction between advanced practice, and the roles of nurse specialist, nurse practitioner, and nurse consultant.

Results The guidance document developed through this project is directed at both commissioners and service providers. It promotes a shared understanding of what is meant by both advanced, and specialist nursing practice, alongside an explanation of the different roles and titles used by nurses and their employers. This is illustrated by the use of real life exemplar nursing roles and services.

The document sets out the characteristics of the robust clinical governance framework required to ensure safe and effective care when developing specialist roles and advanced levels of practice. This incorporates accountability and competence frameworks, and educational preparation.

Conclusion The development of innovative nursing roles, working at an advanced level of practice, requires a planned approach to the commissioning and development of services, and of the workforce that is able to deliver them. The guidance document to be discussed in this presentation brings clarity to the concept of advanced practice in child health nursing. It sets out the need for robust, flexible and accessible educational programmes, and the development of comprehensive career frameworks.

This presentation will explore the roles of advanced and specialist children and young people's nurses in the UK and promote the professional and educational recommendations of this key document.

G217

TRANSFORMING CHILDREN'S NURSING WITHIN A HEALTHCARE ORGANISATION THROUGH AN INNOVATIVE LEADERSHIP APPROACH

^{1,2}JC Manning, ^{1,3}J Coad. ¹Nottingham Children's Hospital, Nottingham University Hospitals NHS Trust, Nottingham, UK; ²School of Health Sciences, The University of Nottingham, Nottingham, UK; ³Children and Families Research, Coventry University, Coventry, UK

10.1136/archdischild-2015-308599.211

Introduction Nationally, high quality, translational research that has a tangible impact on lives and outcomes is demanded by service users, commissioners and research funders (NIHR, 2013). However, without strong leadership firmly embedded within health organisations the impact on children's nursing remains limited in reaching its potential.

Aim This presentation will critically review the experiences of employing an innovative leadership approach to progress children's nursing research and evidence-based practice (EBP) culture, capacity and capability within a children's hospital, situated within a large NHS Trust.

Methods Despite demonstrable commitment from the senior nursing management, local implementation of the nursing research vision remained under-developed. Consequently, a local strategy that engaged key stakeholders and PPI was devised during 2013/4 to operationalise the vision within the children's hospital. An innovative approach was employed to fulfil this multifaceted and diverse remit.

Results Outputs to date included identifying research areas that aligned to local and national service priorities; the appointment of a clinical-academic children's nurse; the implementation of a training programme in knowledge translation and scholarly activities; and a funded partnership between a senior children's nursing research leader/professor and the healthcare organisation. Opportunities have been sought with potential for national multi-centre studies with other specialist children's health settings. Post graduate students have been identified and supported.

Conclusion The strategy employed contributes to transforming the children's nursing research and EBP culture within a healthcare organisation in the UK through an innovative leadership approach. This visionary strategy will be shared with delegates with the rationale for appointments and support, and there impact on organisational culture, outlined. Challenges and successes will be discussed including early exemplars and high level impact results. The results and presentation will be useful for all delegates in supporting and developing the culture of nursing research within healthcare organisations.

G218

THE CONTRIBUTION AND IMPACT OF SPECIALIST AND ADVANCED CHILDREN'S NURSING PRACTICE TO CONTEMPORARY HEALTH CARE

¹C Gelder, ²J Campbell, ³D Clarke, ⁴I Fairley, ⁵J Flaherty, ⁶R Hollis, ⁷A Houlston, ⁸H Jagger, ⁹K Krinks, ¹⁰F Smith, ¹¹R Tulloh. ¹Leeds Childrens Hospital and University of York, Leeds and York, UK; ²Royal Manchester Childrens Hospital, Manchester, UK; ³Cardiff University, Cardiff, UK; ⁴Royal Aberdeen Childrens Hospital, Aberdeen, UK; ⁵Salford Royal Foundation Trust, Salford, UK; ⁶Leeds Childrens Hospital, Leeds, UK; ⁷The Childrens Hospital, Oxford, UK; ⁸Calderdale and Huddersfield NHS Foundation Trust, Calderdale and Huddersfield, UK; ⁹Central Manchester University, Manchester, UK; ¹⁰Royal College of Nursing, London, UK; ¹¹Paediatric Oncology, Great Ormond Street, London, UK

10.1136/archdischild-2015-308599.212

Aims To demonstrate that children's nurses working at a specialist advanced and consultant level can make a significant impact and contribution to the redesign, development and delivery of effective services for children, young people (CYP) and their families.

