British Association of General Paediatrics

1629 PRIORITIES FOR RESEARCH IN CHILDREN ACROSS THE UK AND IRELAND

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Background The need for research priorities for UK child health was highlighted by the RCPCH's report 'Turning the Tide'. The General and Adolescent Paediatric Research Network in the UK and Ireland (GAPRUKI) was set up in 2016 and aims to bring together general paediatricians around the UK and Ireland to develop research ideas and protocols and deliver multi-centre research alongside existing networks such as the NIHR Clinical Research Network (CRN).

Objectives To undertake a research prioritisation exercise based on gaps in the evidence that can reliably be delivered across the UK and Ireland.

Methods This study was carried out in four phases using a modified Delphi survey. The first phase asked for suggested research priorities: 'Thinking about your practice in the field of general paediatrics, both acute and in outpatients, what are the important research questions that need addressing?'. The second phase developed and ranked these suggested priorities (combining duplicate questions). The third phase refined the priorities and the final phase agreed on which were the greatest priorities (using the Hanlon Prioritisation Process (HPP)).

Results 61 out of 92 GAPRUKI members responded to the first round (66%), submitting 250 questions. Members were made up of general paediatric consultants, trainees, nurses and research personnel in the UK and Ireland. All participants worked in roles where research in children was relevant to their practice. For stage 2, GAPRUKI had grown to 103 members, of which, 61 responded (60%) ranking 92 questions in the second Delphi survey. The mean scores for these questions ranged from 3.13 to 5.77 (Likert scale of 1–7 where 7 = essential priority and 1 = not a priority). In stage three, 92 priorities were reviewed and refined by 23 members who attended a face the face meeting in September 2019. In the

final stage, HPP was applied and 14 priorities were identified and ranked. The ten highest priority areas are shown in the table with the Hanlon rank as well as the Delphi rank after stage 2 for comparison.

Conclusions Research priorities for child health in the UK and Ireland have been identified using a robust methodology. The next steps are for studies to be designed to address these priorities. Once studies are funded, GAPRUKI will work alongside the NIHR CRN to deliver these studies across centres in the UK and Ireland.

British Association of Perinatal Medicine and Neonatal Society

1630 IMPROVING DOCUMENTATION OF CENTRAL LINE INSERTION IN THE NEONATAL INTENSIVE CARE ENVIRONMENT

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Background In 2018 a national safety alert was issued after 3 cases of intraperitoneal extravasation of parenteral nutrition fluid occurred in preterm infants using Vygon double-lumen umbilical venous catheters.

The British Association of Perinatal Medicine (BAPM) subsequently released a practice framework addressing aspects of insertion, on-going use and care of central lines in the neonatal setting to standardise and improve central line care nationally.

After a local incident of abdominal TPN extravasation following UVC migration, a review of patient notes on our level 2 neonatal unit showed documentation was not meeting all the new BAPM standards and so an improvement programme was introduced.

Objectives To review central line documentation, against BAPM standards, after implementing an educational programme and procedure sticker.

Methods Two changes were introduced at the start of the study period:

- An information poster containing details of medical and nursing responsibilities was created and displayed in a prominent position in the Neonatal Unit.
- A procedure sticker for patient notes was designed. It contained 17 important data points, each included after consensus discussion between senior neonatal team members and after consulting the BAPM framework.

All babies (n=11) admitted to NICU and requiring central lines over a six month period (January to June 2020) were eligible for inclusion. Data was available and collected from 10 (91%). Medical notes were reviewed and relevant information extracted to evaluate compliance with BAPM standards and whether the 17 specific data points were recorded, and whether a procedure sticker had been used.

Results Over the 6 month period 10 patients had 16 central lines inserted.

A sticker was used in 10 cases (63%) and resulted in significantly better data completion (184/187 data points complete vs 47/85, 98% vs 55%, P value <0.01).

Abstract 1629 Table 1

Hanlon Rank (n=14)	Research area	Delphi Rank (n=92)
1	IV bronchodilator use in acute asthma	4
2	CPAP vs HFOV in bronchiolitis	1
3	Prednisolone use in viral wheeze	13
4	Inhaled corticosteroid use in childhood asthma	24
5	Use of rapid molecular bedside tests in febrile children	7
6	UTI sampling methods - acceptability to parents	74 =
	UTI sampling methods - accuracy	79 =
7	Constipation clinic delivery model	11 =
	Constipation clinic location of care	61 =
	Constipation clinic set-up	85 =
8	Paediatric clinic delivery in primary care	14
9	Medical treatment of reflux	17
10	Constipation medical treatment	47