

1ST PNAE ON PAEDIATRIC NURSING

OP01

QUALITY OF LIFE OF CAREGIVERS' OF CHILDREN WITH CONGENITAL HEART DISEASE IN SURGICAL SPECIALTY HOSPITAL – CARDIAC CENTER KURDISTAN REGION/IRAQ

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Introduction: The issue Congenital Heart Disease implies all structural abnormalities of the heart since birth. Congenital Heart Diseases it is the most common group of structural malformations in children. The incidence of CHD in children is approximately 5–8 in 1000 live births. And it is accounting for 70–80% of all pediatric heart disease.

Purpose: The aim of the study is to assess quality of life of caregivers who have children with congenial heart disease in Surgical Specialty Hospital – Cardiac Center in Erbil city Iraq.

Material - Methods: Descriptive correlation design was carried out in Surgical Specialty Hospital – Cardiac Center in Erbil city from first of July 2009 to the end of September 2010. A purposive sample of (200) caregivers of children with congenital heart disease were selected. The questionnaire consists of three parts, (socio-demographic characteristic of caregivers and their children, and standardized QoL questionnaire from WHO 1998. Data were analyzed by Excel and SPSS version 17.

Results: The findings of the study indicate that the caregivers had been affected in all domains of quality of life and there is a significant association between socio-demographic characteristics (main caregivers, age, marital status, occupation, residential area, socio-economy and severity of disease) and the quality of life domains, but there were no association between years of education and quality of life domains.

Conclusion: The findings indicate that caregivers had been affected in all domains of quality of life.

OP02

PARENTS' EXPERIENCES OF LIVING WITH A CHILD WITH A LONG-TERM CONDITION: A RAPID STRUCTURED REVIEW OF THE LITERATURE

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Introduction: Living with a child with a long-term condition can result in challenges above usual parenting

including illness specific demands such as maintaining treatment and care regimes, social and financial constraints and maintaining family relationships. Understanding parents' experiences and perceptions of living with a child with a long-term condition has the potential to foster better understanding about the impact of the child's condition on the family. This may lead to greater parent-professional collaboration in relation to managing the child's condition.

Purpose: To critically evaluate and summarise findings from research that has explored parents' experiences of living with a child with a long-term condition.

Material - Methods: A rapid structured review was undertaken for the period January 1999–December 2009 in accordance with the United Kingdom Centre for Reviews and Dissemination guidance for undertaking systematic reviews. Key health and social sciences electronic data bases and relevant health journals were searched. English language publications describing parents' experiences and perceptions of living with a child with a long-term condition were included. Thematic analysis underpinned data synthesis. Quality appraisal involved assessing each study against predetermined criteria outlined in the Critical Appraisal Skills Programme.

Results: Thirty-four studies met the inclusion criteria. The impact of living with a child with a long-term condition is temporally related; dealing with immediate concerns following the child's diagnosis and responding to the more enduring challenges of integrating the child's needs into family life. Parents' perceived that working in collaboration with health professionals would enhance their ability to effectively manage their child's condition. Collaboration in relation to care decisions was not evident in the studies included in the review.

Conclusion: Parents develop considerable expertise in managing their child's long-term condition but they perceive their expertise is not always valued and the quality of parent-professional interactions was variable.

OP03

CONFLICTS BETWEEN PARENTS AND ADOLESCENTS WITH TYPE 1 DIABETES

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Introduction: Type 1 diabetes is the most common chronic endocrinopathy of childhood and adolescence. The long lasting of the disease can be a cause of conflict between parents and children.

Purpose: The purpose of this review was to investigate the existence and the causes of conflict between parents and adolescents with type 1 diabetes while managing the disease.

Material - Methods: A systematic review of published studies over the past 10 years in the databases: Pubmed, Google, Medline, with the keywords: 'conflicts, adherence, parents, adolescents, type 1 diabetes, mellitus' was performed. Among the research results, they were found 87 articles that had relevance to our topic and only eight were fully informed.

Results: According to the results of these studies, the main causes of conflict between parents and adolescents with type 1 diabetes were associated with children's age, following the meal and snack schedule as well as food restrictions, the independence and autonomy of teenagers, behavior disturbances due to restrictions and the outsourcing of their feelings. The excessive concern of the parents, the lack of understanding and the different views about the person who is responsible for the decision making were issues that trigger conflicts between parents and adolescents. The involvement of health professionals had been vital to reducing negative behaviors.

Conclusions: The results showed that the quality of adolescents relationship with their parents was the key factor in managing and treating type 1 diabetes.

OP04

ASSESSMENT OF FAMILY BURDEN AND EMOTION AND THOUGHT OF FAMILY WHO HAS A CHILD WITH CEREBRAL PALSY

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Background: Having a disabled child in the family can make important changes in family structure and process, and can be a source of stress that affect family members' lives, emotion and thought negatively. The families who have children with cerebral palsy have many problems because of the difficulties about care, education, medication and growing of the child.

Purpose: This study was performed with the aim of assessing family load and worry about their child who has a child with cerebral palsy.

Material - Methods: The study was performed with 79 parents of child with cerebral palsy in a Physical Therapy and Rehabilitation Clinic for out-patients between October 2008 to July 2009. Demographic data form, contains 19 questions, 'The Questionnaire of Understanding Emotion and Thought of Family Members', contains 66 questions

that developed for understanding parents' worry about their child that needs special education and 'The Questionnaire of Assessment of Family Burden Who Has A Mentally Disabled Child', contains 43 questions, were used for collecting data. The researchers filled out each form face to face with the participants.

Results: A 70.88% of children that participated our study have mental retardation in addition to cerebral palsy and 87.34% of these children have special education. Whole of the families worry about what would happen to their children after they die or cannot manage to care them. A 88.60% of parents expressed that having a disabled child damage their family structure, they cannot have enough time for their spouse and other children, the feelings of angry and tiredness was experienced very much in the family. According to the points of 'Questionnaire of Assessment of Family Burden Who Has A Mentally Disabled Child', points of emotional burden (distressed by the status of child, giving up hobbies etc.) are more than 25% points of physical burden (clothing, feeding etc.). A 63.29% of families expressed that the illness of their children bring economical load.

Conclusion: In our study, it is seen that many problems get together and complicate the life for the child and family and especially emotional dimension such as distress, getting angry easily, boring, feeling a need for psychiatrist is come forward. It is suggested that parents' worry about their child, family burden because of the illness should be discovered, and family support programs should be considered important.

Keywords: Cerebral palsy, Disabled child, Family burden.

OP05

CHRONICALLY ILL CHILDREN: NURSES' PERSPECTIVE

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Introduction: The nurses are persons who spend most of time with chronically ill children and their families among health teams.

Purpose: This study is a descriptive study which is carried out in order to determine the attitudes and behaviors of nurses, who have worked and are still working with chronically ill children, toward to the children.

Material - methods: Sampling of the research has been based on 110 volunteer nurses working in Gulhane Military Medical Academy Hospital and Ankara University Faculty of Medicine Cebeci Hospital. Data were obtained from questionnaire consisting of 17 questions. Data were evaluated by using percentage, chi square test and mean analysis on the SPSS 11.0 program package.

Results: According to the nurses, 97% of children with chronic disease face the problem of social adjustment. A 74.5% of nurses stated that the most important condition which facilitates psycho-social integration of children and their family to the chronic disease was talking of parents with other families with chronically ill children like themselves. A 34.8% of nurses claimed that worsening of the patient's prognosis was at the first order among the difficulties during care activities. A 76.4% of nurses expressed that they were trying to be holistic during caring activities of children with chronic disease and 76.4% of nurses stated that they provided to the child to express his/her feelings during communication activities of children with chronic disease.

Conclusions: The artistic nature of nursing is based on skills. The art of nursing, is based on the individual application of necessary knowledge and skills on the child. In our study, the majority of the nurses approached in a positive perspective while providing care to the child and his/her family, and exhibited an attitude which was appropriate to the pediatric nursing philosophy such as understanding the child's individuality and family-centered care.

OP06

THE OPINION OF GREEK PARENTS ACCORDING TO THE ADVANTAGES AND DISADVANTAGES OF THE OUTPATIENT ONCOLOGY SETTING

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Introduction: The treatment can takes place in the inpatient ward or in the outpatient setting. The treatment of children in the outpatient daycare is strongly related to the concept of family-centered health care model.

Purpose: The aim of this study was to assess parental opinions on the advantages and disadvantages of a pediatric oncology outpatient setting in comparison to the inpatient oncology ward.

Material - Methods: The sample of the study consisted of 104 parents whose children were diagnosed and treated for pediatric cancer. The survey took place at the Pediatric Oncology Wards, as well as their respective outpatient settings of the two General Children's Hospitals in Athens, Greece from May 2010 to August 2010.

A cross sectional study was performed. The questionnaire that was used for the assessment of the parental opinions and satisfaction on the advantages and disadvantages of the pediatric oncology outpatient settings was developed by Oppenheim. It consisted of 14 questions of

which 12 included a "yes/no" or "the same" answer, whereas 2 were open ended.

Results: According to parents' view the outpatient setting was preferable since it promoted the continuation of the daily routine ($\chi^2 = 75.9$, $P = 0.000$) and maintenance of family life ($\chi^2 = 90.1$, $P = 0.000$) and their children's participation in activities ($\chi^2 = 25.6$, $P = 0.000$). Moreover, young patients were more happy, less anxious and less scared when they were attended in the daily clinic ($\chi^2 = 25.86$, $P = 0.000$). All statistical tests were considered to be significant at an alpha level of 0.05 and were performed with the IBM SPSS version 19.0.

Conclusions: According to parents' view, the outpatient setting has many advantages. The judgement of children and parents on the services offered by the Pediatric Oncology Unit at the whole, in both inpatient and outpatient setting, can give the necessary feedback to improve the provided care.

OP07

AN EFFECT OF RE-MISSION VIDEO GAME ON PERCEIVED STRESS LEVELS OF ADOLESCENTS WITH CANCER

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Introduction: Many strategies are used in order to decrease the perceived stress levels of young patients who suffer from cancer, in an attempt to promote and improve their quality of life.

Purpose: To determine the effects of Re-Mission videogame on perceived stress levels of adolescents with cancer.

Materials - Methods: The sample consisted of all the adolescents between 13 to 18 years of age, who were treated from cancer between December 2009 and May 2011 years at two hospitals in Istanbul. Adolescents were divided into two groups; the control group and the case group. Data were collected by the patient information form, the Perceived Stress Scale and the Re-Mission Assessment Scale. Data were evaluated appropriate statistical analysis such as percentage, mean, standard deviation, t test, variance analyses, Bonferroni analyses were used for the statistical analysis of data. Validity and reliability of Re-Mission video game was 0.72 and 0.79 respectively.

Results: Adolescents participating in the study, were similar to each other in terms of demographic characteristics such as age, gender, family structure, number of children, social security and the number of hospitalizations. It was found that there was no significant difference between groups in mean scores of perceived stress in the first measurement ($P = 0.250$). In the second and third measurements, perceived stress scores (the second measurement = 25.16 ± 6.37 , the third measurement = 18.23 ± 6.80) were significantly lower the case group adolescents than the control group adolescents (second

measurement = 31.20 ± 2.14 , the third measurement = 25.63 ± 2.97).

Conclusion: Re-Mission video game may expand its use, because the game was found to have a positive effect on the perceived stress of adolescent with cancer.

Keywords: Cancer, Re-Mission video game, Stress, Adolescent, Nursing.

OP08

DETERMINANTS OF QUALITY OF LIFE IN GREEK ASTHMATIC CHILDREN

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Introduction: The degree to which asthma influences health-related quality of life (HRQoL) depends on multiple factors, among which asthma control and asthma severity.

Purpose: The evaluation of the HRQoL in children with asthma, the level of agreement between child self-report and parent proxy-reports and the identification of the factors that affect asthmatic children's HRQoL.

Material - Methods: 504 asthmatic children and one of their parents during a regular follow up visit in an outpatient asthma clinic. HRQoL was assessed with DISABKIDS-Smiley measure for children 4–7 year-old and with Disabkids Chronic Generic Measure long form (DISABKIDS DCGM-37) and Asthma Module for children 8–14 year-old.

Results: Three hundred and fifteen children, 4–7 year-old (Group A) and 189 school-age (8–16 years, Group B) participated the study. Group A mean DSM score was 67.74 (± 18.44), their parents showed a higher one (72.54 ± 11.73 , $P < 0.001$). Girls rated HRQoL higher than boys ($P = 0.048$) and mothers lower DSM score than fathers ($P < 0.001$). There was a moderate level of agreement between parents and children in Group B for all subscales. Children with controlled asthma had higher mean score than the other asthma control groups. For all the scores, adolescents with controlled asthma had significantly higher mean scores in all scales compared to the partially controlled and not controlled asthma participants ($P < 0.001$). Lack of asthma control had the major negative effect in the HRQoL in both groups. Age of diagnosis, treatment duration, pet owning, mother's educational level and level of asthma control had a

positive effect on children's HRQoL. Passive smoking, presence of pets or animals, the level of contact with allergens and asthma severity had a negative effect, especially in younger children.

Conclusions: Asthma control and severity are in close relation but they express different clinical dimensions. Major determinant of asthmatic children's QoL is the level of asthma control and initial asthma severity.

OP09

CHILDREN'S EXPERIENCES OF ACUTE HOSPITALISATION TO A PAEDIATRIC EMERGENCY AND ASSESSMENT UNIT

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Introduction: Short stay treatment has become a popular form of care for patients internationally as a strategy to cope with increased demands on health care. In paediatrics this has been found to be a useful strategy that allows diagnostic care and early treatment for sick children. There is little research that considers the perspectives of the children and their experiences of acute the hospitalisation to a short stay care facility such as a paediatric emergency and assessment unit (PEAU).

Purpose: The study attempts to present an interpretation of the child's view of the experience and provides useful information for the nursing profession in the acute care for children.

Material - Methods: Semi-structured interviews were carried out to investigate the children's own experiences of being hospitalised in a PEAU. The children were also given the opportunity to draw a picture about their stay at the PEAU which were used as a starting point for explaining their experiences of being hospitalised. Thematic content analyses were used. This study explored the experiences of eight children aged 8–10 years.

Results: Three major themes were identified. (1) The children's understanding of disease, treatment and procedures. (2) The children's experiences of healthcare personnel and the PEAU. (3) Transformation of everyday life into the settings of the hospital. The children identified the hospital stay as an overall positive experience. The children took part in leisure activities as they would at home, and they enjoyed time with their parents whilst in hospital. In their conversations with staff they adapted quickly to professional terms that they did not necessarily understand. They did not differentiate between professionals.

Conclusions: This study has provided some limited insight into the child's experiences of acute hospitalisation which should inform nursing care. Further work should be considered to clarify the consequences of this.

OP10

GREEK HOSPITALIZED CHILDREN PARENTS' KNOWLEDGE ATTITUDES CONCERNS AND PRACTICES ASSESSMENT ABOUT FEBRILE CONVULSIONS

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Introduction: Febrile convulsions (FC) are common during childhood, with good prognosis, although they cause fear and anxiety to parents.

Purpose: To assess Greek parents' beliefs knowledge, attitudes, concerns and practices toward FC.

Material - Methods: A study employing a descriptive, correlational design was conducted in two children's hospitals of Athens (June–November 2010). Data were obtained from a convenient sample of 275 parents of hospitalized children, by the use of the KACP questionnaire. Translation of the KACP questionnaire from English to Greek language, reverse translation and the assessment of validity by an experts group were performed, during the pilot study, which has been proceeded (Cronbach's $\alpha = 0.71$, McNemar test $P > 0.05$). Internal consistency reliability analyses, descriptive statistics and chi-square test, were carried out by the use of SPSS 16.0, in a significance level of $\alpha = 0.05$.

Results: Response rate was 91.66% (275/300) and Cronbach's α was estimated as $\alpha = 0.758$. The mean value of participants' age was 36.83 ± 7.9 years, 65.1% were female, 86.9% were from a both parents' family structure, 54.4% were high school graduates and 9.1% had previous experience with FC from their child. Greek parents seemed to recognize the fever as a cause of convulsions (63.6%), and they could distinguish them from the 'epilepsy' (66.2%). On the other hand they had the false believe that FC could cause brain damage (68%), that the body temperature should be assessed more frequently (65.43%) and that the lumbar puncture was not an applicable intervention (51.4%). They concern mostly about the outcomes: brain damage (54.2%), further seizure attacks (54.9%), especially during the night (61.8%), and death (45.8%). The inappropriate practices that they use are to pry the convulsing child's clenched teeth apart and put something in his/her mouth (52.7%) and to restrain the child (66.5%). The educational level and the previous FC's experience partly affected the parental knowledge, attitudes and practices ($P < 0.05$).

Conclusions: These results have shown that Greek parents may need further information and training for better managing children with FC at home.

OP10A

PROMOTING EXCELLENCE IN COMMUNICATING WITH LIFE LIMITED CHILDREN, YOUNG PEOPLE AND FAMILIES

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Introduction: It is vital that internationally we draw on sound evidence if we are to promote and provide excellence in communication to meet the needs of children and their families who have life limiting illnesses (Brown & Warr 2005). This begins by listening to children, young people, families and staff. Initially, this paper sets the scene about end of life care/life limiting illnesses in children and young people, and following shares a large scale evaluation funded by the Department of Health (DH), England.

Purpose: To understand preferences of children, young people, families and staff for promoting and delivering the best care for life limited children and their families.

Materials - Method: The total data set included 55 funded projects in one large regional area in England aiming to change life limiting and end of life children's care and services. Data collation included survey methods and arts-based interviews, focus groups and field visits area over a 9-month time frame from a broad range of stakeholders including children, young people, families and staff ($n = 106$). Participatory framework underpinned by Theory of Change was used (Milligan et al. 2001). Contextual and thematic analysis was conducted to identify commonly reported issues.

Results: Main findings included needing to improve communications between healthcare professionals, children and families specifically at diagnosis and the impact of breakdown on continuity of care and transition from the hospital to the home. An improved communication needs-led training approach was subsequently developed as recommendations. There are limited large scale evaluations undertaken of children, young people, families and staff views about communications related to care for children with life limiting illnesses.

Conclusion: This evaluation provides an in-depth picture in terms of communication needs and challenges. Recommendations will include international future directions and has resonance for all delegates faced with such challenges.

OP11

TEENAGE INTERNET ADDICTION ON THE ISLAND OF CHIOS

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Introduction: Internet Addiction is a broadly used general term that covers a wide range of behaviors, the pro-

blematic control of impulses that are characterized by a reduced control of impulses connected with the use of the Internet.

Purpose: Assessment of the prevalence of Internet addiction among the teenage population on the island of Chios, and the investigation into the kinds of web related navigational (surfing) activities among teenagers.

Material: The sample consisted of 308 students 12–18 years old in Chios. The collection of the data was done by students completing an addiction scale on the Internet YDQ, and the addiction scale of teenagers on the computers (K.E.E.F.Y.) during the first trimester of 2009.

Material - Methods: The students were recruited from a random sample in the city and villages of the island. The statistical significance was on the level of $P < 0.05$. Statistical analysis of the data was conducted using the Statistical Package for Social Science SPSS 13, and used descriptive statistics, the statistical test chi-square test, while parallel to that, created the linear model and Linear Regression.

