

strategies for reducing the risk of these and the risk areas of neonatal nursing practice. It is recommended that risk areas must determine in care of neonatal for reduction of malpractice. The standard of care must describe to promote quality assurance in neonatal setting, special training, skill and knowledge nurses must work in neonatal care.

1884 PARENTS' EXPECTATIONS AND SATISFACTION IN PEDIATRICS WARDS

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Objective The aim of this study is to investigate the expectations of parents about their child's care, the effects of care practices on parents' satisfaction and the relationship between the expectation and the satisfaction.

Design and Methods The research was implemented by using face-to-face interviews with the 256 parents of children at the age of 0–18 years in pediatrics clinic by means of two questionnaires. Parents completed one questionnaire immediately after their child's admission and the second after hospital discharge.

Results As a result mothers are mostly satisfied with the approach of doctors and all their expectations except caring about children's home routines are satisfied by nurses. Supportive approach of health care personal adds a big deal to satisfy parents' expectations.

Conclusion Keeping communication channels open, answering their questions and giving the best care available are respective ways to catch better standards in health care.

1885 FROM FAILURE TO SUCCESS - A CHILD PROTECTION INITIATIVE

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Background and Aims As for all child-health professionals, knowledge of safeguarding/child protection (SCP) is a key role of PICU nurses. A trust-wide audit showed deficiencies in knowledge of SCP processes in our PICU-lead centre, despite standard training. We describe the institution of a bespoke training package to address this.

Methods After a 2008 audit showed 65% compliance with SCP documentation, an internal lead nurse for SCP was appointed (CF) and lead a Transformation project entailing a series of bespoke SCP Study Days training ALL staff to Level-3 Child Protection, (recommended NHS London), on-going bi-annual updates, regular SCP information sharing and mandatory SCP induction for new starters.

Repeat audits in 2010 and 2012 are reported, together with further qualitative questions (2012).

Results 30/90 PICU nurses completed each questionnaire. Repeat SCP audit showed increased compliance with SCP processes 65% (2008), 90% (2010) and 94% (2012) with 100% aware of correct SCP documentation.

All staff now feel supported caring for a child with SCP concerns, and able to suggest areas for improving practice. Consultant Intensivist & lead social worker were not always identified as people who must be notified.

Conclusions We report increased SCP awareness on our PICU after a lead-nurse transformation project, with nurses now confident managing CP cases, and feeling SCP is well-managed. However, further

improvement could be made in nurses interaction with the Hospital Social Care Team and further staff-support when caring for children with SCP concerns would be appreciated - especially when nurses inform parents of SCP referral.

1886 PERCEPTIONS OF FORMALIZED CARE CONFERENCES IN A NICU

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Background Implementation of family-centered care (FCC) involves a culture change in relation to nursing structure and method and have great influence on both the physical and psychological environment. Literature shows a connection between physical layout and FCC and a movement of the balance of power and the communication between parents and staff, when the principles of FCC are conducted. The challenges for staff has many facets, ranging from being a guest in the room, to be monitored in action and skills to use appreciative communication. Collaboration and communication with the parents is decisive.

Aim To explore the perception of formalized care conferences and possible increased parental satisfaction and wellbeing.

Methods Structured interviews with mothers, special "Go-karts" and journal audits on done formalized care conferences.

Results Our survey showed overall a great deal of parental satisfaction but a big difference in the perception of the conferences between staff and mothers. In spite the staff ranked the conferences "formalized and performed", the mothers didn't experience the conferences like that - mainly because the majority of the conferences took place nearby the child and randomly. The mothers had a desire for more equal presence to communicate freely.

Conclusions Despite great insight, tools and understanding of the importance of the formalized care conferences, is it difficult for the staff to carry out the conferences as intended. This has revealed the necessity of illuminate the barriers and challenges staff experience in planning and conducting formalized care conferences, which has led to a new project just started.

1887 WHAT TO DO WHEN THE ALARM BELL RINGS?

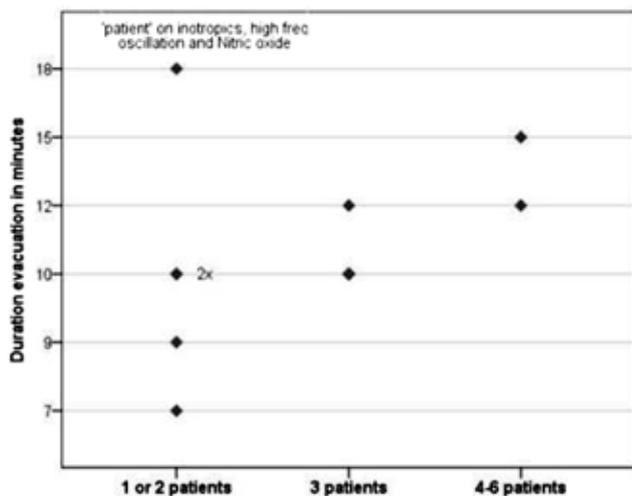
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Background and Aim A neonatal intensive care unit (NICU) is a high risk unit for a fire outbreak. To prepare employees for an evacuation they are trained. Here we describe the evacuation drills performed.

