G227(P) | STARTING OUT ON A CLINICAL ACADEMIC PATHWAY: THE EXPERIENCE OF A NEWLY - OUALIFIED NURSE

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Aim The development of clinical academic careers should continue to focus on both clinical and academic work, rather than pursuing one at the expense of the other. What remains a challenge is the articulation of new roles owing to the lack of clarity and shared appreciation of what they are and what they do. As these are relatively new roles, a shared understanding of the activities that clinical academic post holders might undertake have yet to be really clarified. The aim of this work is to reflect upon the experiential learning of a newly - qualified nurse and novice researcher. The focus is on the positive impact of research training on clinical development and vice versa.

Methods A review of the current literature on the topic added to my personal reflection on the benefits and challenges of undertaking a clinical academic career.

Results The literature suggests a lack of clearly defined clinical academic career pathways for nurses during the early stages of their career, which is a key recommendation of the Association of UK University Hospitals (2012). As a result of this, there is a paucity of newly - qualified and junior nurses embarking on a clinical academic pathway. Reflecting on my own experience soon after qualifying of combining a research role within a large research team with clinical practice, there are great benefits to developing both roles early in a career, although there can also be some challenges, one example being the time pressures of jug-

Conclusion From my experience, I will discuss suggestions to help novice nurses participate in research activity and how to address some of the challenges I have faced, sharing real examples of the benefits. This pathway has been highly dependent on the collaboration between health services and higher education institutions, with support provided from both. I will discuss my support needs as a less experienced nurse juggling two multi-faceted roles. The literature and my personal experience indicate that there would be great benefits to patients, the nursing workforce, and academic and health institutions if more nurses step on to a clinical academic pathway earlier in their career trajectories.

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DOES INTEGRATION MAKE A DIFFERENCE TO THE LIVES OF CHILDREN WITH A DISABILITY?

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Aims The Integrated Children's Centre provides care, treatment and leisure activities for children with disability and their families under one roof. The aim is that health, social care and the voluntary sector work together to ensure disabled children and their families are supported to participate in valued childhood experiences and have access to the same range of opportunities, life experiences, community services and facilities as other children and their families.

Methods A two year qualitative study with a mixed-method design which included focus groups, interviews and questionnaires was undertaken. Data was gathered from parents/carers and multi - professionals to develop an understanding of what difference an integrated model of care makes to the child with disability and their family.

Results • Increasing skills, knowledge, attitude and behaviour

- -Information 'hub' provides improved access to timely, accurate information across networks
- Families better informed resulting in increased skills and confidence
 - -Meeting parents needs at earlier stage
- Increased staff skill and understanding to deliver family centred care
 - Delivering a holistic approach
 - Meeting the needs of the whole family
- -Formal and informal support for siblings resulting in positive impact on family life
 - -Change in culture to staff working practice
- -Developing a seamless model of care for all levels of need/

• Access to leisure and play

-Increased opportunities for children with a disability to develop, explore and have experiences equal to that of their mainstream peers

- -Positive impact on child's clinical care
- -Increased and improved life skills, confidence to attend community groups
 - Engagement and Empowerment
 - -Young people have a say and influence service development
 - -Parents supporting other parents formally and informally
 - -Active, engaged and empowered parent groups

Conclusion The need for an integrated model of care for children with disability and their families is evident. The positive and beneficial outcomes seen from children/young people and their families and professionals at the Centre, has led to strategic change for children's centres locally and service model is seen as a best practice exemplar nationally.

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WHAT MOTHERS DO WHEN THERE IS A CHILD WITH AUTISM AND YOUNGER SIBLINGS IN THE FAMILY: THE IMPLEMENTATION OF THE FINDINGS OF A DOCTORAL STUDY, INTO A HEURISTIC FOR THE CONTINUOUS IMPROVEMENT OF SERVICE USER FAMILY EXPERIENCE

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Aim The purpose of this abstract is to;

- Present the results of a qualitative research study exploring the experiences of mothers of children with autism and other younger siblings,
- Present the conceptual framework emerging from the results of this research study, which have informed a heuristic, values based model for health and social care service delivery improvement to families raising children with autism and other continuing care needs,
- Introduce this children and young people's rights and values based model, in terms of it's implementation, in the form of a new charitable, membership organisation (Parent Action), which is being developed in Northern Ireland.

Methods In the doctoral research study which is the subject of this abstract, Interpretative Phenomenological Analysis (IPA) was used as methodology and method to explore the experiences of six mothers in Northern Ireland.