Results: A 90.2% of the respondents with a median starting age of 10.77 ± 2.71 (min. = 4, max. = 17) stated that they use the computer, while 83.1% of the respondents stated that they had used the Internet during the last 12 months. The place where the students had access to the Internet more frequently was their residence with 72.7%, the school with 32.8%, and the Internet Café with 28.7%. The main reason for which the respondents used the Internet during the last trimester was for Internet games (53.6%), sending and receiving e-mail (43.5%), and acquiring information for educational purposes (35.4%). Mild use of the Internet is apparent in 59.5% of the sample, borderline use in 25.5%, and addictive use in 15% of the sample. Internet addiction is equally likely to be female as male (50%). In this study it is apparent that the use of the computer and of the Internet is widespread on the island of Chios among Junior High School and High School students.

Conclusion: This study presents the highest percentage of teenage Internet addiction that has ever been recorded in Greece, a fact that confirms the trend that children living in provinces show a higher percentage of addiction than children living in large urban centers.

OP12

OVERWEIGHT AND OBESITY STATUS IN ADOLESCENTS FROM GREECE

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Introduction: Obesity is on the rise among adolescents worldwide, including populations living in developing countries. Key health organizations have recommended

research be conducted on the effectiveness of well-designed interventions to combat childhood obesity.

Purpose: This study aimed to describe body mass index of adolescents in public schools in Greece. The town of Larissa was chosen for this study.

Material - Methods: Questionnaire data, weight, height, waist circumference, body mass index, systolic and diastolic pressure and pulse measurements were collected in adolescents between 12 and 18 years old who were attending public school during the 2009–2010 school year in Greece (Larissa). Four hundred and fifty-one adolescents measured.

EpiInfo used for the statistical analysis. All data which collected examined for every school separately and also all together.

Results: At the end of the measurements, data analysis showed that 25% of the adolescents are obese and 5% are overweight. Sixty percentage of the adolescents were obese and 5% were overweight, 60% of the adolescents had.

Conclusions: Increasing levels of youth obesity constitute a threat of the nation's health, and identification of the influences during childhood that lead to youth obesity is urgently needed. Schools are a suitable setting for the promotion of healthy lifestyles although more work, particularly focussed on dietary change, is needed in a variety of schools and social settings.

OP13

MENARCHE AND FIRST EMOTIONAL REACTIONS OF TURKISH ADOLESCENT

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Introduction: Menarche is a physiologic situation that is always memorable and significant in ladies' life. Emotional reactions are different among cultures and countries. They include secrecy, discomfort or a sense of disease and a blush status in some societies as well as in other societies it is faced as a wonderful or a miracle status and a sign of growth. Similarly, menarche is welcomed with celebration in a lot of cultures while in others is faces as a nasty or as a status of shame and the people don't want to speak about it. Menarche is very important for a girl due to physiologic, psychologic and cultural effect. Negative emotions can develop if the girl hasn't got the true knowledge.

Purpose: The aim of this study is to determine the emotional reactions and traditional application of 12–25 age Turkish adolescents.

Material - Methods: A conversation form is used. The form included; age, education level, menarche age, level of knowledge about menarche, emotional reaction about menarche, traditional application with regard to menarche. A descriptive research was performed. Data was collected

between 1 March – 31 August 2011. The sample consisted of 1465 adolescent from seven differ region of Turkey

Results: The mean age of the sample was 20.26 ± 2.34 and 78.9% of them were university graduates. Mean menarche age was 13.28 ± 1.25 (min:10, max:19). Most sense emotional status at menarche were; 35.2% “I was affaid”, 35.8% “I was surprised”, 10.1% “I’m glad”, 6.8% “I was blush”, 4.5% “I was sorrow”. Before information receive about menarche is 87.8% while this information received 54.8% from mother and 9.7% from health professions. Rates of sanitary pads use are 87.7%. Traditional application rates are 6.4% that as slapping, using old clothes, giving a gift. The relation between negative emotional reactions and education level found statistical significant ($\chi^2/P = 0.000$). The relation between education level and hiding or talking about menarche found statistical significant ($\chi^2/P = 0.000$).

Conclusions: It is of great importance to give adequate information to girls concerning menarche.

OP14

NURSE-LED TELEPHONE REFERRAL TO A PAEDIATRIC EMERGENCY AND ASSESSMENT UNITS

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Introduction: An increasing number of acute referrals have led to unsatisfactory working conditions and a degradation of the service to the families attending paediatric emergency and assessment units. The usual way of referring for the general practitioner (GP) was by telephone to the resident assistant. This study investigated if a nurse-led telephone referral system would optimize conditions for patients and staff.

Purpose: To create optimal continuity of care, to optimise service to GPs’ and other collaborators, to improve quality of care to the families and to improve working conditions in the PEAU.

Material - Methods: The project period was from October to December 2009. A team of paediatric nurses were in charge of the referral system. Prior to the project the nurses were introduced to a guideline which included a model to ensure efficient and accurate reception and transmission of information – the ISBAR model. The project was evaluated using an electronic questionnaire and focus group interviews.

Findings: Nurse-led telephone referral helped to create:

- Optimal continuity of care as the nurses in charge of referral had a better overview.
- Improved working procedures as information about the children were already documented prior to arrival to the PEAU.

- Better working environment as staff was able to examine the children and talk to the families without interruptions.

- Improved quality of the referral system according to the GPs.

Conclusion: A nurse-led referral system to a PEAU has proven successful and staff reported improved working conditions. Furthermore did the project shed a light on the importance of a validated triage tool to prioritize acutely admitted children. As a result of this the paediatric emergency and assessment unit commenced a project in order to develop a paediatric triage tool.

OP15

ASSESSMENT OF DEGREE OF COMPLIANCE OF HEALTH PROFESSIONALS IN A PEDIATRIC INTENSIVE CARE UNIT

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Introduction: Hand hygiene of health care professionals, either as a wash or as a disinfection of hands, protects against cross transfer of germs and contributes in reducing the incidence of infections as it is the main measure to prevent hospital infections.

Purpose: Purpose of this survey was to identify the degree of compliance of health personnel with the rules of hand hygiene before and after the educational intervention.

Materials and methods: The survey involved 33 people (19 nurses, 5 assistant nurses, 12 doctors, 2 physiotherapists) in ICU of a pediatric hospital in Athens. The collection and analysis of data was based on the Observation & Calculation Form – World Health Organization: Hand Hygiene Technical Reference Manual of the World Health Organization. The professionals were observed within 1 h five times a week for 8 weeks before and after the implementation of the educational intervention (courses of 1 h to the all personnel). The total number of observations that was studied were 450 before and 409 afterwards.

Results: Out of the 33 individuals who participated, most were women (27 women, 6 men) with an average age 42.7 years and average time of previous experience 16.8 years. The degree of compliance of health professionals in accordance with the international recommendations for hand hygiene, before is 31.71% and afterwards 34.2%. Compliance among doctors, nurses, assistant nurses and physiotherapists who come into contact with the patients is 28.2%, 30.4%, 21% and 44.8% before and 41%, 54.1% and 33.35% after intervention respectively.

Conclusions: According to the results the degree of the compliance staff in the ICU before and after the intervention is sufficient. The training and information of health

professionals contribute to increasing the degree of compliance with the international recommendations for hand hygiene.

OP16

INTERVENTIONS FOR NURSES CARING FOR A CHILD WHO HAS AN UNEXPECTED ACUTE LIFE THREATENING EVENT (ALTE) IN HOSPITAL

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Introduction: Caring for a child who has an unexpected ALTE in hospital can be stressful. An ALTE may include a cardiac arrest, respiratory arrest or call for immediate assistance. An international survey of practice was conducted to identify any existing interventions to inform a PhD program of work aimed at reducing the stress from these events through preparation and support.

Purpose: The purpose of the survey was threefold:

(1) Describe 'normal' practice when it comes to preparing staff or providing psychological support after caring for a child who has had an ALTE.

(2) Determine if there are any interventions to *prepare* clinical staff for potential psychological effects of caring for a child who has an ALTE.

(3) Determine if there are any interventions to provide *support* for clinical staff after caring for a child who has an ALTE.

Material - Methods: An 18 item semi structured questionnaire was designed for the study to allow respondent to describe practices within their institution and outline their opinions and professional experiences. Clinicians from selected children's and adult hospitals in Australia, Canada, New Zealand, United Kingdom and the United States of America were contacted by telephone. Following consent they were given the option to complete the survey via the telephone, by post or online.

Results: Of the 61 hospitals approached 44 (72%) clinicians responded. Eighteen (41%) respondents identified interventions in place to *prepare* nurses for an ALTE ranging from (but not limited to) *ad hoc* discussions during life support training through to structured simulation training. Thirty-six (82%) respondents identified that they had interventions in place to *support* nurses after an ALTE ranging from (but not limited to) debriefing through to structured case reviews.

Conclusions: Interventions varied across institutions, with no outcome or evaluation data for the interventions published to date.

OP17

EVALUATION OF THE EFFICACY OF CPR TRAINING FOR PARENTS OF CHILDREN AT HIGH-RISK FOR CARDIOPULMONARY ARREST, PRELIMINARY RESULTS

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Introduction: Cardiopulmonary arrest in children is uncommon (2.6–19.7 annual cases per 100 000 pediatric population) but survival rate to hospital discharge is poor (12.1%) and neurologic morbidity is high. Cardio Pulmonary Resuscitation (CPR) can double the survival chance if provided immediately (from 4.7% to 9.4%). Although 60% of the cardiac arrests occurs in the home with family members present, only 17% of them receives bystander CPR.

Purpose: To evaluate the efficacy of CPR training for parents of children at high-risk for cardiopulmonary arrest in our hospital to reduce their anxiety and fear, to make them able to perform CPR and to improve survival in children with sudden cardiac arrest.

Material - Methods: Take-home educational material (DVD, Handbook and memory card) was created for parents to guarantee the retention of information in the long period. Study design: A pre-post test design without comparison group. Target population: Parents of 0–3 years aged patient at high-risk of cardiac arrest (prematurity, low birthweight, congenital heart disease, pulmonary distress, genetic syndromes at risk of sudden cardiac arrest, congenital gastrointestinal disease). Intervention: A two-session educational intervention: a 60-min class session of prevention and emotional support, and a 6-h CPR course according to the ILCOR 2005 guidelines. Follow-up: Evaluations were planned pre-post CPR course and at 6 and 12 months to monitor the status of CPR knowledge, emotional feeling, use of CPR knowledge and skills, and relative outcomes. Statistical analysis: EpiInfo 3.5 was used for statistical analysis. Ethical issues: The study was approved by the Ethics committee of the hospital and participants signed an informed consent.

Results: The first data available are: 87 parents, 55 mothers and 32 fathers, were trained. Only 6.9% of them had basic CPR knowledge, after the course, they reached 75.9%. Until now, only one event occurred and CPR sequence was correctly performed.

Conclusion: The course improved the parental knowledge concerning CPR and their performance.

OP17A

METHODICAL HEALTH CARE APPROACH IN THE CARE AND PROTECTION OF AN ABUSED AND NEGLECTED CHILD

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Introduction: Abuse, neglect and exploitation of a child, based on the active abuse of power of an adult, directly cause physical and psychological injuries and damage, what results in inadequate care, no timely treatment, lack of security and in preventing developmental needs of the child.

Purpose: Recognition of violence and abuse signs and symptoms in hospitalized patients with aim to take adequate care measures and protection procedures of the abused children.

Material and Methods: Special guidelines and protocols for children protection from neglect and abuse and hospital medical records of Pediatrics were used

Results: This methodical approach means taking care of injuries and illness of a child, documenting the situation, further abuse risk measuring, and safehome care.

During the five-year follow-up of patients in our hospital (2006/2010.godine), we got the following data: a total of 6605 hospitalized children. Abuse and neglect signs were diagnosed at 18 children; 11 physically abused children; two children showed symptoms of neglect; 4 children were emotionally abused; there was a suspicion on sexually abuse at one child. Over 80% of children were female. Collected data show evident increased number of children experienced various forms of abuse and neglect, most often by parents. This data are results of more accurate records and documentation of child abuse, the legal obligation of registering and reporting of relevant services, as well as better education of health professionals who take care for children and youth.

Conclusion: The best protection of children from all forms of neglect and abuse is prevention. Legislation to protect children, education of nurses and pediatricianst or ecognize symptoms of abuse and neglect of children and adolescents, adequate careand recordings, are the most important segments in the social care and child protection.

OP18

PHYSICIANS' AND NURSES' OPINIONS ABOUT THE COMMUNICATION AND THE INTERDISCIPLINARY COLLABORATION

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Introduction: Effective communication and collaboration between doctors and nurses are the keystone for providing high quality health care services.

Purpose: The aim of the study is to document the opinions of doctors and nurses about the effective communication and collaboration between them, as well as the factors that affect it.

Material - Methods: Data was collected from 100 doctors and 200 nurses who completed the questionnaire "Communication and collaboration among physicians and nurses". The questionnaire included 28 questions for the assessment of nurses' and doctors' opinions about communication and collaboration between them, as well as doctors' point of view about nurses' participation in the decision-making. A special form with demographic data was also provided. The analysis was performed with SPSS 16.0 (Statistical Package for Social Sciences).

Results: The results of the study show that the majority of doctors respected the nurses' job (95.7%) and they were sensitive about their family status (87.1%) and their personal needs (90.4%). Most doctors reported that the relation between doctors and nurses ensured collaboration (95.7%) even if an average percentage of them (24.7%) mentioned that they did not collaborate with the nurses for patients' treatment and decision making. The majority of doctors declared that they accepted the responsibility of nurses for the patient-care (98.9%) as well as the fact that they were informed by the nurses for patients' health care (89.1%). The doctors of smaller age ($P = 0.036$) and with smaller clinical experience ($P = 0.029$) recognized nurses' skills and they accepted nurses' opinions about the treatment and the decision-making ($P = 0.094$ and $P = 0.060$ respectively). The majority of nurses mentioned that their work was respectable by the doctors (80.2%) and the relation of doctor-nurse ensured collaboration (90.3%). Nurses' academic education and postgraduate studies, the size of clinical department and the years of experience were found to be statistically significant factors for the effective communication and collaboration between nurses and doctors according to nurses' opinions ($P < 0.05$).

Conclusions: Modern nurses should communicate successfully and improve their role in the decision-making continuously, providing high quality health care services for the patients. Errors and omissions in the quality of health care are caused by the lack of coordination and cooperation between nurses and doctors. According to doctors' opinions the lack of knowledge about nurses' professional role was the major obstacle for not collaborating with them.

OP19

THE INFLUENCE OF LOCAL ANTIMICROBIAL AGENTS IN CHILDHOOD BURNS: A CLINICAL STUDY

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Introduction: Local chemoprophylaxis in burn victims is crucial in preventing infections and enhancing the healing process.

Purpose: The purpose of the study was to compare two local antimicrobial agents, 10% povidone iodine and silver sulfadiazine 1%, in the course of healing and epithelialization of burns as well as prevention of contamination.

Material - Methods: 48 children aged 0-24 months with partial thickness contact or scald burns served as a basis for this study. The healing of the burn wounds was evaluated by two independent observers. The parameters assessed in each group were: the degree of epithelialization, the quality of the granulation tissue, the degree of inflammation, the degree of infection, the aspect of the early scar tissue and blister formation. Every parameter was scored on a 1-5 scale, with score 1 for the worst and score 5 for the best outcome. Long-term follow-up was performed on days 0, 1, 4, 7, 10, 14, 21, 1 month, 3 months and 6 months. Weighted kappa coefficient was used to evaluate inter-observer agreement. 'Random effects' linear regression analysis was used to determine if there were any statistical differences between the two groups.

Results: Twenty-six children participated in the silver sulfadiazine 1% group and 22 the povidone iodine 10% group. Children's mean age was 17.3 months (± 5.8 months). The majority of burns were located in the anterior trunk and upper arms (56.3% and 47.9% respectively), mean TBSA% was 11.3 ± 5.8 and 39.6% were deep partial thickness burns. There were no statistical differences found in the healing process or contamination between the two groups indicating that povidone iodine 10% and silver sulfadiazine 1% have equal properties in topical burn treatment.

Conclusions: The type of antimicrobial agent does not affect the healing process or contamination of the burn wound.

OP20

EVALUATION OF THE MEDICATION PROCESS IN PEDIATRIC PATIENTS: A META-ANALYSIS OF MEDICATION ERRORS RATE

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Introduction: Children are a particularly challenging group of patients when trying to ensure the safe use of drugs. However, medication errors may occur in all stages of medication process including prescription, dispensing and administration.

Purpose: The aim of this study is to meta-analyze studies that have assessed the medication errors rate (MER) in pediatric patients.

Material - Methods: Sixteen original studies were included in the analysis. The authors conducted a systematic review and random effects meta-analysis of studies related to medication errors in pediatric patients, including publications in Pubmed, Cochrane, Google Scholar and electronic libraries of Athens University from 1 January 2001 to 31 December 2010.

Results: The combined MER for prescribing errors to medication orders – nine out of 16 studies – was equal to 0.301 [with 95% confidence intervals (CI) 0.281–0.292] – five out of 16 studies – for prescribing errors to total medication errors was 0.267 with 95%CI: 0.280–0.316, for dispensing errors to total medication errors was 0.136 with 95%CI: 0.057–0.290 and for administration errors to total medication errors was 0.422 with 95%CI: 0.197–0.684. Furthermore, including five out of sixteen studies the combined MER for administration errors to drug administrations was equal to 0.193 with 95%CI: 0.135–0.270.

Conclusions: Medication errors do constitute a reality in health care services. Medication process is significantly prone to errors, especially in pediatric patients, according to the reported rates. Implementation of medication errors reduction strategies needs to be done in order to increase the safety and quality in pediatric health care delivering.

OP21

HEALTH AMONG 6-YEAR-OLD CHILDREN IN A SWEDISH COUNTY: BASED ON THE HEALTH DIALOGUE

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Introduction: Children's health and school progress are strongly connected with future life. The Health Dialogue (HD) is a method used by the school nurses in Sweden in the health promoting work.

Purpose: To investigate and explore the health of children in a preschool context, 2006–2009.

Material - Methods: Data originated from the HD that took place in pre-school classes during 2006–2009. The total sample consisted of 5259 HD from 6-year-old children. The HD is a structured instrument consisting of 15 questions that covers health from three dimensions according to WHO. The child and parents are invited to a HD with the school nurse. The school nurse registers the HD at EPI-child (an epidemiological database). Logistic regression and odds ratios (OR) were analyzed for the HD.

Results: The most significant finding was that most children, regardless of gender, experienced good health (96.5%). Comfort in preschool, sleep, headaches, physical activity, play and bullying were important variables in the experience of health for all children. There were gender differences in experience of sleep, headaches, physical activity and play. More than one-third of all children had experienced bullying. The gender differences in experiences of health among six-year-old children are a surprising finding. Many of the boys were more physically active than the girls; the boys' health experience had a strong connection to headaches, while girls' health experience had a strong connection to sleep. Another finding was that even though 36% of the children had been bullied, their experience of health and comfort in preschool was good.

Conclusion: Six-year-old children's health experiences are vital issues that need to be addressed in school health prevention and promotion and the HD can contribute to this work.

