Abstracts

less accurate with a mean difference of $\pm 22\mu\text{mol/l}$ and $\pm 29\mu\text{mol/l}$ 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)\(^1\)

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**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
- Regular learning events planned with staff throughout the year
- Learning and development section started in the Paediatric Newsletter
- Shared Learning section developed on trust Intranet

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

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**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).\(^1\)

**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.