cause degradation in the quality of family life and distress parents, which could be reduced by vaccination of infants against rotavirus. Parents’ awareness of preventative measures in case of intestinal viruses and rehydration treatment given at home when broadened by nurse contribution would reduce the overload at casualties and the number of hospitalisation cases.

**PO18 – Safety road for children: knowledge and attitudes of parents in the use of child restraint systems**

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**Theme:** Child protection and managing risk.

**Keywords:** Road safety, child restraint systems, parents’ knowledge.

**Background:** Correct use of a restraint system for children (CRS) from birth is an effective form of protection.

**Objectives:** To characterize parent’s knowledge and attitudes in using CRS.

**Methods:** Cross-sectional study, held in a non-probabilistic sample of 112 parents of newborns, mothers mean age 30.37 years old (SD = 5.63). Parents completed a questionnaire, 24-48 hours after baby birth in Obstetrics and Neonatology services of a public hospital in Portugal.

**Results:** Mothers mostly had secondary level of education. In 54.5% CRS was part of the ‘layette baby’ and, of these, 72.3% had already experimented it in the car. Only 15.2% reported having had training by nursing team during pregnancy. 97.3% intended to use the CRS, however only 47.3% would do it adequately. All recognize that CRS prevents serious injury, and 67% reported adequate knowledge.

**Conclusions:** Results indicate that knowledge and parental attitudes about the proper use of CRS remains insufficient.

**PO19 – Developing a pain scale for infants in collaboration with clinical staff in the neonatal intensive care unit**

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**Theme:** Multidisciplinary team working.
Keywords: Collaboration, neonatal intensive care, infant, pain assessment, scale development.

Background: Pain assessment is unsystematic and only few nurses use pain scales in clinical practice. Poor compliance may indicate that scales are often inaccurate to assess specific behavior in vulnerable children.

Aims: The aim was to develop a feasible and sensitive enough pain assessment tool for neonates in close collaboration with clinical staff in the neonatal intensive care unit (NICU).

Methods: The development process of scale lasted for several years and it included many sessions of discussion and putting into practice the scale to test its adequacy.

Results: A multidimensional pain assessment scale called NIAPAS (the Neonatal Infant Acute Pain Assessment Scale) was developed. The scale was easy to administer and it allowed nurses to recognize any indications of neonate’s pain.

Discussion: The development of a scale requires a long-term co-operation and multidisciplinary team working.

Conclusions: The NIAPAS is recommendable to assess acute pain in preterm and full-term infants.

PO20 – Parental suggestions for developing pain management in neonatal intensive care units

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Theme: Parenting/parenthood.

Keywords: Infant, neonatal intensive care, pain management, parents, participation.

Background: Neonates are likely to experience numerous painful procedures in neonatal intensive care units (NICUs). Parents have expressed a wish to be more involved in their infants’ pain alleviation.

Aims: The aim of this study was to describe parents’ suggestions for the development of neonatal pain management in hospital.

Methods: Informants were parents (n=140), whose children were in care in the NICUs of Finland. Data were collected through the questionnaires, and the open-ended data were analyzed using inductive content analysis.

Results: Parents’ suggestions for developing pain management consisted of six main categories: developing counselling, changing nursing practices, providing emotional support, considering parent-oriented practices, changing the attitude of the staff and increasing social support.

Discussion: It is essential to provide sufficient counseling to parents related to their child’s pain management.

Conclusions: Pain management practices need to change towards more family-centered care in the Finnish NICUs.