OP22

MOTHERS' KNOWLEDGE AND PERFORMANCE ABOUT APPLICATION OF SWADDLING

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Introduction: Swaddling is a traditional practice of wrapping infants in swaddling clothes so that movement of the legs and foot are tightly restricted. People and mothers commonly believed that this is necessary for the infants to develop proper posture. Application of swaddling lead in decrease restlessness, crying, frequency of insomnia, stress and increase comfort and silence in infants. Despite of these advantages, if swaddling use inappropriately, would result in Dislocation of Hip. In addition swaddling has profound negative effects on the adult emotional health of a swaddled child.

Purpose: In this research we assess the Mothers' knowledge and performance about application of swaddling.

Material - Methods: This is a descriptive-analytical research. We assess 211 mothers whom have infants 1–24 months with diarrhea. Data gathered through a researcher-administered questionnaire and interview by professional midwife. The validity of questionnaire confirmed through experts (Pediatricians, Faculty members in nursing and midwifery, orthopedist) and its reliability after distributed in a sample of 30 mothers gained 91% through Cronach's alpha. Data analyzed by expert through SPSS version 16.00. During the semi-structured interview, after gaining the data, professionals taught the mothers about advantages and disadvantages of swaddling.

Results: Finding showed that the majority of mothers (65%) have not knowledge about benefits and pitfall of swaddling. Eighty-six percentage of them knew that it was good for calming babies, sleeping and warming. Sixteen percentage of them knew that swaddling may lead in dislocation of hip. Educated mothers and housekeepers swaddled their babies less than others. They told that they received information about swaddling from her mothers and relatives and very less from health professionals. Educated mothers told in the interview that they did not receive information about swaddling much from media and doctors (65%). In interviews analysis, found that they were interested in participated in classes about swaddling (78%) to learn the correct swaddling.

Conclusion: With regards of weak results about knowledge and performance of mothers on swaddling and its consequences such as adult emotional health and dislocation of hip, promotion of mothers' knowledge suggested through health workshop and practical teaching sessions by professional and governmental official is necessary.

Keywords: Mothers, Swaddling, Knowledge, Performance.

OP23

ESTONIAN NURSING STUDENTS' READINESS FOR CLIENT-CENTRED NURSING AND THE INFLUENCE OF STUDIES ON IT

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Introduction: Learning process must be managed so that students are motivated, learning does not only acquire knowledge and skills, but that the students emerge professional values necessary for future work, and supportive attitude to client.

Purpose: The purpose of the study was to describe the Estonian nursing students readiness for client-centred nursing and the influence of studies on it.

Material - Methods: The total sample consisted of nursing students in their final year of study at Estonian healthcare colleges (n = 195). The data was collected from 26 August to 16 December 2009, using the structured five

point Likert Scale questionnaire *Client-Centeredness in Nursing Care*. The data was analysed by PASW Statistics 18 using descriptive statistics.

Results: The students evaluated their readiness for client-centred nursing as good or very good. The students are ready to consider the clients' expectations and needs and all clients are equally important for the students. However, the readiness to see the clients and their closed ones as an equal partner is lower. The influence of theoretical studies is considered slightly stronger than practical studies for the students' readiness for client-centred nursing. The practical studies have mostly supported the technical skills.

Conclusion: The students understand the importance of client-centeredness but accept its basic values partly and within certain limits. The students are ready to guarantee a friendly treatment and secure environment for the client, but they are less ready to cooperate with the clients and their closed ones. The students find that the studies would be more client-centred in the future if the teachers and supervisors of practical studies could have in-training courses concerning client-centeredness.

OP24

CHILDREN'S AND PARENTS' OPINIONS ABOUT THE PAIN THEY SUFFERED DURING THE HOSPITALIZATION AND THE IMPACT OF PAIN UPON PARENTS' QUALITY OF LIFE

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Introduction: Pain is a major problem during children's and adolescents' hospitalization. It is estimated that almost 15–20% of the pediatric patients suffer from chronic pain during their hospitalization.

Purpose: The aim of the study was to report and assess pediatric and parental opinions about the pain the pediatric patients suffer during their hospitalization, as well as the impact of that pain upon parents' quality of life.

Material - Methods: The sample of the study consisted of 100 pediatric patients with cancer and orthopedics disorders and one of their parents. The Pediatric Pain Questionnaire (Parent Version) and the PedsQL-Family Impact Module (PedsQL-FIM) were used for the assessment of pain and the quality of life the by parents. Children and adolescents completed the pediatric version of the Pediatric Pain Questionnaire for the evaluation of pediatric pain.

Results: The children's mean age was 7.10 ± 4.36 years. The PedsQL-FIM was found to be a reliable tool for as-

sessing parents' quality of life ($\alpha = 0.94$). The mean score for the PedsQL-FIM was 54.91 ± 16.80 , the mean score for Health related Quality of Life was 56.34 ± 19.23 and the mean score for Family Functioning was 59.56 ± 21.34 . No statistically significance was found on the PedsQL-FIM scores between parents whose children suffered from cancer and those whose children had orthopedic disorders ($t = 1.79$, $P = 0.09$). No demographic factor was found to be statistically significant on the PedsQL-FIM scores. Children with orthopedic disorders mentioned more acute pain than children with cancer ($z = -3.18$, $P = 0.002$). Parents tended to overestimate their children's chronic pain ($z = -2.25$, $P = 0.02$). There were also positive high correlations on acute pain reported by children and parents (Spearman's $\rho = 0.59$, ICC = 0.72, $P = 0.000$), as well as moderate correlations on chronic pain scores (Spearman's $\rho = 0.56$, ICC = 0.51, $P = 0.000$).

Conclusions: The PedsQL-FIM appears to be a suitable tool for measuring parental self-reported health related quality of life and family functioning in pediatric chronic pain. Children reported less acute and chronic pain than their parents. Medium and high correlations of the patient/parent responses strongly imply that relevant information might be obtainable through parents when children are unable to assess their pain.

OP25

PARENTAL NEEDS AND EXPERIENCES IN COMMUNICATION WITH HEALTH PRACTITIONERS

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Introduction: Effective healthcare professional – patient communication is necessary to ensure not only that the patients' problems and concerns are understood but also that relevant information, advice and treatment is received and acted upon by the patients. It has been shown that consultations in which patient expectations are met result in greater satisfaction and an increased willingness to follow advice or treatment.

Purpose: To examine the experiences and needs of parents whose children have developmental difficulties, focusing on their communication with health practitioners.

Methods and participants: Parents of 53 children with developmental difficulties filled out a questionnaire which was sent to them by mail. In this questionnaire we asked them to state what kind of physicians' and nurses' behavior they find helpful, to describe nurses' and physicians' behavior when their child was in hospital for the first time and to express their satisfaction with it on a scale from 1 to 5.

Results: Thirty-six percentage of the parents are satisfied with physician-parent communication and 65% with nurse-parent communication. Physician's behavior in first

consultation is mostly viewed as cold and restrained, while nurses are described as professional, kind and compassionate. In communication with health practitioners parents want empathy and support, professionalism, more devoted time and more detailed information about treatment options and habilitation, child's condition and his/her disease. They also want to be informed about further steps they need to take in treatment of their child's disease.

Conclusion: The level of communication between parents and health care professionals is of critical importance. Nurses can play a significant role in the improvement of the communication between parents and medical staff.

OP26

KNOWLEDGE OF 'PAIN ASSESSMENT AND MANAGEMENT' AMONG NURSES CARING FOR CHILDREN IN ERBIL HOSPITALS

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Introduction: Pain is one of the most common adverse stimuli experienced by children. Pediatric nurses have failed to adequately relieve children's pain by failing to recognize pain, failing to optimize pain treatments. The assessment and management of children's pain is a particular challenge for nurses.

Purpose: This study is conducted to assess knowledge of pain assessment and management among nurse's caring for children in Erbil City, Iraq.

Material - Methods: A descriptive study was conducted on Pediatric Raparin Hospital, Hawler teaching hospital and Emergency Hospital, in a period from 2nd of January 2011 to 30th of April 2011. A purposive (non probability) sample of (60) nurses who were caring for children in three hospitals. All the study participant were agreed to be involved in the study. A questionnaire form consist from two parts, derived from a questionnaire developed by Manworren for assessment of Pediatric Nurses' knowledge regarding pain (PNKAS - Shriners revision 2002) was used to collect data after gating permission from the author .The Statistical Package for Social Sciences (SPSS, version 15) was used for statistical analysis.

Results: Researcher found that majority of nurses were females, most of them were from the age groups of (20-29), (30-39) years old, have >5 years of experiences and were graduated from medical institute. Results of the study reveals that highest percentages of nurses have incorrect answers for majority of pain assessment and management items.

Conclusion: Nurses caring for children in Erbil City have insufficient knowledge regarding pain assessment and management. There was non-significant relationship between nurse Knowledge of pain assessment and management in children and nurses demographic characteristics (Unit of working, experience years, Educational prepara-

tion). Researchers recommended improving the nurse's knowledge regarding pain assessment and management in children.

OP27

PARENTAL IMPACT ON ENVIRONMENTAL TOBACCO SMOKE EXPOSURE IN PRESCHOOL CHILDREN: A COMPARATIVE STUDY BETWEEN RURAL AND URBAN AREAS IN GREECE

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Introduction: Environmental tobacco smoke (ETS) is associated with worsening respiratory symptoms and decreased pulmonary function. Greece is among the countries that face a serious smoking problem.

Purpose: The aim of this study was to explore the size of the problem and the impact of the parental characteristics on ETS exposure in preschool children in urban and rural environment.

Material - Methods: Preschool children attending nursery schools living in urban (UR) and rural environment (RU) were evaluated. ETS exposure was measured by the child's urine cotinine levels, whereas information on demographics, child's clinical status and house environment, including smoking status of each household member, were selected by parents' interviews.

Results: We studied 234 children, (52.6% boys) with a mean age of 4.02 ± 0.61 yrs, 48.3% in UR environment. Mean urine cotinine levels in the whole sample were 50.2 ± 118.7 ng/mL, which equals to heavy exposure in ETS for non-smokers. The exposure in RU environment was heavy, whereas much less exposure was observed in UR (73.8 ± 144.7 and 25.7 ± 72.7 ng/mL, respectively, $P = 0.005$). A correlation between the cotinine levels and the educational level of the parents ($P \leq 0.001$), as well as the number of the cigarettes the parents declared to smoke per day ($P \leq 0.001$) was found. Interestingly, analysis revealed a correlation between the cotinine levels and the fathers' smoking status ($P = 0.005$), but not with the mothers' smoking cigarette number ($P = 0.101$), in children living in UR, while in children living in RU the smoker mother affected the cotinine levels ($P = 0.002$) and the smoker father, marginally, did not ($P = 0.053$). However, there was no correlation between the level of exposure and the allergy status, history of respiratory infections, or wheezing illness.

Conclusion: ETS exposure of preschool children is a serious health problem in Greece. It is more pronounced in RU areas where maternal smoking appears to play more important role.

OP28

THE EFFECTIVENESS OF INTERVENTIONS TO PREVENT HYPOTHERMIA AFTER BIRTH IN PRETERM INFANTS: A RANDOMIZED CONTROLLED EXPERIMENTAL STUDY

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Introduction: Hypothermia is a serious health problem that threatening the infant's life in neonatal period. Especially inadequate delivery room environments and inaccurate transport causes hypothermia of infants in developing countries.

Purpose: The purpose of this experimental study was to examine the effects of vinyl isolation bag and polyethylene wrap on hypothermia after birth of infants under the age of 32 gestational weeks.

Material-Methods: The data were collected through observation form. The form consist of 24 questionnaires. This study was realized at the delivery unit and NICU of the Istanbul University Istanbul Medical Faculty Hospital between December 2009–June 2011. Infants were assigned by randomly as for gender, gestational age, birth weight and apgar scores to either an vinyl isolation bag group and polyethylene wrap group. A total of 59 infants under the age of 32 gestational weeks were included in this study. The 22 infants were placed in the vinyl isolation bag and 37 infants were wrapped with polyethylene film after birth.

Results: According to measure times (after birth, 20–40–60 min) vinyl isolation bag groups' body temperatures were found statistically significant higher than polyethylene wrap group at 60 min after birth ($P < 0.05$). When the body temperature measurements difference is compared by two groups between at birth and 60 min were found statistically high significant differences ($P < 0.001$). The body temperature differences were decreased $1.41 \pm 1.65^{\circ}\text{C}$ in vinyl isolation bag group and $2.75 \pm 1.68^{\circ}\text{C}$ in polyethylene wrap group. In addition when compared to blood gas and glucose measurements between two groups at birth and 6 h; only bicarbonate (HCO_3) at blood gas were found statistically significant lower level in vinyl isolation bag group ($P < 0.05$).

Conclusion: Vinyl bags are an effective intervention that is shown to significantly improve admission temperature in infants. This technique can be adapted in the delivery rooms to improve admission temperatures in extremely premature infants.

Keywords: Hypothermia management, Infant, Vinyl isolation bag, Polyethylene wrap, Plastic barriers.

OP29

EFFECTS TO HEALING PROCESS OF USING TOPICAL BREAST MILK AND RASH CREAM FOR INFANTS WITH DIAPER DERMATITIS IN THE NEWBORN INTENSIVE CARE UNIT (NICU): RANDOMIZED CONTROLLED EXPERIMENTAL STUDY

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Introduction: Diaper dermatitis is the skin problem caused by closure, moisture and irritation at perineum and around. Diaper dermatitis is the most common skin disease seen by 7–35% rate and usually effected age of 9–12 months infants.

Purpose: The research is planned as randomised controlled experimental study for determine the effect to rash healing process of using topical breast milk and rash cream (include cod liver oil and 40% zinc oxide) for babies with diaper dermatitis in the NICU.

Material - Methods: The population of the study was full term and preterm babies hospitalized in the NICU and occurred diaper dermatitis on February 2010–October 2010. Research data obtained by totally 63 babies; 30 of them was in the breast milk care group and 33 was diaper rash cream care group. Diaper rash lesion was observed and evaluated by scored as: light redness is 1 point; large area redness is 2 points; deep and wide area redness is 3 points. Babies are cared for diaper dermatitis maximum 5 days and 1 point decrease of the lesion score was evaluated as healing. Both groups were statistically no difference as randomization for terms of gender, the mean week of gestation, nutrition and using antibiotics ($P > 0.05$).

Results: As a result of the survey; diaper rash cream care group's lesion score was statistically advanced level lower than breast milk care group's ($P = 0.002$) and there is no difference by average time to healing between groups ($P = 0.270$) were determined.

Conclusion: Diaper dermatitis care for infants is recommended by using breast milk if the lesion is light redness. Especially large redness and serious degree of diaper dermatitis should be cared with cod liver oil and zinc oxide contained cream.

Keywords: Diaper dermatitis, Care, Breast milk, Zinc oxide, Cod liver oil, NICU.

OP30

WITHDRAWN

OP31

HOW WAS IT FOR US? REFLECTIONS FROM A UK E-LEARNING DEVELOPMENT FOR HEALTH PROFESSIONALS IN THE FIELD OF PAEDIATRICS AND CHILD HEALTH

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In June 2010, the Department of Health (DoH), UK released a call to apply for funding to support projects focused on benefiting the lives of children and young people with palliative and complex health care needs. The Faculty of Health & Life Sciences in Coventry University, England (led by Professor Jane Coad) was awarded £1.4 million to develop and deliver a new and innovative accredited blended e-learning programme in conjunction with Centre for Education and Learning Excellence (CELE) (led by Professor Lynn Clouder and team).

This innovative programme, for nurses, doctors and allied health and social care professionals, has the potential to nationally and internationally impact on learning in this field. The suite of seven new online modules can be taken as stand-alone units of learning or a Post Graduate Certificate. Blended learning includes a combination of new e-learning materials including video films, trigger case studies and second life avatars. Materials were developed and piloted by a new partnership approach of academics, expert clinical staff and Learning Technologists. The modules are contemporary in content focusing on the palliative, complex care needs and end of life care of the neonate through to the child and young person. The impact on the families is of high importance and considered throughout all of the modules.

The presentation will share some of the new materials but will focus on our learning and experiences. We will critically explore our development and delivery of online resources reflecting on the following:

- Overcoming the challenges of enabling access to health professionals who lead busy, complex and time constrained lives wherever they are based. We will share how we developed efficient and flexible access to learning materials, experts and communities to deliver the programme.
- How we developed creative new partnerships of academics, expert clinical staff and Learning Technologists in order to deliver and develop materials. This included management strategies in order to ensure that effective e-learning could take place.
- The potential impact on the field of paediatrics and child health internationally

Lessons can be learnt from the experiences encountered by the team at Coventry University in the areas of consultation, innovation, design, construction and development of an e-learning programme. Delegates may benefit

from the lessons and challenges faced as it may assist in their own developments and use of e-learning.

OP32

ENGAGING CHILDREN AND YOUNG PEOPLE WITH PALLIATIVE AND COMPLEX CARE NEEDS

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Engaging with children, young people and their families with palliative and complex care needs requires intelligent ethical practice in which the practitioner works therapeutically and sensitively delivering high quality evidence-based care to meet the individual needs of the child and their families. Funding from the Department of Health in 2010 has permitted the design and development of an innovative module of learning aimed at practitioners working in the field of children and families. The module is aimed at all members of the multidisciplinary team which includes Registered Nurses, Advanced Nurse Practitioners, Midwives, Doctors, Physiotherapists, Occupational Therapists, Social Workers, and individuals working in health informatics, and charity workers.

This innovative module is unique in style of delivery and assessment. All elements of teaching and learning are based within a Virtual Learning Environment (VLE). The module has been developed in association with expert clinical practitioners, senior academics and in collaboration with the learning Innovation team. A small town 'Central City' has been created in a virtual world (Second Life) to augment 'real life' situations. Within the virtual world several buildings have been constructed that are considered appropriate to challenge the care management and delivery for children and young people with palliative and complex care needs. Within Central City the following can be explored: a children's hospital, children's hospice, community resource centre, multi-faith centre, school environments and different houses that present challenges to care and accessibility. The module uses Problem Based Learning (PBL) triggers within this safe environment through the assimilation of caseload management. Engagement of the learners and e-facilitators is expected through the interaction within the virtual world. Each participant requires an avatar to explore the virtual world and to immerse into the learning simulation. The module team will provide weekly direction and support.

Image of 'Central City' in Second Life



OP33

ASSESSMENT OF AN EDUCATIONAL-BEHAVIORAL INTERVENTION PROGRAM FOR PREMATURE INFANTS' MOTHERS IN NICU

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Introduction: Parents of preterms experience a higher incidence of depression and anxiety disorders along with altered parent-infant interactions and overprotective parenting, which negatively impact their children. Intervention programs initiated early in the neonatal intensive care unit (NICU) stay to reduce parental stress and empower parents to develop healthy perceptions and interaction patterns with their premature infants. Some evidence exists to support that mothers who rapidly engage in the care of their infants in the NICU tend to be more sensitive to their infants' cues and have better relationships with them in later years.

Purpose: To test a theoretical model examining the processes through which an educational-behavioral intervention program (COPE) influences maternal stress and maternal confidence in caregiving their premature infants during the NICU hospitalization.

