Keywords: Collaboration, family-centred care.

Introduction: Health policy advocates that professionals involve parents in care and care decisions, yet models advocating involvement are not embedded into practice.

Aim: Identify the shared antecedents and key attributes associated with embedding family-centred care (FCC) and partnership-in-care (PiC) into practice.

Methods: A concept synthesis was undertaken by searching three databases (Scopus, CINAHL, BNI 1999-2014); shared antecedents and attributes were extrapolated from the 30 studies that met defined inclusion criteria.

Results: Unclear roles and boundaries, entrenched professional practices and lack of guidelines hinder FCC/PiC implementation. An alternative framework was developed based on the actions and skills required to support parents' involvement in care and care decisions.

Discussion: Greater focus on the skills required to facilitate involvement may negate the challenges of embedding FCC /PiC.

Conclusion: The framework for involvement can help guide nurses' actions towards building effective relationships and involving parents in care decisions.

OC07 – Why should parents and health professionals collaborate to manage childhood long-term conditions?

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Theme: Complex health care and chronic disease management

Keywords: Childhood long-term conditions, collaboration

Introduction: Interactions between carers and health professionals often have a power imbalance; professionals seem reluctant to acknowledge carers' expertise and unwilling to relinquish control over the management of the child's condition.

Aim: To explore parents' and professionals' perceptions of collaborative healthcare practice to manage childhood long-term conditions.

Methods: Qualitative study using focus groups to elicit carers' and health professionals' views of collaborative practice, with the framework approach underpinning data analysis.

Discussion: To facilitate parents' care-giving roles, health professionals must move from a position of care prescriber to collaborator. Yet collaboration is complex and difficult to operationalise in practice, partly because there is discordance between the views of health professionals and carers about the purpose of collaborating.

Conclusion: Health professionals need to understand, value and respect carers' expertise and desire to be involved in care and find ways to integrate carer expertise into care and care planning.