Abstracts

less accurate with a mean difference of ±22μmol/l and ±29μmol/l respectively, if SBR is repeated within an hour of TcB.

Recommendation All infants should be monitored routinely for the development of jaundice & be evaluated for risk factors. Excluding high risk neonates, a pre-discharge TcB should be performed on all neonates & be interpreted + plotted on nomogram according to the infant’s age in hours. Appropriate follow up & further testing may be indicated depending on the infant’s risk designation on nomogram. (Recommendation 3.0, 6.12, AAP)¹

P143 ‘WHAT MATTERS TO YOU’ - A STAFF ENGAGEMENT INITIATIVE

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Background High levels of staff engagement lead to better patient outcomes and better use of resources, higher patient satisfaction, with more patients reporting that they were treated with dignity and respect.¹

Aim
- To organize a ‘What Matters to You’² events in department of Paediatrics of both Daisy Hill Hospital and Craigavon Area Hospital, SHSCT
- To encourage more meaningful conversations between senior managers & front line staff.

Method
- Establish a multi-disciplinary project group
- Arrange a ‘What Matters to You’ (WMTY) event close to the workplace
- Developed a short questionnaire & event posters
- Invite all Paediatric staff in two hospital sites
- Invite Trust senior management team to come and talk to staff and listen to what matters to staff.
- Encourage staff to speak openly about ‘What matters to them’, what they feel ‘they can do’ and discuss ‘what others can do’ to improve staff & patient experience
- Feedback to be used to drive quality improvement agenda

Results
- Two ‘What Matters to you’ events was organized during June 2018 on both hospital sites
- Informal coffee morning with group discussions
- Over 50 multidisciplinary staff attended across two sites and openly discussed matters important to front line staff. They also completed a short questionnaire
- Senior management team including Medical–Director, Associate Medical–Director, Assistant Director of Children services attended.
- All questionnaires collected and analyzed.

Outcome and impact Following Five Key themes identified & subsequent improvement actions taken:
  1) Improved learning and working environment
  2) Work life balance
  - Supporting flexible working
  - Term time applications
  3) Patient care and experience
  - New children’s wards on both hospital sites have modern patient–care facilities & improved staff resources
  - New ‘Welcome Pack’ introduced for all in-patients to paediatric ward
  4) Recognition, being valued and supported
  - Staff welcome & Congratulations initiative
  - ‘Hello My name is’ section started in the Paediatric Newsletter
  - ‘Learning from excellence’ & ‘Staff of the Month’ projects planned
  5) Communication and team working
  - New Paediatric Newsletter developed with staff
  - Senior Safety walks implemented
  - ‘What Matters to You’ events

Conclusion
- The ‘What Matters to You’ conversation is a simple concept that enables discussion to make real improvements to staff and patient experience.
- Senior Managers to consider ‘WMTY’ conversation findings and develop ‘Joy at Work’ agenda

REFERENCES
1. Review of Staff Engagement and Empowerment in the NHS 2014

P144 THESE HIPS DON’T LIE: A COMPLETED AUDIT OF HIP SURVEILLANCE AMONG CHILDREN WITH CEREBRAL PALSY

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Introduction Cerebral Palsy (CP) is the most prevalent cause of physical disability affecting children in developed countries with an incidence of 2/1000 live births.¹ The risk of hip displacement increases with increasing severity of spasticity with up to 75% of those with spastic quadriplegia having hip displacement.²,³ The intensity of screening increases with increasing gross motor function classification score (GMFCS). Aims The aim of this re-audit was to improve hip surveillance among children with CP following a previous audit in October.

Intervention A multidisciplinary meeting resulted in a single set of nationally and internationally approved guidelines being approved for introduction: Cerebral Palsy Integrated Pathway, Scotland (CPIPS). A pro forma for clinical visits was introduced for patients with CP with a single page pictorial guide to simplify the use of these guidelines were added to this. A standard of 90% was set.