Material - Methods: A preliminary analysis was conducted using data from a randomized controlled trial with mothers of preterm infants of Gaslini Institute who were randomly assigned to COPE or control conditions. The COPE program is a four-phase educational-behavioral intervention program and was delivered with audiotapes and matching written information that provide mothers with educational information about the appearance and behavioral characteristics of their premature infants and how mothers can participate in their infant's care, meet their infant's needs, enhance the quality of interaction with their

infant, and facilitate their infant's development. The comparison intervention contained information regarding routine education.

Results: Preliminary results (5 months) show there was a positive effect for the COPE program on mothers' reports of general stress and maternal confidence in caregiving with the experience of having their infant hospitalized in the NICU.

Conclusions: A reproducible educational-behavioral intervention program for parents that commences early in the NICU can reduce maternal stress in the NICU, improve maternal confidence in caregiving and enhance parent-infant interaction.

OP34

DOCTOR-NURSE EFFECTIVE COMMUNICATION: SITUATION BACKGROUND ASSESSMENT RECOMMENDATION (SBAR) SURVEY BETWEEN STUDENTS OF AN ITALIAN PAEDIATRIC NURSING DEGREE PROGRAM

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Introduction: Joint Commission on Accreditation of Healthcare Organizations (JCAHO) declared that communication is the source of 70% of sentinel events that occur in hospitals. Situation Background Assessment Recommendation (SBAR) enables to clarify what information should be communicated between members of the team. JCAHO recommended the use of SBAR to reduce communication failures. Doctor-nurse communication is a complex process where failure can lead to loss of information, inefficiency and poor patient care.

Purpose: To improve communication skills in paediatric nursing students using an active didactic methodology, Role Playing and follow up with the Situation Background Assessment Recommendation (SBAR) checklist.

Material - Methods: The Situation Background Assessment Recommendation (SBAR) checklist. Students of the Paediatric Nursing Degree Program (N. 24) of the 'G. Gaslini' Teaching Hospital of Genoa were divided into two groups and invited to participate in a 2-day meeting. The Role Play video was analysed using the SBAR checklist. In both of the simulations we gathered the information and then compared it with the SBAR items. We tested the students before and after administering the SBAR tool.

Results: The SBAR checklist gave rise to many reflections and comments during debriefing with students, who recognized the usefulness of this tool in facilitating a more effective organisation of the communication contents. The results of the discussion were processed and used to re-define the contents of the four constituent elements of the SBAR checklist.

Conclusion: These results pave the way towards the development of new approaches educational in the education of paediatric nurses. In particular, they allow to build communication skills that ensure a standard level of safe performance.

OP35

EVOLUTION OF CLINICAL NURSE-SPECIALIST (INCLUDING PEDIATRIC NURSE SPECIALIST) TRAINING IN ESTONIA

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Introduction: For the 1.4 million population of Estonia ca 10 000 nurses have been licensed by the national Health Care Board. Of them currently over 150 are nurse specialists. The Principles of Nurse Specialist Training (2003) stipulate that by 2015 there should be 1550 nurse specialists in Estonia, ca 20–25% of total registered nurses. Nurse specialist training curriculum was prepared within the project for training four different specialists: health-, mental health-, intensive care- and clinical nursing. In 2006 the first specialization training was actually conducted in the full capacity of 40 credit points (60 ECTS). The curriculum was evaluated and revised continuously 2006–2008; submitted for international accreditation in November 2008. By Spring 2011 two classes have finished clinical nurse-specialist studies. In 2011 the third class started with students who are pediatric nurses only.

Purpose: To describe the evolution of clinical nurse specialist training in Estonia.

Material - Methods: Descriptive research method and inductive content analysis was used. Research objects were the outputs of the European Social Fund financed project 'Developing Nurse Specialist Training', renewing curriculum of nurse-specialists and clinical nurse specialist courses syllabuses.

Results: There is one main category (development of clinical nurse-specialist training) which is divided into three subcategories: (1) changes in curriculum, e.g. small similar subjects were merged into bigger subject; (2) administrative changes, e.g. the first nurse specialist course started 2006 within project-based funding, since 2007/2008 State-Commissioned Education Agreement is in effect; (3) other changes, e.g. clinical-nurse specialist training field is too large (surgical-, geriatric-, pediatric nursing, etc). A temporary solution suggested is to have pediatric nurses enrolling in clinical specialist training 1 year and nurses working in a different field the other year.

Conclusions: Clinical-nurse specialist training has been well perceived and further analysis to get to know the weaknesses and strengths is crucial to even better meet the labor market needs.

OP36

IMPROVING TOYS WITH DRAMA METHOD IN CHILDREN'S HEALTH NURSING

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Introduction: Play is the most important tool which improves the child's global language, cognitive, psychomotor and social abilities. Play must include an aim to rehabilitate the child who is in hospital. By using dramatic play techniques, trauma can be decreased by nurses. They can help children to cope with their situation dealing with their misunderstandings and worries.

Purpose: The aim of the project is to make toy out of hospital material and make the student touch them and decrease their stress caused by being in hospital by helping them to use the material.

Material - Methods: 23 different material which is not considered medical waste is used in the project. The type of the search in empirical. Cosmos and sampling is composed of fifty five third class student in pediatric lesson in June-March 2011. Every student has made toy with 0–6 year children and them to play with this toy along this process.

Results: Students have made 19 different toys. If the toys are grouped according to age there are two types for 0–1 age, 17 different toys for 2–6 age. The most stressful parts such as syringe and branuls have been used for five different purposes (buton, leg, arm, cart, wheel, tail). When the toys are grouped by usage, four different toys are grouped by usage four different toys are used as anatomic babies. The processes child in hospital goes through have been showed by dramatic plays. Three types of toys have been used as a role play to deal with misunderstandings of children, their perception and improvement of their coping with their situation. Other toys are used for entertaining and helping to communicate. According the children cognitive, motor development, different colours, softness, hardness, acting features were used.

Conclusion: Toys made by child health care nurses should help to create communication with children and help to decrease their fear from hospital by using drama techniques and they can help to cope with anxiety and improve behaviours to cope with it.

OP37

A RELIABILITY AND VALIDITY STUDY OF TEAMWORK ATTITUDES QUESTIONNAIRE

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Introduction: It is imperative for health professionals to have teamwork skills, which primarily necessitates developing skills of interwork, cooperation and teamwork.

Purpose: This study aims to conduct a reliability and validity study of 'The Teamwork Attitudes Questionnaire' in order to investigate the attitudes of nurses and doctors towards teamwork.

Material - Methods: The study data were collected with a Personal Information Form and Teamwork Attitudes Questionnaire. The study sample consisted of 150 health professionals including nurses and doctors serving in a hospital. The questionnaire included five subdimensions and 30 items and its Turkish adaptation was made with back translation under the supervision of eight experts who analyzed the language and content validity and consequently omitted two items. The data analysis was carried out with confirmatory factor analysis; validity was tested with item analysis and reliability was measured with Cronbach alpha and split half tests. Confirmatory Factor Analysis affirmed that items were represented by five main factors as presumed in the original questionnaire. Model fit indices were found to be $\chi^2 = 690.62$, RMSEA = 0.084, GFI = 0.94, CFI = 1.00. Cronbach alpha interval was between 0.63 and 0.89 for internal consistency. The correlation coefficients of the questionnaire were reported between 0.22 and 0.81. The correlation between the items and the scores was noted to be statistically meaningful.

Results: Turkish version of TAQ was approved to be a valid and reliable measurement tool for determining the attitudes of individuals towards certain components fundamentally inquired by the questionnaire such as team structure, leadership, supervision, mutual help and communication.

Conclusion: It has been concluded that this study would certainly contribute to further studies on programs focusing on developing teamwork.

Keywords: Team work, Validity, Reliability, Attitude, Nurse, Doctor.

OP38

SOURCE OF STRESS AND COPING STYLES OF NEONATAL INTENSIVE CARE UNIT NURSES IN TURKEY

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Introduction: Nurses who work in critical care units inherently experience stress. The cause of stress has been attributed to such factors as the hi-tech environment, staffing problems, patient acuity, complex care needs of patients and families, death and decision making for crisis. Because of the nature of this highly specialized, the environment of the NICU is more stressful for nurses. Nurses in NICU must cope with numerous stresses that arise in working a complex medical unit.

Purpose: To identify stressors and coping styles in NICU nurses in the Turkey.

Material - Methods: The research instrument consisted of demographic data, Ways of Coping Scales and a list of

literature derived stressors. A cross-sectional, descriptive design was used. Six NICU's were randomly chosen from all country by region. One hundred and forty nurses from six hospital participated nationwide. Seventy nurses (50%) responded to the postal survey.

Results: The average age of nurses was 27.12 ± 3.74 years, length of professional service 4.6 ± 4.04 years, length of NICU service 3.7 ± 3.49 and the number of patients served by a working day was 5.4 ± 2.22 . In terms of list items, 'excessive workload' was the most stressful item and 'feelings of inadequacy' the least stressful item. It was found that nurses used 'self confident approach' as the most frequent way coping with stress and 'submissive approach' the least. As stressors have been classified as level is high, medium and low stress level, first approach was self-confident, and seconds were optimistic and helpless approach in all level.

Conclusion: Nurses in the face of stressful situations, first used approach was self-confident, regardless of the level of stress.

OP39

MOTHERS' KNOWLEDGE AND PERFORMANCE ABOUT DIAPER RASH IN INFANTS WITH DIARRHEA (2011)

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Introduction: Diaper rash is one of the most common skin disorders, occurring in 50% of infants, with 5% having severe rash. Diaper rash, is the term used to describe an irritating condition that develops on the skin that is covered by a diaper. The peak incidence is between 9 and 12 months of age. In infants with diarrhea and the infants with diapers disorder have been seen more and more especially when the diaper may not be changed every 4-6 h. Due to its complications on skin and anal area, it need to more attention is needed by mothers and caregivers.

Purpose: The aim of this research is to assess the mothers' knowledge and performance about caring diaper rash in infants' with diarrhea.

Materials - Methods: A descriptive-analytical research was conducted. We assess 231 mothers of infants between 6-60 months of age with diarrhea. Data gathered through a researcher-administered questionnaire and interview by a professional. The validity of questionnaire confirmed through experts (Pediatricians, Faculty members in nursing, health professionals) and its reliability after distributed in a sample of 30 mothers gained a Chronach's alpha of 93%. Data were analyzed by experts with SPSS version 16.00. During the interview, after gaining the data, professional taught the mothers about diaper rash in diarrhea too.

Results: Finding showed that the majority of mothers (90%) have not any knowledge about caring of diaper rash after diarrhea. Their knowledge was weak and they did not know how they should treat or behave with diaper rash.

About gaining information about skin care of diaper said we have not more information and knowledge to care it effectively (76%). Analysis of questions about knowledge and performances highlighted that the mothers' knowledge about care of diaper rash was weak and their performances was weaker. Those mother who had diploma had more knowledge and they noted that they received this information from health professional more than other resources as media and newspapers. The results after teaching through interview, showed that their knowledge was increased and they said that this interview was more than others teaching methods.

Conclusion: Considering the weak result about knowledge and performance of mothers about diaper rash in infants with diarrhea and its complications, promotion of their knowledge suggested through health workshop and others training meeting by professional and governmental official is necessary.

Keywords: Diaper rash, Performance, Knowledge, Mother.

OP39A

CHILD AND FAMILY-CENTERED HEALTH CARE INITIATIVE IN SERBIA

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Introduction: Medical procedures and interventions in the hospital for the purpose of diagnosis, treatment and care are often the cause of significant pain and discomfort in children. Pain, discomfort, anxiety and fears are exacerbated by the unfamiliar surroundings, with "strange-looking" people and equipment, and the fact that the child's significant others (parents, siblings, friends) are not always present. This situation is changing in hospitals that provide child-friendly and family-centered care.

With support from the Ministry of Health, Partnerstvozazdravlje, a Serbian NGO, is implementing the project "Hospital—a friend to children and families" to introduce this approach to pediatric wards in Serbia.

Purpose: The child and family-centered health care initiative aims to reduce unnecessary stress and pain in hospitalized children by educating healthcare workers and non-medical workers about child rights, development, pain management, hospital play, preparation/coping and communication.

Material-Methods: The implementation of this approach is based on The Child-Centered Health Care Trainer Manual (Schwethelm, Capello, Brylske, & Munn, 2010); In order to measure the current situation in Serbian pediatric wards the hospital assessment questionnaire was developed; 30 questionnaires and indicator lists were sent; 22 hospitals responded. Training for trainers course was conducted for multidisciplinary teams from 6 Serbian and two Macedonian children hospitals to provide them with knowledge, skills and materials to train other in Child-

Family-centered. In Phase II, the trainer teams are assisted in a hospital-by-hospital implementation.

Results: Implementation started 11/2010; 30 courses for nurses/teachers were completed; 100 nurses/teachers passed the trainings; the nursing students from one local Nursing School passed the trainings as part of pre-service education during their final year; training pre- and post-test results are available. Monitoring of the implementation of the gained knowledge and skills shows that child- and family-centered health principles are becoming a part of everyday practice.

OP40

IS PERCEIVED SOCIAL SUPPORT AND SELF-EFFICACY ON THE PRIMARY SCHOOL STUDENTS RELATED?

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Introduction: Research about perceived social support and self-efficacy especially during adolescence are insufficient in Turkey.

Purpose: This research was carried out on the primary school students for the purpose of investigating the relationship between perceived social support and self-efficacy and the variables affecting them.

Material - Methods: Study sample was composed of 760 students aged between 11 and 15 years studying in 6th, 7th, and 8th grades at seven primary schools with different socio-economic levels in Aydın and İzmir centers during 2010–2011 educational period. The research data collected from the students by employing Student Information Form (included weight, height, body mass index percentile, gender, grade level, status of sport...) Child and Adolescent Social Support Scale which measures perceived social support and Middle School Self-efficacy Scale which measures self-efficacy. In data analysis number and percentage distributions, t test, variance analyses and for further analyses Duncan test have been used. Correlation technique has been employed for the purpose of examining the relationship between the scales.

Results: It has been found that variables such as gender, grade level, economic status of the family, perceived health status by the student and success have affected perceived social support and self-efficacy in primary school students and that there is a positive relationship between perceived social support and self-efficacy. It has also been determined that the perceived social support in adolescents has affected the self-efficacy skills of the adolescents.

Conclusion: It is recommended that nurses dealing with adolescent health should guide the adolescents using social support and health self-efficacy on gaining skills as to health protection and promotion and take over the responsibility of their own health.

Keywords: Primary school children, Social sport, Self-efficacy.

OP41

REFLECTIONS OF TRACES OF THE PAST NOW (PROBLEMS IN ADULTHOOD OF CHILDHOOD SCARS)

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Introduction: The traces of what happened in childhood affects the lives of adults in everyday life. Especially, in childhood who stay away from family support and used to care in child protection system. They lived some difficulties in child protection system and this past living experience negatively affect adult women and men future life. Social awareness and to solve the problems of children and families who are in need of protection to be addressed in publications and examples of solutions to the problems important to the revival.

Purpose: To determine what is published in Turkey in the past lived experiences of children in need of protection and within how related issues will impact their lives.

Material - Methods: Protection of need for life that the characters appearing on the radio and television (TV) publications histories reflected the characteristics of the characters that contain traces of solutions to the problems in their publications. For the purpose of research publications in the years 2004–2011 which screened in publications related to children in need of protection 12 Television (TV) series children who need protection from childhood to adulthood in the past and are still in need of protection as well as family, work, military service duties and responsibilities given to individuals (29 characters) on the observations were made. These motherless-father (12) single-parent (7), on the street working children (5) living again the legal parents after divorced parents (4) living child protection institution's and parent cared protection system (1) the effects of taking care institution in the life style approach to the problems of individuals living on the tracks, was investigated.

Result: First of all lack of attachment problems of three children's and parents, and the feeling of being unwanted and unloved children beginning of the life. They are getting the person is not satisfied, fulfilling the responsibilities of either the environment or himself forced to 'feel helpless' experiencing problems such as not to fulfill responsibilities. The solution of problems in the past could not get near the mother father about support, instead of a people with any individual to show support these (come from child protection system) adults. It is a place/behavior support that feeling of belonging to the family/group were shown.

Conclusion: Nurses working with children in need of protection, these solutions can be reflected through publications reminded initiatives.

Keywords: Child protection, Family supports publications, Past problems, Solutions.

OP42

ASSESSING PEDIATRIC MOOD DYSREGULATION: AN ESSENTIAL SKILL FOR PEDIATRIC NURSES

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Introduction: Approximately 1 in 5 children and adolescents are affected by a behavioral, emotional or psychiatric disorder at some time before they reach adulthood with many experiencing symptoms for up to 4 years before they are adequately diagnosed. The financial, relational and poor quality of life costs to young people during their formative years is significant.

Purpose: This presentation will provide the pediatric nurse with information on how to effectively assess mood dysregulation in the pediatric population and understand the relationship between the clinical presentation and the psychiatric or behavioral diagnosis.

Materials - Methods: Clinical data, a comprehensive review of the literature on mood dysregulation in the pediatric population and treatment best practices will be presented.

Results: Mood dysregulation refers to behavioral, psychological and physiological impairment in the normal regulatory mechanisms associated with mood or affective states resulting in a clinical picture of depression, dysthymia, hypomania or mania. Untreated mood dysregulation can progress to a psychiatric diagnosis, self medication, risk taking behaviors, substance use and poor self-esteem. While epidemiological data on the prevalence rates of mood disorders in children and adolescents varies, what is known is that onset in childhood has a poorer prognosis. The World Health Organization estimates that by 2030, mood disorders will become the leading cause of Global Burden of Disease among the non-communicable diseases. The presentation of mood dysregulation in the child and adolescent population can be confusing, variable and frustrating making accurate diagnosis problematic and effective treatment challenging. With the anticipated release in 2013 of the Diagnostic and Statistical Manual of Mental Disorders V (DSM-V), additional evidence-based criteria specific to the pediatric population have emerged to assist with our understanding of this complex cluster of symptoms.

Conclusion: Evidence-based treatment options can assist nurses in their role as advocates for children and adolescents in inpatient settings, schools and communities.

OP42A

POST-TRAUMATIC STRESS DISORDER IN ADOLESCENTS AFTER A MOTOR VEHICLE ACCIDENT IN GREECE

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Introduction: Although post-traumatic stress disorder (PTSD) in children has been widely studied after a traumatic event, little is known of its appearance in adolescents after motor vehicle accidents.

Purpose: To study PTSD symptoms in adolescents after a motor vehicle accident, the identification of these symptoms by parents and factors associated with it and the coherence between parent and adolescent description of the above symptoms.

Material - Methods: Participants were 47 adolescents, 11–21 years of age who were hospitalized in Intensive Care Units in Hospitals of Athens after a motor vehicle accident. The data was collected with the Child Posttraumatic Stress Reaction Index (CPTS-RI), 6 weeks after the traumatic event.

Results: The majority of adolescents was boys (68.1%), while 66% was 11–17 years old. Approximately 83% was of Greek origin while 42 adolescents resided in Athens. The fathers' age ranged 35–56 years while the mothers' age ranged 31–52 years. The majority of the participants were car passengers, 27.7% were motorcycle drivers and 6.4% were bicycle drivers or on foot. Approximately 59.6% of the adolescents had mild or moderate symptoms of increased arousal, 44.7% moderate revival symptoms and 46.8% moderate avoidance symptoms. The parents identified the above symptoms 55.4%, 39.8% and 19.1% respectively. Statistically significant correlations were found between age of the adolescents and intensity of the PTSD symptoms ($P = 0.002$) as well as between gender and increased arousal symptoms described ($P < 0.0001$). Occupation and educational level of the father were statistically significantly correlated with the description of symptoms by adolescents ($P = 0.01$ and $P = 0.01$ respectively), as were the occupation and educational level of the mother ($P = 0.002$ and $P < 0.0001$ respectively).

