

were extracted or calculated using Chi Square or Fisher's Exact tests as appropriate.

Results Two reviewers screened a total of 1108 references. Ten cohort and two case-control studies using a plethora of nutritional assessments were included in the review. Postoperative infection complications reported were either combined or individual e.g. wound infection. Quality of the evidence was judged as low in the majority of studies, with two of moderate and two of very low quality. Direct comparison between studies was not possible due to clinical and diagnostic heterogeneity. Direction of effect on univariate analysis was suggestive of a relationship between undernutrition and postoperative infection complications.

Conclusion The lack of a consistently applied method of nutritional assessment, combined with small sample sizes, makes it difficult to draw strong conclusions. There is tentative low quality evidence suggesting undernutrition may be predictive of combined infection complications following surgery in children, but insufficient evidence to determine if this relationship persists when considering specific infection complications. Larger studies, using gold-standard nutritional assessment, and designed to investigate undernutrition with outcome are warranted to investigate this relationship further.

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G225(P) DOES WEARING A UNIFORM MATTER? THE IMPACT OF RESEARCH NURSES WEARING A UNIFORM WHIST SEEKING PARENTAL CONSENT TO RESEARCH TRIALS

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Background and aims In a regional Paediatric Intensive Care Unit (PICU) the research team have been recruiting to three multi-centre randomised controlled trials. The team were interested to explore parent's preference for the research nurses wearing a uniform whilst recruiting to these trials.

Method 62 questionnaires were given out to non-research PICU staff (nursing, administrative and medical staff). Multiple choice questions asked what they would prefer to see research nurses wearing when approaching parents about research. 24 questionnaires were given out to parents who had been approached about research trial participation in PICU. Multiple choice questions asked whether they would prefer to be approached for consent by a research nurse wearing a clinical nurse uniform, alternative uniform or their own clothes (pictorial representations given).

Results Parental questionnaire return rate was 67%. Responding parents favoured (62%) a uniform with reasons given including ease of identification, trust and professionalism. From the options provided, only 6% chose the 'own clothes' option. 32% reported no preference.

31% of parents felt that what the nurse was wearing was likely to have influenced their decision to give their consent, no

information was given as to whether this would be in a positive or negative way.

Staff questionnaire return rate was 73%. 67% preferred a uniform, 22% an 'own clothes' option and 11% reporting no preference.

Conclusion The results display a preference towards research nurses wearing a uniform, however there is no agreement as to what that uniform should be.

Further research would be needed to conclude whether the wearing of a uniform influences parental decision to consent for their child to participate in research trials and before any recommendations can be made for practice.

G226(P) CIRCLE: ONE WAY OF DEVELOPING INTERNATIONAL RESEARCH PRACTICE

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Aim Researchers and academics face many research imperatives ranging from generating income, undertaking high quality research, writing 5 star papers, developing a national and international profile through to undertaking international research. None of this is easy. This presentation aims to explore and reflect on the process and successes achieved so far by the founding members of a community of research practice – Circle.

Methods Although perhaps not an obvious academic setting, Circle was developed whilst walking. Many good ideas emerge when friends and colleagues are given the chance to meet, talk, breathe and reflect. We walked and talked across parts of Tasmania, New Zealand and the UK; these walks were separated by months, geography and competing commitments. The initial three walker-researchers co-opted colleagues also working with children and families into a group that would eventually become Circle. Together we mapped our research interests and the research priorities of our home institutions and countries and started to identify research topics which would mean that our international efforts would meet various performance objectives. We discussed funding opportunities and thought about creative ways of building sound international research based on modest resources. We identified ways in which we could capitalise on each others' strengths and expertise. We also identified ways of building strong co-authorship based on our joint research and common interests.

Results From tentative steps we have created a robust and growing Circle of researchers who are working together, providing advice, support and mentorship. Measureable achievements include publication of a textbook on nursing children, co-authored papers and co-presented papers, international supervision of research students, development of a website and completion of an international photo-elicitation study.

Conclusion Opportunities exist for international work but these require innovative thinking. Sharing ideas and supporting each other has widened and deepened our thinking about research and practice and created a sense of camaraderie. And we continue to walk together whenever we get a chance.