Methods A prospective observational study was performed using a repeated measures design in children from 3–17 years in two intensive care and high-dependency units in Ireland. Inter-rater reliability was tested among nurses using linearly weighted kappa. Cronbach α was applied to test internal consistency of the COMFORT-B scale and concurrent validity involved comparing COMFORT-B with the FLACC and Numeric Rating Scale score of nurses.

69 paired nursing assessments to test the interrater-reliability of the COMFORT-B scale was performed. With a high inter-rater-reliability of Cronbach 0.87, single nurse observations were commenced of the COMFORT-B, NRS and FLACC/self-report scores at specific four-hourly intervals over the first 48 h of each admission.

Results Data in 19 patients (age 3 to 17 years) was collected for the pilot study. Initial compliance of 4% increased to over 80%. Interrater reliability between COMFORT-B, FLACC and NRS remained high throughout the study.

Conclusion The COMFORT-B is suitable for use in children and adolescents from 3–17 years.

PO-0867 WITHDRAWN

Nursing – Neonatal Brain and Development

PO-0868 NEUROMONITORING; HOW TO TRAIN YOUR NURSING STAFF

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Background and aims Neuromonitoring, using amplitude-integrated Electroencephalography (aEEG) and near infra-red spectroscopy (NIRS), is common practice on our Neonatal Intensive Care Unit (NICU). The quality of the registration depends on the application of the aEEG-needles or hydrogel electrodes and the NIRS-pad, handling the equipment and interpretation of the registration.

Incorrect placement of the electrodes (too close to each other) by untrained nursing staff can lead to a registration full of artefacts, which may be interpreted as epileptic events or epileptic events may be missed. The correct interpretation of the aEEG patterns has a complex learning curve.

Method An e-learning course about monitoring the neonatal brain was developed to ensure that nurses are able to learn at any time, at any place on any computer. The hospital provided an e-learning team. The e-learning course is located at a virtual learning environment which every member of the hospital staff has access to.

Results We developed an e-learning course which provides an interactive teaching tool to learn about the near infra-red spectroscopy (NIRS) and four different aEEG monitor devices. Quizzes are included to practice how to interpret the aEEG recordings, which is essential in evaluating the monitoring of the neonatal brain.

Conclusion E-learning is an interactive learning tool which will enable the staff to keep their skills up to date in using different NIRS- and aEEG monitors and will allow correct interpretation of the aEEG recordings.

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