Conclusion: Adolescents had significant levels of PTSD symptoms after a road accident that were also identified by their parents.

OP43

DEALING WITH MEDICATIONS IN HOSPITAL WARDS: WHAT IS THE REALITY?

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Introduction: Contributory factors to nursing medication errors are manifold, and include both individual and systems issues.

Purpose: Aim of this study was to record nurses' routine regarding medication administration in everyday clinical practice.

Materials - Methods: A self-answered, anonymous questionnaire was distributed to nurses working in randomly selected clinical settings around the country. The questionnaire consisted of two sections: (1) socio-demographics data and (2) yes/no questions regarding the basic principles on drug administration (total = 30 questions). We performed χ^2 test to identify associations between qualitative variables.

Results: Four hundred and thirty-four nurses completed the questionnaire (response rate 86.8%). The sample consisted of pediatric nurses (19.4%), cardiovascular nurses (12.6%), intensive and emergency nurses (26.5%) and internal medicine nurses (21.9%). Mean time of clinical experience was 14 ± 9.6 years, and the current position experience was calculated at 7 ± 6.6 years. Almost all nurses (97.9%) stated that they follow the protocols and the policy of their hospital, irrespectively of their department ($P > 0.05$), and in the half of the wards medications were administrated by one nurse at a time. A 78.2% of nurses claimed that they don't implement medical order without signature, while 44.7% administered drugs without a written order, but this finding had a significant association with their working department ($P < 0.001$). The 5.9% nurses who stated that they delivered drugs through unreadable prescriptions had also an association with the department ($P < 0.001$). In case of incomplete medical order, 60.6% stopped the therapy, 97.4% communicated with the doctor and only 6.1% completed the order according to clinical experience. A 50.7% of the nurses reported that they may use different regimen than the prescribed one.

Conclusions: Although clinical nurses follow the basic steps and strategies for drug safety, in everyday clinical practice they seem to have habits potentially harmful. Identifying the deficits and improving practice must be constant goals in all nursing settings.

PP01

AN ASSESSMENT OF THE QUALITY OF LIFE OF CHILDREN AGED 4 TO 7 WITH A CORROSIVE ESOPHAGEAL BURN AND AN ANALYSIS OF THE CONSISTENCY BETWEEN THE ASSESSMENTS BY PARENTS AND CHILDREN

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Introduction: Although corrosive esophageal burns affect the life quality of children and families, the literature in our country as well as elsewhere lacks studies to determine the life quality of children who previously experience such burns.

Purpose: This study is of a descriptive character and attempts to evaluate the life qualities of children aged 4–7 with a corrosive esophageal burn and to analyze the consistency between the assessments by parents and children.

Material-Methods: The research was conducted from 1 May to 30 November 2010. The sample of the study was made up of 100 children aged 4–7 with a corrosive esophageal burn, who were under follow-up at the Polyclinic of Pediatric Surgery at three hospitals. A ‘child description form’, a ‘parent description form’, and the Kid-KINDL which aims for a child and his parents to assess the life quality of the child, were employed as the tools for data collection in the study.

Results: When compared by means of the Wilcoxon test in order to assess the consistency between the child’s and the parents’ evaluations of the child’s life quality, $Z: 0.131$ and $P: 0.896$ were seen not to be significantly different. The KINDL life quality point averages as assessed by the KINDL child and the KINDL parent were identified, respectively, as 34.55 and 34.11 out of 100. When the relation between the points obtained from the KINDL life quality point averages of children with a corrosive esophageal burn were found to be low. When the relation between the points obtained from the KINDL life quality child assessment form and the KINDL life quality parent assessment form were examined by means of the Spearman correlation test for a confidence analysis of the child’s and the parents’ evaluations of the child’s life quality, the two measurement points of $r: 86$ and $P: 0.000$ were identified to be in a positive, strong and statistically highly significant relationship.

Conclusion: The life quality point averages of children with a corrosive esophageal burn were found to be low.

PP02

USING CORTICOIDS FOR PEDIATRIC ONCOLOGY PATIENTS – THE ROLE OF THE NURSE

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Introduction: The use of corticosteroids in paediatric oncology patients is very frequent and diverse, being a key medicine in the treatment of neoplasms mainly of lymphatic origin, such as lymphoblastic leukemia, Hodgkin’s and non-Hodgkin lymphoma. The sensitivity of to the corticosteroid appears to be not only prognostic for the outcome of leukemia, but is also associated with serious complications during treatment, such as the Cushing syndrome, obesity and decreased bone mass.

Purpose: The purpose of this paper is to describe the role of the pediatric nurse in order to prevent and deal with the complications caused from the use of corticoids.

Material-Methods: A literature review of articles published during the last decade was conducted using appropriate keywords.

Results: The implementation of appropriate measures, the immediate assessment and early treatment of any complications caused by the use of corticosteroids have been proved to be decisive steps for the entire course of the treatment of children with cancer, combined with best quality nursing.

Conclusions: The prevention, avoidance or reduction of any proven short term complications of corticosteroids in children with cancer makes chemotherapy more tolerable, which is crucial for the entire course of child’s treatment and the subsequent quality of its life.

PP03

THE IMPORTANCE OF QUALITY OF LIFE FOR CHILDREN WITH CYSTIC FIBROSIS

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Introduction: Cystic fibrosis (CF) is a life-shortening and multisystemic autosomal recessive disorder in the Caucasian population. It is characterized by lung disease, pancreatic insufficiency, malnutrition and high concentrations of sweat electrolytes. Approximately one out of 2500 newborns in Greece suffers from this disorder. The life

expectancy is estimated to be 35–40 years, and no curative treatment has yet been found. Considerable progress has been made in defining and measuring health-related quality of life (QOL) to children with CF.

Purpose: The aim of this study is to examine the importance of adopting multiple health-related behaviours of children with CF and their families, in order to gain a good quality of life.

Material-Methods: A search in electronic databases and libraries for articles published between 2000 and 2011 was made using the terms ‘quality of life’, ‘children’ and ‘cystic fibrosis’. The studies that were included measured QOL and focused on young people’s experiences with CF. A total of 39 studies were identified. These articles were written in the English language and cited in MEDLINE PubMed and Libraries of Medical Science.

Results: Most studies suggest that self-management of the disease has a considerable impact on meaningful health outcomes in this population. Moreover, 18 researches imply that exercise, family cohesiveness and supervised health programs may improve the ability of the patient to cope with the physical demands of everyday life, and may improve prognosis. On the other hand, 21 studies suggest that disease severity, pain, anxiety, cachexia, abnormal FEV1, low socioeconomic and minority status, family malfunction, and hospitalization mainly have a negative impact on the quality of children’s life.

Conclusion: The QOL and psychological well-being of children with CF are now recognised as significant factors. Therefore, a good QOL is necessary to establish balance among the social, psychological and physical domains adjusting the patients’ expectations to their living conditions.

PP04

WITHDRAWN

PP05

SUMMER CAMP FOR CHILDREN AND TEENS WITH EPILEPSY – NEW EXPERIENCES IN THE WORK OF NURSES

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Introduction: Professional team working together with children on mutual exchange of experience and expanding knowledge about epilepsy for general population.

Purpose: Emphasize the importance of organization summer camp for children with epilepsy.

Material-Methods: There were 10 girls and 10 boys from 8 to 18 years, with good control of epilepsy, taking AEDs, without associated handicap. The children were integrated into regular camping program and participated in all camp

activities. Camp staff included paediatric neurologist, psychologist, paediatricians, registered nurses, trained volunteers and camp personnel. Nurses participated in planning schedule of work, collecting data on the habits of children, nutrition, and social adjustment. Nurses were actively involved in all educational and creative activities and programs. The goal was to improve children’s knowledge of seizures, importance of medication, discussing with teenage girls and boys about problems in groups or in one-on-one time.

Results: Eight educational lessons provided by neuroepidemiologists, psychologist and neurologist, evaluated at the beginning and at the end by questionnaires. The analyses of questionnaires showed that 15/20 children knew they had epilepsy, none knew what epilepsy is. One child had grand and one petit mal seizure during the camp. Results of nurse’s work was visible in children’s independence, self-esteem and self-confidence.

Conclusion: All campers discovered they were not alone in having epilepsy and were encouraged to reach their full potential, to live an active life with epilepsy. Nurses had a new challenge and a new form of administering health care which is beyond the scope of hospitals and other institutions.

PP06

SYMPTOMATOLOGY OF CYSTIC FIBROSIS IN CHILDREN

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Introduction: Cystic fibrosis is the most common hereditary disease of the white tribe that strikes more than 30 000 children and youngsters in 30 European countries. More specifically, in Greece there are more than 700 suffering children while each year 70–90 new cases are diagnosed. Main characteristic of the disease is the gradual destruction of many organs’ tissue. Lungs and pancreas are the main bludgeoned organs.

Purpose: The present paper aims to the briefing of the public and more specifically the parents as long as the symptoms of the disease are concerned, so that they receive the needed information.

Material-Methods: The material of the study consists of chosen publications in the Greek and English language, relevant to the issue. A review and a study of the electronic data bases| Medline, PubMed and Cinahl took place. As index words, we used the words cystic fibrosis, hereditary diseases and pediatrics nursing.

Results: The seriousness of the symptoms can vary while the most common of them are the following:

(1) Symptoms of the respiratory system: (i) persistent coughing; (ii) breathlessness; (iii) repeating chest infections that damage the lungs.

(2) Symptoms of the digestive system: (i) Malnutrition that leads to small physical growth and weight; (ii) swollen belly; (iii) constipation; (iv) big sized oily stool with very bad smell.

(3) General symptoms: (i) repeating infections of the sinuses; (ii) osteoporosis that shows up because of the bad absorption of vitamin D; (iii) liver damage that can lead to cirrhosis, diabetes, pancreatitis.

Conclusion: The disease can be traced in time with a screening test, while in babies a control for cystic fibrosis takes place when they present with nursery ileum from meconium or with the sweat test. But if the symptoms are mild, they might delay.

PP07

NURSING DIAGNOSIS IN THE CHILD WITH DIABETES MELLITUS: A CASE STUDY

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Introduction: The development of clinical skills in the nursing care and management of children with diabetes families is of great importance. Nurses have the ability to assess, plan, implement and evaluate appropriate evidence based care in the nursing management of children with diabetes in the healthcare setting and in the community. It is also very important to evaluate the role of the pediatric nurse in meeting the health promotion and education needs of the child with childhood diabetes along the life continuum

Purpose: The purpose of this study was to discuss the caring and nursing interventions according to North American Nursing Diagnosis Association (NANDA) nursing diagnosis of children with diabetes.

Material-Methods: A case study design was used. The obtained dates were evaluated according to nursing diagnosis accepted by NANDA which is widely used internationally.

Results: The male patient was 7 years old. The patient was admitted with signs of ketoacidosis to the hospital. Patient was diagnosed with diabetes mellitus. There was a variety of nursing diagnoses according to the patient's clinical condition.

Nursing diagnosis: Ineffective breathing pattern, nausea, deficit fluid volume, change nutrition pattern, altered oral mucous, anxiety, ineffective family coping, ineffective management of the therapeutic regimen, caregiver role strain, risk for infection.

Conclusions: The patient and his family were able to express their feelings and concerns about disease. The patient and his family are given information related to diabetes management by the nursing staff.

PP08

WHY SEXUALITY EDUCATION IS IMPORTANT FOR PARENTS OF ADOLESCENTS WITH INTELLECTUAL DISABILITIES?

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Introduction: In general, sexuality is still a taboo subject, and up to the present time, the sexuality of individuals with intellectual disabilities has been a matter of both fear and denial.

Purpose: to describe the role of health care professionals that provide the parents of adolescents with intellectual disability the professional education on sexual issues, and reduces the chance for misinformation.

Material-Methods: review of recent literature using the next keywords: Sexuality Education, Adolescents with Intellectual Disabilities, Parents.

Results: Sexuality and adolescent with developmental disabilities has been identified as a problem, because it is not an issue, or is an issue, because it is seen as a problem. Individuals with developmental disabilities, intellectual disability, face barriers to expressing their sexuality. Barriers contain social myths, insufficient knowledge, personal discomfort, and limited access to available and appropriate educational resources. Such barriers may result in a lack of guidance, opportunity, emotional support, education, or acknowledgment of sexuality by caregivers. Although positive sexuality education is important for any population, it should be a priority for people with disabilities. Unfortunately, wrong attitudes regarding sexuality and people with developmental disabilities may interfere with sexuality education for this population. Parents are their children's primary sex educators, but many parents avoided talking about sexuality with their children with intellectual disabilities. Parents and health care professionals must understand these issues and offer help. They can help prepare these individuals to develop healthy relationships and protect themselves from unhealthy situations. Further, most current sexuality education programs focus on isolated aspects of sexuality, and these are generally areas which are seen to present potential problems in people's lives.

Conclusion: Sexuality education comprehensible to children and youths with disabilities sets the stage for a healthier, safer, socially acceptable and more fulfilling sexual life in adulthood.

PP09

EDUCATIONAL PROGRAMMES FOR CHILDREN WITH AUTISM

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Introduction: In the Europe the educational programs for children with autism vary from country to country. Despite

that fact, a series of recognized programs have been developed and have showed a certain amount of success for the improvement of the functionality of children with autism.

Purpose: In the present paper the contribution of the educational programs to the therapeutical treatment of children with autism is being analyzed.

Material-Methods: The material of the study consists of chosen publications in Greek and English language, relevant to the issue. A review and a study of the electronic data bases of Medline, Pubmed and Cinahl took place. The words: autism, child, educational programs and mental illness were used as index words.

Results: Although there are different approaches to the treatment of autism, they all share a common goal: to improve the function and the integration of the child as a whole.

The effective behavioral management programs include: Integration of autistic children in normal care environments or school classes so that the other children may function as role models. Education of all the people in touch with the autistic child to ensure a cohesive approach to the behavioral project that takes place along with the child. If the parents aren't sure about the proper educational program for their child, the doctor should be able to give information for the specialists, the schools and the educational and care- providing facilities

Conclusions: Behavioral education and the use of educational programs for the management of a child with autism are important for their therapeutical treatment. Specialists believe that the management of their behavior must be supplemented with the structural teaching of skills, so that the conquest of linguistic, communicational, social and skills will be made easier.

PP10

ASSESSING THE QUALITY OF LIFE IN CHILDREN AND ADOLESCENTS WITH CANCER AT ANY STAGE OF TREATMENT AND UPON COMPLETION OF TREATMENT

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Introduction: Children suffering from cancer are a particularly vulnerable group of patients showing a higher risk of psycho emotional disorders resulting in low quality of life.

Purpose: The purpose of the review was to examine the available data concerning the assessment of quality of life

of children and adolescents with any form of cancer in each phase of treatment.

Material-Methods: A bibliographic review of articles and reviews published during the period 2000–2011 was conducted using the databases Pub Med, Cinahl and Medline 65 studies, with the following keywords: children, adolescents, cancer, quality of life.

Results: The study of published material shows that children and adolescents with any form of cancer presented at the time of the diagnosis decreased physical activity, autonomy, self-esteem and depression, emotions that affect negatively their quality of life. The course of disease and treatment has an enormous impact on children, creating intense anxiety symptoms and anger. Children and adolescents who experience complications or unresponsiveness to treatment have low quality of life compared to children who respond well to treatment protocols. Those who successfully complete treatment have good quality of life and positive perception about the state of health, although other studies indicate that survivors often suffer disorders concerning their interpersonal relationships and behaviour.

Conclusions: The researchers stress that it is necessary to implement psychosocial interventions individualized for each patient and suggest the involvement of the family in care in order to improve the quality of life for their children.

PP11

THE CYSTIC FIBROSIS PAEDIATRIC NURSE SPECIALIST

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Introduction: The cystic fibrosis (CF) is a complex disease that requires a holistic approach by Paediatrics Nurses Specialists who participate actively in the decision making regarding the coordination of care of these children and their families, their support and their education not only inside the hospital but also in the community.

Purpose: The purpose of the review was to examine the current literature on the role of the Paediatric Nurse Specialized in children with CF.

Material-Methods: A bibliographic review of articles published during the period 2000–2011 was conducted using the databases PubMed, Cinahl, Medline and National Institute for Health and Clinical Excellence (NHS).

Results: The study of published material reveals that the cystic fibrosis Paediatric Nurse Specialist has a five-fold responsibility to patients and their families as well as to the

staff involved in the care of those children. These areas include: advocacy, clinical management, advice and support, education, research and management. Each patient will be cared or supported by specialist nurses who have knowledge and experience of the CF disease process along with the clinical and psychological outcomes, and are especially aware of: psychological issues – living with a life limiting disorder, issues surrounding diagnosis, nutritional requirements, enteral feeding, CF related diabetes, intravenous therapy, respiratory complications and support, nebulizer therapy, care of indwelling venous devices, infection control, liver disease, terminal care and symptom. The Paediatric Nurse Specialist will keep on supporting the patient in the community to ensure that the high standard care provided in the hospital is continued. The Paediatric Nurse Specialist will be responsible for promoting self care and responsibility in the young adult and offering support and advice to the parents.

Conclusions: The cystic fibrosis Paediatric Nurse Specialist coordinates the care provision between patient and family, community services and hospital, both practically and psychologically. This is achieved through the practice of their role as an educator, a consistent caregiver, a counselor and a confidant.

PP12

WITHDRAWN

PP13

THE PREVALENCE OF OVERWEIGHT AND OBESITY AMONG 7–15 YEARS OF AGE IN AYDIN

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Introduction: Obesity among children is a problem in both developed and less developed countries around the world. Obesity in childhood might lead to life threatening chronic diseases and to negative psychological consequence.

Purpose: The study aims to determine the prevalence of overweight and obesity among the school age children in Aydın.

Material-Methods: Study sample was composed of 2331 students (1101 female and 1230 male) aged between 7 and 15 years studying at five randomly selected public primary schools with different socio-economic levels in Aydın center. Physical measures (i.e. weight, height) were obtained for all children, all of which were measured using widely utilized procedures. Each student's weight was measured using a calibrated medical scale (max 200 kg, 450 lbs, 32 sts, d = 0.1 kg/0.2 lbs) and his/her height was measured using a millimetric height scale. All adolescents were asked to remove their shoes for these measurements.

BMI and BMI percentile were calculated for each student participant using a Auxology program. BMI values higher than 95 percentile were accepted as being obese and those in between 85 and 94 percentile are accepted as overweight.

Results: It was found that the prevalence of overweight among girls and boys was 12.9% and 13.6% while the prevalence of obesity among girls and boys 13.7% and 21.5%. There was no significant differences in the prevalence of overweight and obesity between ages ($P > 0.05$). While it was found that prevalence of overweight and obesity significantly higher at boys ($P < 0.05$).

Conclusion: The prevalence of obesity is higher in boys independently of their age.

