secondary care by using SAIL as a framework in a district general hospital setting.

Methods: 200 OPC letters dictated by consultants and middle grade doctors in training were randomly assessed using SAIL by 3 assessors. Data was analysed using Microsoft excel.

Results: Documentation of history and examination was appropriate in most letters (96% and 81% respectively). 85% of letters contained a medical problems list. In only 34% letters, all doses of medication were clearly stated in formal units. An adequately justified clear plan to investigate (or not to investigate) was evident in ~50% of the letters. Follow up were recorded in 99% of letters. The mean of the checklist score was 14.8 for Consultants and 14.9 for middle grade doctors. (P = not significant).

Conclusion: Further improvement in clear documentation of medication/doses as well as information shared with the families is warranted. SAIL can be used as a valuable tool to assess effective written communication. SAIL can be used as one of the assessment tools for paediatric trainees as well as part of revalidation kit for Paediatricians in future.

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EVALUATION OF A KNOWLEDGE-BASED TEACHING MODEL FOR STUDENTS AND NURSES IN NEONATAL UNIT RELATED TO CHILDREN WITH CONGENITAL HEART DISEASE

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Object of study: In Norway 550-600 children are born with congenital heart disease (CHD) each year. The purpose of this project is to evaluate a knowledge-based teaching model for students and nurses in the neonatal intensive care unit (NICU). The model includes theory, teaching, independent study and structured guidance in the clinical field. This model emphasizes nurses' knowledge, observations and assessments regarding newborn with CHD. Research questions were:

1. What physiological factors and clinical observations do students and nurses perceive when assessing of newborns with CHD in pretest versus posttest?

2. Which cognitive level of knowledge do students and nurses report after participating in the project?

Method: Evaluation study, pre-and post-test design with the use of a questionnaire. The questionnaire includes physiological and clinical observations used in assessments of nursing care to newborns with CHD. The sample is 19 students and 21 nurses at NICU.

Results: Primary results show that the model has contributed to increased cooperation between college staff and nurses in the clinical field. Additionally the model has positive impact on students' and nurses' clinical learning. Students and nurses have strengthened their observation and assessment ability. Final results will be presented at the conference.

Conclusions: Knowledge-based teaching model with theory embedded in structured practice guidance and reflection provides a very positive learning outcome for students and nursing staff in the NICU.

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PARENTS' PERSPECTIVES ON THEIR CHILDREN'S HEALTH INSURANCE

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Objective: To ascertain the prevalence of underinsurance among families within the Southwestern Ohio Ambulatory Research Network (SOAR-Net).

Methods: Cross-sectional study of English-speaking parents whose child had health insurance completed surveys during Summer 2009 at SOAR-Net practices.

Results: 1978 parents completed the survey and 186 refused. Overall, 84.9% were mothers, 75.4% were Euro-American, 91.2% reported at least a high school education, 61.2% of study children had private insurance. During the 12 months prior to the survey, 5.5% of index children did not see a recommended specialist, 4.7% did not have a test and 8.7% did not fill a prescription because of parents' trouble paying for it. 7.8% reported that their child's health had suffered due to the cost of care. Compared to three years ago, 16.7% of parents reported it was