To develop a shared understanding of a flexible transparent career framework with commissioners, managers and nurses which enables advanced clinical practice and leads improved health outcomes for CYP.

Methods A group of expert children's nurses from a range of disciplines and specialisms collaborated to review national and professional policy guidance to gain consensus regarding the incremental development of specialist and advanced careers which are sustainable, add value and contribute to new interdisciplinary ways of working.

Real life nursing roles and services exemplars were used to illustrate innovative developments. These ranged from child specific acute care alternatives to A&E through to nurse led rapid access clinics for the assessment and diagnosis of long term conditions such as diabetes and also to clinical academic research roles which enable reciprocal practice and research synergy.

Results The guidance document created recognises that health outcomes for CYP in the United Kingdom are in many ways subordinate to those in comparable European countries. This led to recognition of the need for a fundamental review of child health services, and modernisation of the workforce for future service provision.

The importance of a flexible career framework which supports clinical and academic expertise developing in parallel has been highlighted as integral. The key attributes of specialist, advanced and consultant level practice are made transparent to support a planned approach to commissioning and developing services.

Innovative exemplars highlighted potential for improved patient experience, reduced admission rates and length of stay. Advanced practitioners challenge existing practice and work autonomously, educate others and build a research and evidence led care environment.

Conclusion This important guidance document demonstrates that children's nurses working at advanced levels of practice across a range of healthcare settings can lead the way to achieving excellence in health care and health outcomes.

G219

LOOKED AFTER CHILDREN'S EXPERIENCES OF NURSING IN A SOCIAL CARE CONTEXT

L Graham-Ray. *Safeguarding and Quality, Central London Community Health Care Trust, London, UK*

10.1136/archdischild-2015-308599.213

Looked after Children is a term introduced by the Children Act (1989) which refers to all Children in public Care, including those who may live at home with their parents but who are the subject of Care orders. There were 67,050 Looked after Children in England and Wales at 31 March 2012 (DfF 2012). This figure has been rising over the last few years. As Looked after Children's nurse I have become very interested as to why, and what it is about being a nurse, that makes a difference to Looked after Children and Care Leavers. I would like to understand some of the reasons why they are happy to see us and let us help them with their health issues. This study examines research what it is about nurses working in social Care that makes a difference to Looked after Children and Care Leavers health, but

perhaps more importantly what do Looked after Children and Care Leavers think about this and what do they say about it when asked?

G220

ABSTRACT WITHDRAWN

G221

EARLY HELP IN EARLY YEARS: PROFESSIONAL REVIEW OF A UNIVERSAL ASSESSMENT TOOL

T Redwood, S Neill, S Church, M Spencer. *Institute of Health and Wellbeing, University of Northampton, Northampton, UK*

10.1136/archdischild-2015-308599.214

Serious case reviews nationally have highlighted the need for child care services to improve communication between professionals, to focus more on the voice of the child than of the adults involved and to develop a consistent approach to assessment of risk. A universal assessment tool for use by all professionals involved with families (from pregnancy to 2.5 years of age) named "My Family Profile" was developed by a multiagency team to address these issues. Independent formal professional review of the early draft formed a key element in the development of this intervention.

Aim To discuss the importance of formal professional review during intervention design using the example of the development of a multiagency family assessment tool.

Method Focus group methodology was employed for the professional review stage in the development of our multiagency tool, as it provides a valuable opportunity to discuss, evaluate and question within a constructive environment. This professional review focus group aimed to ascertain the views of child care professionals on the structure, format and usability of "My Family Profile" prior to pilot testing in practice. It was conducted in April, 2014 with professionals representing both pilot sites: three midwives, three health visitors and two early year's practitioners. The focus group was audiorecorded and transcribed, then subjected to thematic analysis.

Results In total the four themes presented below (Table 1) were identified from the analysis:

Abstract G221 Table 1 Themes from the professional review

1. Information gathering and sharing
2. Child centred
3. Research in practice
4. Workload concerns and digital format

Findings were used to revise the structure and content of the tool prior to pilot testing. Each of the first three themes generated alterations or additions in "My Family Profile". However the fourth theme was an emerging concern of potential impact and as such is a recommendation prior to implementation.

Conclusion The findings indicate support from practitioners for the implementation of "My Family Profile". These findings demonstrate the value of using a multiagency professional review within intervention design and should be highlighted as best practice. It is important to acknowledge professional ownership is not only a part of the design process but potentially an aspect of professional engagement with "My Family Profile" in practice.