PP14

RISK FACTORS THAT AFFECT THE DEVELOPMENT OF OBESITY IN ELEMENTARY SCHOOL STUDENTS

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Introduction-Purpose: This research study determines the risk factors affecting obesity in students in the 6–15 years old age group.

Materials and methods: There were 868 students registered at an elementary school in Zonguldak city and were present at school on the days data was collected for research purposes. Data was collected using demographic questionnaire forms and weight–length measurements from March to April in 2010. The data was analysed by using percentage, average, standard deviation and chi-square tests of the SPSS 13.0 package program.

Results: Statistically significant differences were found with respect to the relationship between obesity of children and their age, gender, number of siblings, fathers' jobs, education level of their mothers, fast food consumption and family history of obesity ($p < 0.05$).

Conclusions: The study concludes certain criteria to be related to the development of obesity in a specific period of childhood and that taking certain precautions are effective in preventing the development of obesity.

PP15

THE HISTORY OF VACCINE AGAINST DIPHTHERIA

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Introduction: Diphtheria is a serious childhood disease which is still endemic in poor and underdeveloped countries, although the mass vaccinations after 1940 nearly annihilated this problem in developed countries.

Purpose: This historical review describes the journey of the history of diphtheria vaccine and use thereof.

Material-Method: The material of the study was selected published articles and studies on the subject in English and Greek language. Took place review, study and analysis of electronic databases Medline and Cinahl. Were used as index words: vaccines, diphtheria vaccinations, vaccine against diphtheria.

Results: Diphtheria got its name from the Greek word for skin 'diphtheria', in 1885 by French physician Armand (1801–1867). Often cause epidemics with high mortality, especially in the paediatric population that's why it was called 'strangler' of children. In 1884, Friedrich Loeffler discovered the bacterium that causes diphtheria. In the 1890's Emile Roux and Auguste Chancellou from the Pasteur Institute and the Americans Williams H. Park and Ann Wessels Williams developed a diphtheria antitoxin. In the 1890 also, the German physician Emil Von Behring developed an effective anti-toxins for diphtheria. He also discovered that animal blood contains anti-toxins so he took their blood, removed the coagulating factors and gave it to the people, who were well. Furthermore, in 1913 launched the first successful vaccine against diphtheria. According to Magnus, Behring comforted waiting for death to read letters from children around the world whose had saved their life because of vaccine against diphtheria.

Conclusions: Diphtheria which in 1930 was a leading cause of child mortality worldwide, through the mass vaccination programs after 1940, almost annihilated at least in developed countries.

PP16

ITINERARY IN THE HISTORY OF VACCINES

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Introduction: The use of vaccines is one of the major interventions in the field of Public Health which has managed to reduce child and infant mortality in modern societies.

Purpose: This historical review presents the history of vaccines.

Material: The materials were relevant to the subject studies in English and Greek language.

Material-Methods: Investigated the databases Medline and Cinahl, were used as index words: vaccines, history of vaccines, preventive medicine.

Results: The first types of vaccines were discovered in China before 200 BC and India in 1000 AD. The first sample of vaccines derived from China (17th century) and contained eschar healing smallpox powder. The Ottoman Turks also knew (17th cent.) methods of vaccination against smallpox using the vaccinia virus isolated from the bovine udder and then vaccinate their children. Revolution

finally came from a leading English physician E. Jenner who discovered the vaccine against smallpox (1796). L. Pasteur (19th century) invented vaccinations against anthrax and rabies. Pasteur adopted the term vaccine, in honour of the discovery of Jenner. At the same time (1889), the German microbiologist E. Behring discovered the vaccine against diphtheria and tetanus. In the early 20th century important was the discovery of the TB vaccine (BCG) by the French A. Calmette and C. Guérin. In the middle of the same century Americans J. A. Salk and Sabin, discovered the polio vaccine. Other important vaccines such as tetanus, whooping cough, measles, mumps and rubella were discovered in 1914, 1957, 1964, 1967 and 1970, respectively. The 20th century had also the vaccine of pneumococcal pneumonia by Austrian and hepatitis B by Hillman and a large group of vaccines with the method of recombinant DNA were added to the armory of human beings.

Conclusions: Looking back to the past we find that the therapeutic advances in vaccines from 1880 and then were very large and quite successful in the area of defending health.

PP17

HANDICAPPED CHILDREN IN ANCIENT GREECE

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Introduction: The handicapped children in the ancient Greece were supposed to be creatures that had lost their human nature and they were responsible for their disabilities, while the others were seized with fright when they looked at them.

Purpose: In this review, based on historical data, are underlined the ancient Greeks' views on disability, handicapped children and also on how these children should be treated.

Material-Methods: Select published articles, in Greek and in English, that refer to ancient Greeks' opinion and attitude towards the handicapped children and disability, formed the material for this research. Search in the electronic databases IATPOTek, Medline, Pubmed & Cinahl was conducted, using the terms "Ancient times, Ancient Greece, Disability, Handicapped children".

Results: In ancient Greece, as in other cultures, handicapped children have been usually treated with cruelty (beatings, abandonment and infanticide) and their life did not exceed its infancy. In ancient Sparta, disabled children were considered needless and were thrown at Kaiadas gulch. In Thebes although there was a law prohibiting the killing of infants, it was rarely implemented. Unlike in Athens, there was a specific law in favour of the weak protecting the handicapped. Philosophers of this era had

similar perspectives concerning the disabled children. Aristotle and Plato demanded by law the fire exposure of all infants having multiple congenital abnormalities. Lycurgus also imposed by law the examination of the newborn by the Sparta's elders. The ones that had multiple abnormalities were thrown in a steep ravine of mount Taygetos, called 'the Depositors'. Solely Hippocrates tried to address disabled people in a scientific way and his conclusions had significant importance for the time.

Conclusions: Disabled children in ancient Greece were vulnerable and particularly at risk both from the humans and the institutions of each state, too.

PP18

DIETARY PATTERNS OF PRE SCHOOL CHILDREN IN GREECE

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Introduction: Preschoolers' feeding is a challenging and complex process. Ongoing experience of foods, environmental and cultural factors along with the feeding practices parents use can influence their children's eating habits.

Aim: To examine the food preferences and dietary habits of Greek pre-school children and the most important factors that influence them.

Methods: Two hundred and nine parents of preschool children (0–6 years old) from public and private day nursery schools in the Northern Greece were recruited. An anonymous structured questionnaire was used.

Results: A 40.2% of parents report an obese family member and 4.3% with anorexia symptoms. They were informed about their child's nutrition by a paediatrician ($n = 138$, 66%) or a paediatric nurse ($n = 45$, 21.5%). The majority of mothers ($n = 175$, 88.3%) stated that they breast fed their child for a mean period of 2.94 months. A 98.1% of parents feed children aged 1–2 years with whole milk, while the 93.6% includes in their child's diet and other foods rich in calcium. A 56.9% of parents consider breakfast as the most important meal of the day. Consumption of fruits (84.2%), vegetables (73.7%) and red meat (86.1%) was consistent. Intakes of vitamins and minerals were satisfactory. Unfortunately, the consumption of sweets (93.8%) and ready meals (25.8%) was also frequent and 72.8% of children do not participate in physical sports regularly. The children that were participating in sports or those that had a food diary, had a more balanced diet ($P < 0.001$) and their somatometrics were between the normal growth curves ($P < 0.001$).

Conclusions: The dietary habits of Greek pre-school children even if differ from the traditional Greek diet they preserve the main core of the Mediterranean diet, mainly due to the consumption of olive oil and the high con-

sumption of fruits, pulses, grains and vegetables. Strategies should be developed to encourage healthier eating habits and adequate physical activity in preschoolers.

PP19

COMPARISON OF DIETARY HABITS AND HYPERLIPIDEMIA BETWEEN YOUNG ADULT IN GREECE AND FINLAND

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Introduction: Dietary habits of each individual are influenced by economic, religion, civilized and psychosocial factors.

Purpose: Purpose of the present study was to explore dietary habits of young Greek and Finland adults and to compare Body Mass Index (BMI), Waist to Hip ratio (W.H.R) and hyperlipidemia between the two groups.

Material-Methods: The sample-studied consisted of 125 Finland and 300 Greek students of Nursing. Data were collected by the completion of a specially designed questionnaire, the measurements of cholesterol and triglycerides of capillary vessel and recording of BMI and WHR. For the analysis of data was used statistical package SPSS 15 and the statistical methods χ^2 test, ANOVA and t-test.

Results: From the 425 participants, 82.6% of Greek and 79.2% of Finland were girls, while boys were 17.4% and 20.8%, respectively. Overweight was 31.2% of Finland and 21.8% of Greek. Measurement of WHR showed that of median risk was 41.6% of the Finland participants and 23.3% of the Greek. Normal values of cholesterol had the 98.4% of the Finland and 85.5% of the Greek participants, while to triglycerides 97.6% and 85.7%, respectively. Statistical analysis of data showed that, the Greek had higher values of cholesterol and triglycerides with statistical significant difference, $P \leq 0.001$, respectively. Regarding measurements of BMI, more overweight were the Finland students and a higher percentage of them belonged to the group with median risk, $P < 0.001$, respectively. It was also found that the Finland participants, consumed more vegetables, dairy produce, chicken, fishes, grains, fruits, snacks and alcohol compared to the Greeks, $P < 0.001$, respectively whereas Greek participants smoked more, $P < 0.001$. It was also found that the Finland had more exercise or walked more time during the day compared to the Greek participants, $P < 0.001$ respectively. Higher percentage of Finland participants had family cholesterol history with statistical significant difference to the Greek, $P < 0.001$.

Conclusions: Dietary habits differ between the Greek and the Finland students. Healthy dietary followed more frequently the Finland students, they consumed more alcohol and were in higher percentage overweight, while the Greek smoked more and had in higher percentage hyperlipidemia.

PP20

DIETARY HABITS DURING CHILDHOOD

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Introduction: Adequate and correct dietary is considered essential for mental and physical growth and maintenance of good health of children. During recent years, rapid changes were remarked in understanding both the significance of proper diet during childhood and the prevention of disease in childhood and adult life. However, some inter-family or out-family factors exert negative influence on children's diet.

Purpose: The purpose of the present study was to explore dietary habits during childhood and the factors affecting them.

Material-Methods: The sample-studied consisted of 213 parents whose children were hospitalized in paediatrics hospitals. Data were collected by the completion of a specially designed questionnaire. For the statistical analysis of data was used statistical package SPSS-15 and the statistical method χ^2 -test.

Results: Of 213 parents 14.1% were fathers and 85.9% mothers. A 89.2% of the participants were married, 3.3% unmarried and 7.5% divorced or widow. A 75.1% lived within area of Attica, and 24.9% out of Attica. A 29.6% of parents reported that their children had no breakfast and 19.7% reported that some of the main meal is fast-food. Statistical analysis of data showed that the divorced participants reported more frequently that their children drank no milk in morning, $P = 0.017$, didn't accompany their meal with salad, $P = 0.009$ and perceived that their children followed no proper diet, $P = 0.003$. Parents of tertiary education reported more frequently that their children consumed preservative foods, $P = 0.016$ and soft drinks, $P = 0.002$. Children whose parents were of low-income took exercise less frequently, drank more soft-drinks, rarely drank milk, consumed fry food, $P = 0.007$, $P = 0.003$, $P = 0.032$, $P = 0.020$, respectively. Private employees reported that their children consumed more frequently fast-food, $P = 0.007$. Children of parents living in country-side, consumed more frequently whole meal bread, more fishes, more vegetables and dried fruits, $P = 0.045$, $P = 0.002$, $P = 0.018$, $P = 0.020$, respectively.

Conclusions: The most common factors affecting dietary habits of children are the income, marital status, place of residence, education level and occupation of their parents.

PP20A

VIOLENCE AND MALTREATMENT OF CHILDREN WITHIN THE FAMILY

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Intoduction: Violence is a significant risk factor for children's health disorders and is observed in all social levels.

Purpose: The aim of the present study was to explore the extent of violence in young adults, in the way the experienced domestic violence during childish and adolescence.

Material-Methods: The sample-studied consisted of 365 students of Nursing. Data were collected by the completion of ICAST-CH questionnaire. For the analysis of data was used statistical package SPSS 17 and the statistical methods ANOVA and t-test.

Results: Of the 365 participants 87% were girls and 13% boys. Seven percentage of the sample-studied reported that in its family were individuals who consumed alcohol and use of drugs and their behavior brings fear, while 37.6% had seen within family individuals to shout in a way that horrified them, the 12% experienced corporal violence within the family, 7% had experienced use of pointed instrument in order to horrify and injure them and 7.7% had experienced case of war and revolt. Statistical analysis of the data showed that boys experienced violence more frequently whereas the girls reported sexual abuse, more frequently, $P = 0.021$ and $P = 0.030$, respectively. Regarding family status, it was found that individuals of single families consume more frequently alcohol and drugs, $P = 0.027$, dispute more frequently, $P = 0.043$, as well as assault and injure, $P = 0.029$. As for the number of children, it was found that the more children in family, the less cases of corporal punishment, $P = 0.013$. In terms to educational status of parents, it was found that the parent of primary education, consumes alcohol and uses drugs more frequently, $P = 0.001$ as well as they apply corporal abuse, $P = 0.050$. Participants that a member of their family had some corporal or mental disorder, experienced more frequently situations that provoked horror, $P = 0.009$, while they didn't take whatever was necessary for their breeding, $P = 0.007$. Same results where found when a parent used alcohol or drugs, $P = 0.013$, $P < 0.001$ respectively and they reported that they had experienced more frequently corporal violence, $P = 0.045$.

Conclusions: Socio-economic factors, such as low educational status, alcohol and drugs, psychiatric diseases and family structure are the main risk factors for domestic violence.

PP21

INTEGRATING ELEMENTS OF UNDERGRADUATE CURRICULUM IN TRANSCULTURAL LEARNINGD Corkin¹, P Morrow¹, I Fu²¹Child Branch, School of Nursing & Midwifery, Queen's University, Belfast, UK, ²School of Nursing, University of Hong Kong, Hong Kong, China

Introduction: Rapidly advancing technology, increasing ethnic diversity and the emerging recognition of nursing as a vital international resource, implies a need for a variety of curricula opportunities.

Purpose: To provide opportunities for transcultural learning and enable students to advance their cultural awareness, knowledge and nursing care practices in line with international trends.

Material-Methods: The applicants were delighted to meet their international partner during April 2010. Within the timetable for this visit there were planned meetings to discuss the opportunities for shared learning for nursing students across both universities, whilst developing international links. Since July 2010, it is against this background that this new initiative has been developed between fifteen of our year 2 Child branch nursing students and fifteen year 3 students undertaking a 'Nursing Care of Children' module at other university.

Results: Students from both universities were invited to engage in a care intervention (e.g. passing a feeding tube) based on a specific scenario involving three activities. At the end of this online learning experience students were able to:

- Recognise how cultural factors influence health and healthcare provision:
- Understand how principles of nursing practice are applied in each country.
- Discuss the importance of increasing their sensitivity towards another cultural group.

Activity 1. Care intervention was visually recorded (over 20 minutes) and each participating student has been encouraged to reflect on performance using Carper's, Fundamental Patterns of Knowing (1978) as a framework for reflection.

Activity 2. Both student groups had access to their specific recorded activity and under the direction of nurse lecturers forwarded to assigned student in each university using an online platform.

- **Activity 3:** Students continued to exchange dialogue with each other within a timeframe to identify areas for future professional learning. Experiences evaluated by nurse lecturers (July 2011) in perspective universities and significant outcomes are to be utilized for planning the advancement of this shared learning model.

Conclusions: Evaluation and verbal feedback from students has been very positive, attracting further engagement in this exciting initiative.

PP22

HOW THE ROLE OF A PAEDIATRIC HIGH DEPENDENCY FACILITATOR CAN MAKE AN IMPACT IN A DISTRICT GENERAL HOSPITAL

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Introduction and purpose: The Princess Alexandra Hospital, Harlow in the UK consists of a 16 bedded paediatric ward, 4 ambulatory beds and a paediatric emergency department open between 8 AM and 12 AM. There is no on site Paediatric Intensive care. Children that require high dependency care but do not fit into the category of intensive care need to be cared for at PAH where no designated high dependency area is available.

Purpose: My role as a Paediatric High Dependency Facilitator is to highlight the areas within the hospital that require attention. Through classroom and on the job training, audits and implementation of policy's and guidelines, skills and environment can be set up to ensure patients are assessed and treated early before deterioration. If children require intensive care then this stabilisation of care can be carried out smoothly and in a safe manner.

Materials - methods:

- Clinical support
- Paediatric specific training to all areas treating paediatric patients
- On site Resuscitation Scenario training
- In house Paediatric Study days
- Networking
- Procedure tools for staff to use such as drug infusion guides, algorithms
- Training/implementation of new treatment, protocols and guidelines
- Audits

Results: • Scenario training

- Training on the early recognition of acutely ill children
- Established CPAP on the ward with guidelines and training
- Neurosurgical Emergency Guidelines and training
- Working clinically to improve high dependency skills
- Training through study days and teaching sessions on the ward

- Networking between paediatrics, adult and transport services

- Completion of audits

Staff are more confident nursing high dependency paediatric patients. They receive regular scenario training. Implementation of the paediatric early warning scores has resulted in earlier detection and escalation of treatment. Communication with other areas of the multidisciplinary teams has improved overall relationships in different clinical areas.

Conclusion: Training in all the areas caring for paediatric patients has shown an improvement in the management of

patients care resulting in early recognition and a reduction in intensive care referrals.

PP23

PARENTS' INTERVENTION FOR FEVER IN CHILDREN WITH FEBRILE CONVULSION

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Introduction: In order to prevent recurrence of febrile convulsion, which is frequently seen in children of 6 months to 5 years, it is essential that parents adopt the appropriate approach to fever.

Purpose: The present study aims to identify parents' attitudes towards fever with regard to children with febrile convulsion.

Material-Methods: The present study was carried out in Akdeniz University Hospital Children's Emergency Unit with the participation of 100 parents having children diagnosed with febrile convulsion. Data collected via the 24-item questionnaire were assessed in SPSS 16.0 in terms of frequency, percentile and chi-square analysis. The consent of the parents and the institution was obtained before conducting the research.

Results: Among the children, 53% were female and 3 months to 11 years-old. Eighty-two percent of the children were monitored due to febrile convulsion diagnosis and in 39% of these children febrile convulsion recurred within at least 2 years. Forty-four percent of the children had febrile convulsion history in the family. Among the parents, 65% stated that they knew what febrile convulsion was and 63% thought that febrile convulsion was not of genetic origin. In addition, 88% of the parents believed that febrile convulsion would not lead to any other health problems. Sixty-six percent of the parents stated that measured their children's body temperature at home, 40% gave anti-febrile syrup to the child without consulting the doctor, 25% applied warm wet cloth, 33% had their children have a warm shower and 35% had their children take off their clothes.

Conclusions: Regarding intervention of fever, there were wrong applications as well as right applications. Especially those parents who had febrile convulsion before and those who have febrile convulsion history in the family should be informed by the health professionals and trained on how to decrease high fever and prevent recurrences.

Keywords: Febrile convulsion, Parents, Child, Fever.

