strongly believes that e-learning contributes to a solution of this problem. The Foundation founded The Next Page, a complete e-learning system in which we are able to create tailor made courses for all kinds of target groups. The Learning Content Management System (LCMS) is custom made for teaching on CAN and consists of some unique and specific digital pedagogical elements designed for this purpose.

Within a half year after launching the modules more than 40% of the Dutch hospitals are using these e-modules to teach their personnel on CAN! Scientific research showed significant positive effects of the e-learning module on the clinical performance of nurses.

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PAWS FOR THOUGHT - THE INTRODUCTION OF A PAEDIATRIC ADVANCED WARNING SCORE IN A DISTRICT GENERAL HOSPITAL

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Background and aims: Dumfries and Galloway Royal Infirmary is a district general hospital in south west Scotland. The paediatric unit comprises 20 beds and is actively involved in the Scottish Patient Safety Programme.

Many episodes of critical deterioration in children are caused by reversible respiratory (61%) and circulatory (29%) factors (Monaghan, 2005). Early recognition of these problems is enhanced by early warning score observation systems, promoting rapid intervention.

Methods: PAWS is a validated early warning observation chart for the assessment of sick children (Egdell et al, 2008). The charts were designed to be similar to the hospital's adult early warning score charts, promoting a smooth implementation process across the hospital, particularly in the accident and emergency department. Observations are charted and scored according to a colour coded system. High scores identify children at risk of deterioration. These children are promptly reviewed by an appropriate member of the medical team.

Results: PAWS is now used for all paediatric admissions and assessments.

Ongoing audit gathers data on compliance of completion and accuracy of scores.

Conclusion: The charts have been well accepted. We now have a common language to communicate patient information and PAWS has become an essential part of the handover process.

PAWS:

- facilitates rapid recognition of acutely ill children
- Allows staff to prioritise patients for review, treatment and ongoing assessment.
- Empowers inexperienced staff who may be reluctant to ask for senior assistance (Day et al, 2005).

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EFFICACY OF A FEEDING GUIDELINE BASED UPON GASTRIC EMPTYING

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Objective: To determine whether introduction a new feeding guideline based upon individual gastric emptying times provides a higher proportion of enteral feeding.

Methods: A prospective audit in a 20-bed PICU was conducted one year before (March 2007) and after (March 2009) introduction of the new guideline (March 2008). Data were collected over 4 days per patient on 76 patients in 2007 (37 cardiac, 39 general), and 78 patients in 2009 (39 cardiac, 39 general), comprising 9339 PICU hours. In 2009, the feeding interval was based upon individualised gastric emptying time, calculated after a test feed.

Results: The proportion of potential enteral calories given to cardiac patients increased from 39.8% in 2007 to 60.7% in 2009, $p < 0.001$). A smaller increase was seen for general patients (62.1% to 66.6%, $p < 0.001$). The median (interquartile) time from admission to establishing full feeds reduced from 23 (12 - 49) to 13 (8 - 24) hours for cardiac ($p = 0.007$) and from 17 (8 - 32) to 8 (5 - 20) hours ($p = 0.05$) for general patients. The impact of the feeding guideline on time to establish full feeds remained significant ($p < 0.001$) after multivariable adjustment for mortality risk (PIM2), diagnosis,