Methods Every year a minimum of four evacuation drills are performed at the NICU of the Erasmus MC- Sophia Children's Hospital, Rotterdam. Our NICU consists of 3 separate units. Dolls are used as simulation patients. After each evacuation drill members of the workgroup and participants provide feedback on the effectiveness of the drill.

Results Since 2008 12 evacuation drills were held for a total of 68 caregivers, (3 to 9 per drill) and 4 workgroup members. The scenarios dealt with fire outbreak (n=9), flooding (n=2) and smoke (n=1). The number of dolls used during evacuation was 1 to 6. The median time to complete evacuation was 10 minutes (range 7 to 18 minutes). The outlier of 18 minutes related to a 'patient' whose caseload was high (see Figure). In 9 of the 12 drills the alarm bell rang; in two cases nobody in the other units responded.



Abstract 1887 Figure 1

Conclusions The workgroup felt it necessary to improve the drills by using colored vests to single out participants in the drill, wearing goggles mimicking poor visibility, and a flowchart demonstrating stepwise evacuation. Participants felt it was useful to practice evacuations.

1888 EXPECTED OUTCOMES AS FACILITATORS IN EVALUATING SOLUTION OF NURSING DIAGNOSIS "ANXIETY"

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Aim Research was performed as descriptive. It was intended to determine the effect of expected outcomes on decision making through the solution of "anxiety" as a nursing diagnosis.

Method The sample were composed from 50 mothers of child with cancer. Data were collected with Care Giver Assessment Form. "Anxiety" were determined as a nursing diagnosis for mothers. 5 NIC activity group were used for solution of diagnosis. 9 expected outcomes were determined for the evaluation of solution. All outcomes were evaluated in stages of "How many times did they target", "Did we have expected results?" and "Did we solve the problem?" At the end of evaluation we can say "The problem solved" or "It is still going on."

Results 37 of 50 mothers had anxiety. Expected outcomes were "recognize own anxiety and express coping methods, use effective coping methods, express positively about reducing stress, express activities on face and body as signs of reducing stress, express increase concentration and reliability in thinking, express increase in problem solving process, express increase in self confident, increase for environmental interest, decrease in pulse and blood pressure through normal values". The problem were solved in different time interval in different mothers by the help of outcomes. All outcomes targeted once for 37 mothers. We couldn't reach the targets for five mothers so "anxiety" were solved for 32 of mothers completely.

Conclusion Expected outcomes facilitate the decision making about solution of nursing diagnosis effectively.

1889 HAND HYGIENE ADHERENCE AMONG HEALTH CARE WORKERS IN CAIRO, EGYPT

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The purpose of this process improvement project was to help guide a medical center in a low income country, Egypt, to reduce the incidence of healthcare associated infections by improving hand hygiene practice among its healthcare workers. The goal was to increase hand hygiene by utilizing a strategic educational plan for HCWs using the WHO's guidelines of "5 Moments of Hand Hygiene" (WHO, 2009).

The project was conducted to increase compliance in healthcare workers' hand hygiene in an intensive care unit. The pre-observation audit identified that 42% of physicians and 71% of nurses performed hand hygiene - Moment 1 - before touching a patient. The post observation audit identified that 53% of physicians and 83% of nurses performed hand hygiene - Moment 1-before touching a patient. Nurses were observed performing 193 opportunities of hand hygiene during Moments 1-5. In all areas, nurses maintained or improved their hand hygiene practices following the World Health Organization's "5 Moments of Hand Hygiene." Subsequently, the one-on-one education, Moment 2 - before clean/aseptic procedure practice improved from 0% to 100% adherence. One-on-one education on hand hygiene using "5 Moments of Hand Hygiene" among healthcare workers in an intensive care unit proved to be a successful strategy for improving hand hygiene compliance.

1890 CHILDREN, THE FUTURE OF NURSING. A STUDY ABOUT CHILDREN'S PERCEPTIONS OF NURSES' ROLE

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Background Nursing shortage is a major problem. Strategies have been adopted to contrast it. One is to increase the appeal of nursing profession to young people, to increase the number of new nurses entering the profession. No intervention has considered children in primary school -the period of life when children start fantasizing about what to do when they grow up- as possible target of an information campaign about Nursing.

Goal To investigate what perception children have of Nurses and their propensity to become a Nurse when they grow up.

Methods Cross-sectional study. Primary school 5th graders (age 10) were asked to answer a 6-item questionnaire and to draw a Nurse.

Results 245 questionnaires and drawings were collected. 60% of children consider the Nurse as the one who "takes care" or "helps" sick people, while 23% say Nurse "helps the doctor". 28% drew a Nurse with a syringe. Only 8% represented a Nurse talking with patient. Many of the drawings representations seem influenced by stereotypes: red cross on the uniform (61%), female nurses with starched white hat, skirt and heels (25%). 17% of children state they want to be a Nurse when they grow up; of them 63% are girls.

Discussion The majority of children have a correct idea of Nurses' role, although their image is influenced by stereotypes. Unexpectedly, 1/6 children think of becoming a Nurse. An educational campaign about Nursing directed to primary schooler may correct wrong stereotypes about Nurses and encourage children interested to nursing to cultivate their dream.

1891 DISEASE COURSE AND SELF-REPORTED DAILY LIFE EXPERIENCES OF YOUNG ADULTS WITH JUVENILE IDIOPATHIC ARTHRITIS THROUGH ADOLESCENCE

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