PP24

WITHDRAWN

PP25

NURSING CARE OF CHILDREN WITH DELAYED STERNAL CLOSURE AFTER OPEN HEART OPERATION

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Introduction: Even though cardiac surgeons become more familiar with the technique and its use, only a few nursing publications describe or address the care of children undergoing delayed sternal closure.

Material-Methods: Critical literature review of published articles after 2000 in PubMed, Scopus and Cinahl.

Aim: Main aim was a critical evaluation of literature in order to outline a systematic approach to meet the care needs, to prevent or predict complications and to monitor accurately the children undergoing delayed sternal closure.

Results: The use of delayed sternal closure in children was first described in 1978. The most common complications that may occur include late sternal instability, bleeding, and sepsis. Continuous monitoring and clinical assessment of these patients is essential and is the core of the nursing care. These patients commonly have a low cardiac output and they require inotropic support in the form of continuous intravenous infusions. Therefore, nurses must be familiar with hemodynamic assessment of patients and the infusion of inotropic agents and their management. Moreover, all patients with an open chest require endotracheal intubation and mechanical ventilatory support. Monitoring of oxygenation and ventilation through arterial blood gas measurements and pulse oximetry must be an ongoing practice. Fluid intake and output should be closely monitored and predictors for bleeding must be evaluated. Electrolytes' levels must be evaluated and replaced (e.g. sodium, potassium, calcium, or magnesium) according to ICU protocols. An important parameter of the nursing care is the provision of adequate pain control and sedation. Support and information of parents is also important.

Conclusions: The nursing care of children with delayed sterna closure must be planned and standardized with the use of updated guidelines and protocols and without underestimating the needs of parents. Provision of care in these patients may be challenging and stressful but it pays back nurses with satisfaction and professional fulfilment.

PP26

EXTRA-CORPOREAL LIFE SUPPORT FOLLOWING CARDIAC SURGERY IN CHILDREN: INTENSIVE NURSING CARE IMPLICATIONSE Vasileiou¹, A Manatou¹, I Voutoufianaki², K Petsios^{3,4}¹*Pediatric Cardiosurgical Intensive Care Unit, "Onassis" Cardiac Center,* ²*"Onassis" Cardiac Center,* ³*Pediatric Cardiosurgical Intensive Care Unit, "Onassis" Cardiac Center, Pediatric Nursing,* ⁴*Faculty of Nursing, National & Kapodistrian University of Athens, Athens, Greece*

Introduction: The use of extracorporeal membrane oxygenation (ECMO) following paediatric cardiac surgery varies between different institutions. It is used in congenital heart surgery for several indications including failure to separate from cardiopulmonary bypass, postoperative low cardiac output, pulmonary hypertension, bridge to transplantation, etc.

Purpose: To describe the nursing care implications concerning Extra-corporeal life support

Material-Methods: Critical literature review of articles published after 2000 in Pubmed, Scopus, Cinahl and ISI Web of Science.

Results: Nursing care of children in ECMO remains challenging even though it is a well-established method of providing care to critically ill patients. Its use is expanded and includes the support for low cardiac output due to congenital heart disease. Nurses should provide their care following well established protocols in order to prevent and/or manage possible complications. These complications commonly include ineffective thermoregulation, haemorrhage (intracranial or/and intrathoracic), renal failure and infections. Haemorrhage is the most common complication and is related to the duration of ECMO. However, patients with congenital heart diseases are more likely to have thrombotic complications and intracranial complications (haemorrhage, infraction. An additional complication of ECMO is renal insufficiency, leading to accumulation of fluid and volume overload. Infection is another risk of the prolonged use of ECMO. Multiple cannulas and intravascular catheters, along with mediastinal drainage, are predisposal factors to infections. As bedside caregivers, nurses are responsible for the continuous clinical assessment of the patient, the planning and the implementation of the nursing care, the documentation of the course of treatment and the support of patient's family.

Conclusions: Since caring for an ECMO patient is an intensive ongoing process, collaboration and cooperation among all members of the team are essential in order to prevent, predict or manage possible complications. The need for standardization of the nursing care of children in ECMO remains high.

PP27

NURSING CONSIDERATIONS FOR INFANTS ADMINISTERED WITH PROSTAGLANDIN FOR POTENCY OF THE DUCTUS ARTERIOSUSV-M Nikolaidou¹, A-M Sait¹, F Mitropoulos², M Azariades³, A Manatou¹, K Petsios⁴¹*Pediatric Cardiosurgical Intensive Care Unit,* ²*Deputy Department of Pediatric Cardiac Surgery and Congenital Heart Surgery,* ³*Department of Pediatric and Congenital Heart Surgery,* ⁴*Faculty of Nursing, National & Kapodistrian University of Athens, Athens, Greece*

Introduction: Prostaglandin is a hormone which can affect smooth muscle action. There are many different types of prostaglandins for administration to patients, with different clinical uses. Even though nurses are familiar with the administration of prostaglandins there is a limited number of publications concerning nursing care.

Aim: Main aim was the critical review of the literature in order to meet the care needs of both infants and parents.

Material - Methods: A systemic review of international studies was conducted in international scientific databases (PUBMED, SCIENCE DIRECT, CINAHL, WEB OF SCIENCE, SCOPUS), related to nursing considerations, intravenous infusion of prostaglandin, monitoring and administration complications to the newborn child with congenital heart disease.

Results: Prostaglandin E1 and E2 (PGE) are commonly used in neonatal and paediatric ICUs to maintain patency of the ductus arteriosus in those cardiac lesions that depend on the ductus for either systemic or pulmonary blood flow. The main role of their administration is to stabilize and bridge infant to palliative or corrective surgery or other intervention (e.g. transplantation). PGE is excreted by the kidneys and is rapidly metabolized. Therefore, a continuous infusion and adequate intravenous access are necessary. Nurses must be experienced in the preparation and continuous administration of PGE and be alert for all its potential side effects (cutaneous vasodilation, bradycardia, tachycardia, hypotension, seizure-like activity, hyperthermia, apnea) and complications during infusion (swelling, infection, etc). Respiratory and hemodynamic monitoring is essential. Children going into transit whilst under continuous iv PGE1 infusion, are safer if they are intubated and mechanically ventilated. Any side effects of prostaglandin infusion are reversed with the suspension of treatment.

Conclusions: Early recognition of hemodynamic instability and administration of PGE1 is vital to survival in neonates with ductal-dependent cardiac lesions. Nursing care of these patients is demanding and requires specific clinical skills and theoretical knowledge.

PP28

FAMILY PRESENCE DURING CARDIOPULMONARY RESUSCITATION (CPR) IN THE PAEDIATRIC INTENSIVE CARE UNIT (PICU): A LITERATURE REVIEW

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Introduction: Whether the presence of beloved ones of critically ill children should be allowed during CPR is an issue that has gained increasing interest among healthcare providers in several countries during the past two decades. The present literature review addresses this question and the conditions to ensure the effective co-operation of healthcare professionals with the the young patient's parents.

Purpose: A) To identify the positive and negative effects of family presence during CPR in the PICU on children, their families and the healthcare team and to review attitudes and experiences of the last two sides, B) to discuss guidelines and hospital policy measures and c) to provide recommendations for further research.

Material-Methods: A total of 38 articles published in the last decade were reviewed including research studies, reviews and guidelines in English, German, Spanish and Italian.

A search in scientific electronic databases and journals for worldwide published articles in the last decade was conducted using the terms 'family presence during CPR', 'parental presence during CPR', 'nurses' attitudes', 'family witnessed resuscitation' and 'PICU'.

Results: At present, there are very few PICUs worldwide where family are allowed in the room during CPR. Most hospitals maintain a negative attitude, partially because they are unprepared and uninformed on this idea and its possible benefits. Nevertheless, evidence indicate that parents would rather decide on their presence, which is beneficial to their children, the healthcare team and themselves. Right hospital policy and preparedness is the key to best results for family-centred care and elimination of the healthcare team's hindrance during resuscitation in the PICU.

Conclusions: Several organizations formally support family presence policies. Nevertheless, family witnessed CPR in the PICU remains controversial. Further research as well as willingness are necessary to change traditionally held practices.

PP29

NURSING INTERVENTIONS FOR ABUSED CHILDREN

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Introduction: In recent years the phenomenon of child abuse has reached alarming levels. This is an issue, the

consequences of which endure and affect the subsequent life of the child as well, by turning him into a troubled adult. Children can be assisted so that the abuse's negative impact of abuse on them, as adults, will be minimized.

Purpose: To describe the nursing role concerning the care and protection of the abused children.

Material-Methods: A thorough literature review of the electronic databases and the bibliographic databases of Medline, ScienceDirect, Cinahl, HEAL-Link, was conducted, during the time period 2000-2011, using the following terms: "abused child", "marginalized child".

Results: When abuse is suspected, health care professionals such as the nurses must provide assistance to the child and the family, in cooperation with the relevant scientific team of specialists and inform the competent authorities (prosecutor, police).

Data analysis has shown that the main forms of child abuse are the following: (1) Physical abuse: including any injuries of different level of severity, at various ages, not due to accidents.

(2) Emotional abuse: including acts and behaviours that include rejection, isolation and exploitation as well as socially deviating acts.

(3) Neglect: the nutrition, the medical care and the carelessness that the child receives are so inappropriate that his/her health and development are in serious danger.

(4) Child sexual abuse – incest: the exhibition of children in sexually explicit content acts motivated by an adult. Child pornography and prostitution are also included as 'sexual exploitation'.

Conclusions: Nurses can play a significant role in the early recognition of children who are in serious danger of abuse, resulting in the provision of special assistance to the child and the family.

PP30

NURSING MANAGEMENT OF POSTOPERATIVE PAIN IN CHILDREN AFTER CARDIAC SURGERY

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Introduction: Postoperative pain management in children is a complex, multidimensional and subjective phenomenon. During last decades, many protocols and significant tools have been developed for the management of pain and a significant number of studies have been published. However, there are only a limited number of studies for the management of pain in children after cardiac surgery.

Purpose: A systematic review of the literature concerning the postoperative pain assessment and nursing management in children after cardiac surgery was performed.

Material-Methods: A systemic review was conducted in international scientific databases (PUBMED, CINAHL, WEB OF SCIENCE), related to the management of pain in children after cardiac surgery which were published after 2000. One hundred and thirty-eight articles were primarily identified and 38 matched the review criteria and were further analyzed (19 reviews and 18 studies).

Results: Intra and post-operative anaesthesia and analgesia for children undergoing cardiac surgery are an important determinant of postoperative recovery. However, limited studies were focused on postoperative sedation and analgesia within the paediatric intensive care unit. The postoperative pain management in paediatric cardiac patients depends from various factors such as the type of surgery, the incision, the duration of the surgery, the analgesic therapy (type, dose and frequency) along with the nursing experience and skills. For example, children with sternal incisions reported significantly more pain than subjects with submammary incisions and greater amounts of analgesia were used in children under 3 years of age. Many protocols have been developed for the administration of systemic and continuous intravenous analgesic therapy using appropriate pain assessment tools. Morphine and ketamine are most used for effective and safe analgesia.

Conclusions: There is a clear need for the development of a nursing standard to assess and manage pain and sedation in this population. The development of appropriate pain tools can lead to a reliable assessment of postoperative pain in sedated and intubated children after cardiac surgery.

PP31

CARE OF THE DYING NEONATE AND GRIEVING FAMILY: USE OF A CRITICAL EVENT TO CHANGE PRACTICE

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Introduction: Commissioning of neonatal services should include the provision of high quality palliative and end of life care for babies and their families (Department of Health, 2009). Meeting physical, psychological and social needs of families should be at the centre of end of life care. Evidence suggests the experience of babies and families is not always optimum, which can impact on their grief (Robertson et al. 2011).

Purpose: To outline, using a critical event, changes in practice in the context of care of the dying neonate and grieving family.

Material -Methods: A critical incident took place during end of life care where nursing care and communication occurred in an insensitive way. Parents raised their concerns and distress after the time of their baby's death during a visit from the Bereavement Support Nurse. The nurses

caring at the time of death were disappointed with the quality of care given and wanted to discuss the experience and develop their practice. Although other parents expressed positive experiences regarding end of life care, this was not an isolated incident.

Results: The 'Neonatal Bereavement Review' was introduced to provide an opportunity for nurses to discuss the death of a baby and care of the family. The primary aim was to evaluate care, identifying practice that was not optimum or evidence-based. The outcome was to implement changes to practice and policy as appropriate. The Neonatal Bereavement Review also had a secondary aim, to provide a safe environment for practitioners to debrief their caring experience for the baby and family.

Conclusion: If the care of the dying neonate and the grieving family is not right, the impact on parent's grief is ongoing and significant. Using parental and nursing feedback to improve practice in neonatal end of life care is vital.

PP32

EFFECTS OF USING SICK AND/OR CONVALESCENCE-CHILD CARE CENTERS ON THE QUALITY OF CHILDREN'S HEALTH CARE IN DUAL-INCOME NUCLEAR FAMILIES

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Introduction: Sick and/or convalescence-child care centers are used in accordance with their children's health condition by parents from dual-income nuclear families to continue working.

Purpose: The purpose of this research is to clarify the effects of using sick and/or convalescence-child care centres on the quality of children's health care in dual-income nuclear families.

Material-Methods: From April 2011 to May 2011, parents (n = 29) with children of 9 years old or less from the dual-income families, who have used sick and/or con-

valescence-child care centres and agreed on participating in this research, were collected. We conducted a semi-structured interview, and the data was analyzed in qualitative inductive method. A private room was used for the interview to protect the participants' privacy.

Results: Parents used sick and/or convalescence-child care centres for the following reasons:

- (1) Not to put a strain on their children in poor health.
- (2) The parent uses sick and/or convalescence-child care centres to be not absent from work, although it costs money.
- (3) More appropriate medical care is felt to have been offered to their children, rather than nursing at home.
- (4) By receiving instruction on how to manage their children's disease at the centres, parents felt at ease taking care of their sick children at home.
- (5) Children are having fun playing with childcare workers at the centres while being taken care of their disease at the same time.

Conclusion: Sick and/or convalescence-child care centres are used in accordance with their children's health condition by parents from dual-income nuclear families to continue working. They provide children in poor health the place to rest for the more effective curative treatment, and heal children of their disease through playing. They also have the role of consultation and the education for parents with sick children, and bear the responsibility of developing parents' coping ability with their children's disease.

PP33

SINGLE MOTHERS' NEEDS ASSOCIATED WITH CHILD-CARE FOR SICK AND CONVALESCENT CHILDREN

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Introduction: The child-care system for sick and convalescent children in Japan adopts a co-payment principle, whereby users must pay a fee regardless of their income.

Purpose: This study clarified single mothers' needs associated with child-care for sick and convalescent children to secure the QOL of single mothers and their children.

Material-Methods: A semi-structured interview was conducted involving 10 single mothers (31.8 years old on average; SD: 2.94 years old) using child-care for sick and convalescent children after obtaining written informed consent from April to May 2011. The results were analyzed qualitatively.

Results: The subjects had 1.8 children on average (SD: 1.03), and the average age of their children was 4.78 (SD: 2.88) years old. Four mothers were engaged in an irregular job, and four worked on Saturday, Sunday, and national holidays. The subjects considered expenses as 'reasonable because receiving good care'; thus, they extracted the categories of 'High cost' (low income, siblings also use the care simultaneously, and continuous use), and 'Hope for assistance (insurance, partial refund, and support by company)'. They experienced late arrival at work and leaving early because of using child-care for sick and convalescent children; thus, they deeply appreciated being able to consult physicians in the early morning to avoid being late for work. They sought solutions to the problems concerning work absence and decrease in income owing to user restriction of the facility and waiting for use, as well as to be able to arrive at work late and leave early owing to using a distant facility, and desired facility numbers to increase. They desired overtime, holidays (national holidays), and night child-care which could address their irregular work.

Conclusions: The results revealed that single mothers' needs associated with child-care for sick and convalescent children are derived from the vulnerability of their employment and income.

PP34

BENEFITS OF CHILD-CARE FOR SICK AND CONVALESCENT CHILDREN ASSOCIATED WITH THE QOL OF SINGLE MOTHERS' CHILDREN

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Introduction: Child-care for sick and convalescent children is called a safety net for working mothers. How-

ever, the benefits of child-care for sick and convalescent children associated with children's health do not seem to be sufficiently discussed.

Purpose: This study examined the benefits of child-care for sick and convalescent children associated with the QOL of single mothers' children.

Material - Methods: A semi-structured interview was conducted involving 10 single mothers (31.8 years old) using child-care for sick and convalescent children after obtaining informed consent from April to May 2011. The results were analyzed qualitatively.

Results: The subjects had 1.8 children, and the age of their children was 4.78 years old. The categories of care (medical/nursing/child care) and outcome (children's/ mothers' response) were extracted. As medical/nursing care, physicians' consultation and drug administration, isolation from infectious diseases, inhalation and aspiration by nurses, and drug administration were extracted. As child-care, enjoyable playing, a warm and delicious diet/meals, and one-on-one care were extracted. The record and report of the detailed disease condition and life, and instruction to parents were extracted. Children showed a positive response to child-care for sick and convalescent children (pleasure, delight, and relief). The subjects evaluated that the use of child-care for sick and convalescent children enabled children to avoid pushing themselves too hard, recover rapidly, and avoid a relapse of symptoms. They also considered that the child-care obviated the need for restricting children's lives for fear of infectious diseases, and were greatly relieved and satisfied with professional care and the children's response. Child-care for sick and convalescent children ensured the health and development of single mothers' children, and contributed to single mothers' mental health.

PP35

THE ROLE OF EMOTIONAL INTELLIGENCE IN THE WORKING PLACE

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Introduction: Emotional intelligence constitutes a outlandish field of research which occupies the scientific community for the last, at least, 15 years. The definitions for EQ vary depending on the placement of each theorist and the integration of his theory in the category of model of dexterities or mixed model for EQ. EQ is referred in the ability of processing data derived from the sentiments and their utilisation for the guidance of action in circumstances that require activation of cognitive system. It constitutes competence which provides the individual with the possibility of recognizing, comprehending and using informations of sentimental nature (that are reported in himself or

in the others) with a way that leads him to effective or even exceptional output.

Purpose: To indicate the value of EQ and the way that it affects work but also in any other area of a person's life. EQ is essential for the long-term success, prosperity and for the creation of healthy functioning relation, personal as well as professional.

Material-Methods: A literature search was made through electronic data bases and journal articles from where were isolated articles published in the last 20 years.

Results: Data on the importance and value of EQ come from multiple sources. Findings on the importance of EQ fall into a general pattern that emerged from many empirical studies. Generally is shown that emotional skills play a more prominent role in the distinguished performance of an individual in the working place in relation to cognitive abilities and expertise.

Conclusion: As it comes to EQ, its finally an acquired faculty that must be cultivated in the name of a successful professional course and collaboration.

PP36

TRANSITION TO ADULT FOR ADOLESCENT WITH CHRONIC CONDITION AND STRATEGIES OF NURSING

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Introduction: Medical and scientific breakthroughs have extended life expectancies. 90% of those born with a disability or sick children survive into adulthood age.

Purpose: The purpose of this study was to describe the transition experience, expectations, and concerns of chronically ill youth who have transitioned to adult health care.

Material-Methods: Literature review was conducted in "Medline, Pubmed, Wiley-Blackwell, Science-Direct" databases, in Turkey on-line and published journals. In this review is presented results of studies transitional care in pediatric nursing.

Results: As a result, adult patients whose chronic conditions began in childhood are an increasingly common sight in the world health care system. Therefore, the development of transitional care from pediatric to adult is one of the major challenges for the twenty first century. Many teenagers have a chronic condition from infant period or dependent on the pediatric team. At the same time, many teenagers are reluctant to transfer to adult services. Transition has been defined as "a multi-faceted, active process that attends to the medical psychosocial and educational needs of adolescents as they move from child to adult centered care. The aims of transitional care are provided in health care to high quality, co-ordinated, which is patient-centered, developmentally appropriate responsive and comprehensive, to promote skills in com-

munication, decision-making, assertiveness, self-care and self-advocacy, to maximize life-long functioning, to enhance sense of control and interdependence.

Conclusion: When a child grows up with a chronic illness, that condition becomes an integral part of his identity. Therefore, the concept of transition care should be incorporated into nursing practices. Models of care should be improved and implemented to facilitate the child's compliance.

PP37

RESULTS OF UMBILICAL CORD CARE IN THE LAST 10 YEARS: SYSTEMATIC REVIEW

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Introduction: Umbilical cord infection causes to increase neonatal mortality and morbidity risk in developing countries. There is an increasing emphasis on quality care of the umbilical cord for newborn but still need to guide appropriately recommendations for optimal umbilical cord-care practices for newborns.

Purpose: The study is planned to determine the methods was used for umbilical cord care and the evaluate researches was designed to effectiveness of these methods.

Material-Methods: The data were selected from articles published in Turkish and English, to be placed in MEDLINE (PubMed), Turkish Medline and Scholar Google between January 2001 and April 2010 years. The keywords such as 'cord', 'umbilical cord care', and 'newborn umbilical cord care' used in literature screening. Evaluated the answer of these three questions: (i) which methods are used for umbilical cord care?; (ii) what are the effects of umbilical cord care methods?; (iii) which is the most effective method for umbilical cord care?

Result: Researches included in the study was determined; chlorhexidine, alcohol, salicylic sugar powder, triple dye, as well as applications of the dry retention, traditional/alternative applications such as breast milk and olive oil used for umbilical cord care.

Conclusion: According to the results of study; keep dry method for umbilical care was qualified for area of adequate hygiene conditions but in developing countries and if there is not enough hygiene conditions, chlorhexidine is recommended for umbilical cord care.

Keywords: Cord, Cord care, Umbilical cord care, Using methods for umbilical cord care.

PP38

THE NATIONAL VACCINATION PROGRAM FOR CHILDREN IN GREECE

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Introduction: Every country sets a national vaccination schedule which includes vaccines that the state considers as mandatory to vaccinate children and toddlers.

Purpose: This paper presents a retrospective national children vaccination program in Greece.

Material-Methods: The survey was based on selected English and Greek articles concerning the issue of children vaccination program. An overview and study of electronic data bases were performed: Medline, PubMed and Cinahl. Words such as "children" and "vaccination programs" were used as key words to complete the study.

Results: The vaccination schedule in Greece ensures the protection of a person since its birth. The vaccines included in this schedule are the following:

- Flu vaccine (Vaxigrix, every year)
- Diphtheria, tetanus, pertusis and poliomyelitis (Tetra-vac).
- Diphtheria, tetanus, pertusis, poliomyelitis and influenza type B (Infarix IPV Hib, Pentavac)
- Diphtheria, tetanus, pertusis, poliomyelitis, influenza B and hepatitis B (Infarix Hexa, Hexavac)
- Diphtheria, tetanus, pertusis and hepatitis B (Infarix Heppo)
- Measles, rubella and mumps (M.M.R. II, Priorix, 2 doses)
- Measles, rubella, mumps and varicella (Priorix Tetra)
- Hib Influenza type B (Hiberix, 4 doses)
- Hib Influenza B and Hepatitis B (Recombivax)
- Hepatitis A (Havrix, 2 doses)
- Hepatitis B (Engerix, 3 doses)
- Meningococcal type C (Meningitec, Meningigate Kid, 2 doses)
- Pneumococcal (Prevenal 13, 4 doses)
- Tuberculosis B.C.G. (3 doses)
- Varicella (Varivax)
- Human Papilloma Virus (Garolasil)

Conclusions: Vaccination programmes are mandatory in every country, resulting in the decrease for many life-threatening diseases.

PP39

A RANDOMIZED CONTROLLED TRIAL OF STERILE DISTILLED WATER AND/OR PACIFIER AS ANALGESIC FOR INFANTS UNDERGOING VENEPUNCTURE

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Introduction: The management of pain in neonates is an important issue.

Purpose: The purpose of this study was to examine whether sterile distilled water and/or pacifier interventions have marked analgesic effects on venipuncture sampling involving newborns who cannot receive sucrose.

Material-Methods: This study involved 126 healthy newborns (gestational age ≥ 36 weeks) in the neonatal unit of Takamatsu Red Cross Hospital. This study was conducted after approval was obtained from the ethics committees of Takamatsu Red Cross Hospital and Kagawa University Faculty of Medicine. Written, informed consent was obtained from the mothers. One of five interventions [2 mL of 24% sucrose solution followed by pacifier, 2 mL of sterile distilled water followed by pacifier, pacifier alone, 2 mL of 24% sucrose solution, or no intervention (control)] was conducted 2 minutes before dorsal hand vein sampling for the Guthrie test as a randomized control trial (partially double-blinded test). The duration of crying and Premature Infant Pain Profile (PIPP) were measured 11 times at 30-second intervals from sampling initiation.

Results: During the 30 s after puncture, both cry time and PIPP were significantly less in the groups with 24% sucrose solution followed by pacifier, sterile distilled water followed by pacifier, and pacifier alone compared with those in the no intervention group (cry: $P < 0.0001$, $P = 0.0001$, $P = 0.004$; PIPP: $P < 0.0001$, $P < 0.0001$, $P = 0.001$, respectively). Duration of first cry after venipuncture was significantly shorter in the groups with 24% sucrose solution followed by pacifier, sterile distilled water followed by pacifier, and pacifier alone than that in the control group ($P < 0.0001$, $P < 0.0001$, $P = 0.0011$, respectively).

Conclusions: Interventions using sterile distilled water followed by pacifier and pacifier alone have analgesic effects equal to that with 24% sucrose solution followed by pacifier, suggesting that they are effective for relieving the pain of venipuncture in newborns who cannot receive sucrose.

PP39A

PROTECTING THE LIFE OF THE UNBORN CHILD: PROACTIVE, PRAGMATIC, PARTICIPATORY NURSING STRATEGIES

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Introduction: Provision of education, research and practice opportunities that contribute to nurses' understanding of maternal-child global health issues is an imperative for academic and service organizations given current globalization and migration trends and the continuing challenge to overcome child health disparities.

Purpose: The aim was to generate an evidence-based algorithm in stillbirth prevention for use by formal or informal providers serving high risk populations in developing and developed countries.

Material-Methods: This research was structured around a combined theory-based, collaborative partnership model. Collaborating partners included local pediatric leaders and global health child experts. Students attended bi-monthly global health seminars co-facilitated by faculty and collaborating partners. Concurrently, they immersed in guided systematic literature review and policy/document analysis. A final optional international experience provided opportunity for students to present literature findings to nurses in a low income, developing country and to engage them in dialogue about a community-based participatory action project to reduce stillbirth rates.

Results: A study undertaken in a School of Nursing in the Middle East engaged undergraduate students in an education-research project designed to equip them with knowledge, skills and strategies to address a global health issue; namely, stillbirth. This population target was justified in view of limited research, programmatic or policy attention related to the topic, despite the large number of stillbirths worldwide (3.2 million/year)¹. Further stimulus reinforcing the relevance of the issue to the Middle East was the alarming rate of stillbirths reported in the Eastern Mediterranean Region in 2009 (27/1000 total births)². This represents the second highest rate in the world, surpassed only by the African region (28/1000 total births) and closely paralleling the rate in the South East Asian Region (22/1000 total births).

Conclusion: Process and outcome data emerging from this study highlight the value of providing nurses with hands-on experiences that promote research scholarship, nursing leadership and global citizenship.

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PP40

PREMATURE BABY CARE: A CASE STUDY FROM NURSING PERSPECTIVES

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Introduction: Complications that are caused by hospitalization are the most important reason of mortality and morbidity in premature newborn in neonatal intensive care units (NICU). As a specific area, neonatal intensive care nurses have an important role and responsibility in planning the needs, as well as in the assessment of the complications.

Purpose: The purpose of this study was to discuss the complications and the nursing interventions according to North American Nursing Diagnosis Association (NANDA) nursing diagnosis in a premature infant in NICU.

Materials-Methods: A case study design was used. Demographic and clinical data were collected by a patient who was hospitalized in the neonatal intensive care unit. The obtained dates were evaluated according to nursing diagnosis accepted by NANDA which is widely used internationally.

Results: The infant was born in the 28th week of gestation. The infant was followed up for 9 days while he was two weeks. Nursing diagnosis: Ineffective gas exchange, ineffective breathing pattern, ineffective breast feeding pattern, ineffective family coping, ineffective management of the therapeutic regimen, risk for infant behavior, risk for infection, risk for impaired skin integrity.

Conclusions: The nursing diagnoses in this case were evaluated during the infant's hospitalization in the intensive care unit. The effective nursing care which implemented for premature infants in NICU can reduce mortality and morbidity.

PP41

NEW EDUCATIONAL PROJECT FOR MEDICAL NURSES IN THE RUSSIAN FEDERATION

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Introduction: The world experience shows that many healthcare reforms start from reforming nurse business and cannot be founded on the old ancient model which gave a medical nurse just a role of a doctor's assistant. Traditionally, among the issues that negatively affect the development of the nursing activity in Russia are the low status

of the profession, small wage, almost no social security and low motivation for good quality labour. Medical nurses in scientific centre of children's health RAMS, innovation centre of paediatrics and practice shall have special skills as they are members of the team of doctors and scientists of the highest qualification. The administration of the centre has initiated the Project for the development of nursing employees of the centre aimed at training and improvement of qualification of medical nurses, their preparation for becoming leaders among nursing staff. A company, a company with big experience in educational work with nursing staff, became a partner of the Scientific Center of Children's Health.

Purpose: General and professional development aimed at training and improvement of qualification of medical nurses participating in the Project, their preparation for becoming leaders in the development of the nursing staff of Russian medical institutions.

Materials-Method: Five medical nurses from different Center's Departments Participate in the Project. The representatives were delegated from the department of neonatology and surgery in Center's Scientific Research Institute for Pediatrics, as well as the department of medical rehabilitation of children with cardiovascular systems, digestive system diseases and physiotherapeutic department in Center's Scientific Research Institute of Preventive Pediatrics and medical rehabilitation.

Results: Regular educational and trading events for the nurses are stipulated in the frameworks of the project for the development of medical nursing staff. The members of the project had training teaching the basic software (Word, Excel, PowerPoint), passed exams and obtained Fundamentals of MS Office 2007 certificates. Also training in regard to preparation of posters and presentations for participating in scientific conferences, preparation of reviews and writing articles, working in Internet and international exchange of experience will take place. In order to achieve wide public recognition of the profession, we need, first of all, to increase its status within nursing staff itself. They should have more self-confidence and appreciate the profession within their community. Nursing staff development project of the Scientific Center of Children's Health RAMS is aimed thereat.

Conclusion: The nurse's role in clinical studies of medicinal products is also important. It is planned to have a GSP cycle jointly with independent ethics committee for head nurses and clinical nurses where new pediatrics medicinal products are evaluated.

PP42

QUALITY REGISTRATION OF PAEDIATRIC NURSES IN THE NETHERLANDS**C van Velden***Dutch Association of Paediatric Nurses*

Introduction: Since 2007 nurses in the Netherlands can register a quality register of nurses. This register has as goal to demonstrate, the level of expertise of nurses is more than sufficient to contribute to the quality of care. In this survey is searched for scientific support of the goal and assumptions.

Purpose: To describe the added value of quality registration of nurses. How can registration make a contribution to improvement of quality of care. There has been a search to scientific outcomes of advantages en disadvantages of quality registration in general and particularly of nurses. By answering four sub questions: What is scientifically known about the arrangement of quality registration of nurses in relation with quality of care? What is the methodological quality of the scientific outcomes? What are the differences or agreements between the current Dutch quality registration of nurses and the scientific outcomes? Which positions are taken by experts and stakeholders in case of quality registration of nurses in the Netherlands.

Material-Methods: Enlarged research of literature and a Delphi survey.

Results: The subject has not been fully researched before. So none scientific supported criteria for quality registration of nurses were found. The literature shows that continue education the quality of care promotes. Continue education is supported and stimulated by registration and accreditation.

Conclusion: The outcomes shows that continue education of nurses contributes to quality of care. Continue education must be stimulated. It is clear that the registration system of the Dutch law works insufficient at the moment. The Dutch quality register of nurses is a first and good step on the way. One of the main advantages of this register are the criteria for continue education. There are also some shortcomings, like the number of mandatory hours of continue education, which are not enough and the inadequate accreditation of the training institutes.

PP43

A STUDY OF THE MALPRACTICE TRENDS IN PEDIATRIC NURSES**A Ersun, Z Başbakkal, F Yardimci, G Muslu, D Beytut***Ege University School of Nursing, İzmir, Turkey*

Introduction: Patient safety refers to all measures taken by health institutions and medical crew in order to prevent damage occurred during medical services. Patient safety measures comprise a vital component of nursing care.

Purpose: This study aims to investigate the malpractice trends in paediatric nurses.

Material-Methods: The study universe consisted of nurses in Pediatric Surgery Clinic at Ege University Children's Hospital and Tulay Aktas Oncology Hospital. While all the nurses were targeted for participation, the study sample included only 123 nurses (80%) consented to participate. The study was designed as a cross sectional descriptive study and the study data were collected between 15 March 2011 and 15 July 2011 with a questionnaire form and 'Malpractice Trend Scale in Nursing' which contains five subdimensions (medication and transfusion malpractices, fall injuries, hospital infections, patient monitoring, communication and material safety) and 49 items. The lowest score was noted to be 45 and the highest was reported to be 245. The data evaluation was carried out with prevalence scales, Student t-test in binary variables and variance analysis in multiple variables.

Results: About 61% of the paediatric nurses participated in the study were found to experience medical malpractices. It was further stated that 51.5% of the nurses witnessed malpractices of doctors while 48.5% of the participants reported malpractices committed by their colleagues. The most common malpractice was noted to be medication errors (57.8%). The study results illustrated that 27.7% of the nurses committed medication errors and the most common medication error was reported to be administration of the wrong dose (67.8%). The average score of the scale was 227.12 ± 15.06 (min. 171, max. 245).

Conclusion: The study results suggested a statistically meaningful relation between the units of paediatric nurses and total scores of malpractice trends.

PP44

EDUCATION OF CHILDREN WITH MENTAL ILLNESS**I Gougoulis, S Gyltidou, P Zaloumi**

Introduction: Mental deficiency is usually defined by the intelligence quotient of the child and its functional capabilities. The children with mental deficiency cannot be educated or take care of themselves and a special therapeutic intervention is necessary, for their social adaptation to a controlled environment.

Purpose: In the present review study, the role of education is called to attention along with the respective therapeutic programs in the development of those skills necessary for everyday life of the children.

Material-Methods: Selected articles in the Greek and English language, relative to the subject, constituted the material of the study. A review and study of the electronic data bases took place such as Medline, PubMed and Cinahl. As index words were used the following: mental deficiency, children's psychological diseases, paediatric nursing.

Results: Mental deficiency can coexist with other problems, medical or emotional, such as difficulties in sight, hearing, distraction, stress, depression. All these problems decrease the capabilities of the child. A criterion for the

education of the child must be how it will be integrated in the best way and what it can do itself, and less to measure the intelligence quotient.

Conclusion: The children with mental deficiency must: Be encouraged to develop independent skills, be assigned with small chores or responsibilities, always evaluating the age, the capabilities and their attention, be shown first the action and then be asked to execution it, to praise and reward their correct behavior, to offer opportunities for play with their siblings, relatives and friends, as well as the opportunity for wider social contact.

PP45

CHILDREN'S PAIN MANAGEMENT AND EMOTIONAL STRESS IN HEALTH SERVICES

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Introduction: Children with severe cognitive impairments are believed to suffer pain frequently as we specify the psychosocial correlates of pediatric pain and relationship to health service use and medical presentations for "unexplained" symptoms in nursing care.

Purpose: To examine children's descriptions for pain and the comfort measures used to relieve. Our research focused on children who suffer from pain as they use health services. Moreover, we examined, the offer of pediatric nurse in ensuring the right of the pediatric patient for holistic pain management during children's care.

Material-Methods: The international scientific data base of pubmed, the journal of pediatrics, the American journal of psychiatry (from 2007 until 2011) were used. We used as key index the words: "pain management", "analgesia", "stress" "and pediatric nursing". Medical books for holistic pediatric nursing were also studied.

Results: Children who complained often for pain used health services more often too, they had more psychosocial problems, they missed more schooldays, and they had worse academic performance. After controlling for health service use and demographics, pain was significantly associated with negative parental perceptions of child health and the presence of internalizing psychosocial problems. Higher levels of community health service use were associated with negative perceptions of child health, pain, visits for "unexplained" symptoms, and internalizing psychiatric symptoms.

Conclusions: Pediatric pain challenges traditional service delivery models characterized by segregated systems of care for physical and mental disorders. Longitudinal and psychobiological studies of the relationship between pain, internalizing psychopathology, and pediatric nurses are warranted to direct future treatment efforts.

PP46

CHILDRENS' ACCIDENTS IN HOSPITAL: A LITERATURE REVIEW

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Introduction: Paediatric hospital is characterized as a place to solve health problems; so it may be seen by children, parents, and professionals as a "safe" place with regard to child's accidents.

Purpose: To explore the hystorical path of publications about children's accidents in hospital to show the state of the science.

Material-Methods: Electronic databases (PubMed, Cinahl, Cochrane Library). Review of international scientific papers published until 2010. Definition of area of interest, aim of the review, inclusion criteria of papers and search string following systematic reviews methodology. Search through databases with keywords, and search among the references of paper obtained. We included 13 studies.

Results: Of 13 studies conducted from 1963 to 2010, 10 were carried out in the past 5 years; 10 mainly concerned prevention and contextualisation of the phenomenon "accident" or "fall", and 3 the fall risk assessment. The most frequent design was the observational exploratory/descriptive one. Investigated aspects were: factors potentially favoring accidents and characteristics of children subject to accidents/falls, of accidents/falls, of outcomes; fall risk factors, paediatric fall risk assessment tools, fall prevention programs, parents' perception of accident/fall risk; risks and potential errors in the admission process with regard to the prevention of accidents/falls.

Conclusions: Contextualisation and prevention of issue appear uneven; proposed fall risk assessment tools are not evaluated for reliability and validity. It is necessary to build consensus on definitions of fall, fall related injury and their taxonomy, and on calculation methods of their frequencies and rates, as well as on fall risk assessment tools and preventing practices. The knowledge of the state of the art on this issue may help to better understand and then to monitor and prevent it. Further collaboration should fill the lack of uniformity in the contextualisation and prevention of the phenomenon to obtain comparable/shareable data.