

ments to our unit were registered. 95.91% of the contacts were solved via phone call and or mail. Main contact topics were problems with medical treatment (24.3%), doubts solution (32.0%), change or new appointment date (11.4%), change or appointment for complementary studies (4%), clinical reports or results (24%). Only 4.08% needed face-to-face consultation, 3.44% in IBD-unit and 0.65% in emergency service.

Conclusions: The register of non-programmed clinical assistance by means of a specific document allows to improve the registry of activity in our IBD unit, improves communication between members of the unit, leaves a documentary report of a non-scheduled activity and focus assistance on patients needs in order to perform a better distribution of resources. Furthermore, IBD nursery can attend >95% of non-programmed appointments without being present the patient, strengthening the efficiency of the role of IBD nursery.

N823

The linked project, creating network

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Background: In Spain we have approximately 100 nurses who work with patients with Inflammatory Bowel Disease (IBD). Based on the definitions of the N-ECCO (Nurse - European Crohn & Colitis Organization), only 20 of them are advanced IBD Nurses. There is currently no consensus on the level of education that such nurses should be achieve, although the level of care is “clearly beyond the first level of qualification” and would normally be achieved following a combination of broad clinical practice, professional development and formal education. There is no academic regulation in our country, and educational programs are carried out today through initiatives promoted from GETEII (Working Group on Inflammatory Bowel Disease) and different partners.

Methods: In order to promote continuous training and generate a stable network among nurses, in 2016, the Linked Project was set up. This project consists of having a minimum of sessions in each territory with 3 workshops, one of them being taught by a nurse specialised in the field of IBD. All of them utilise a participative and dynamics methodology.

Results: 10 meetings with 92 participating nurses. Topics covered: Initial visit, telephone follow-up, treatment and vaccines, communication techniques, adherence, ostomies, psychological aspects, time management tools.

The assessment of the scientific level: 20% far exceeds their expectations and 74% above their expectations 6% met their expectations. The interest of the topics treated: 53% Excellent interest, 36% Very good and 11% Good. The workshop has met expectations: 47% Fully agree 39%, Strongly agree 14% Neither agree nor disagree. I would attend the workshop again: 77% Strongly agree, 23% Quite agree. I would recommend attendance to a partner: 85% Strongly agree, 15% Strongly agree. 20% It intends to change its clinical practice after attending the workshop, 67% think it has strengthened its clinical practice and finally 13% Need more information or resources.

Conclusions: The Project has been very well-received by all participants, reaching, to a great extent, the desired expectations. In

several areas of the country, the meeting served as a starting point for establishing a network among nurses in order to continue training, share their daily clinical practice and in some cases initiate research projects. From GETEII, we intend to continue working to achieve formal academic training and will continue to be actively involved in the ongoing training necessary to achieve quality care for our patients.

N824

Impact of educational intervention on inflammatory bowel disease nurse specialist

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Background: Nursing care must be systematized and individualized to promote integral care to the Inflammatory Bowel Disease (IBD) patients, in order to cope with all the patients needs. All the health careers must be aware of the specificities of the disease in order to obtain satisfactory results such as acceptance of the disease, medical therapy adherence, maintenance of clinical remission as well as reduction of complications like hospitalization, surgical interventions and mortality. Therefore, all these actions could improve the quality of life of these patients. The health education process has as its main goal contribute with the improvement of services for general population and the IBD nurse specialist has a key role in this complex process of patient education and patient care. Objectives: To assess disease-related knowledge among general hospital nurses before and after the educational intervention and to evaluate the effects of this action on the studied population.

Methods: A transversal, descriptive and comparative study was conducted. The sample was composed of 32 general hospital nurses from the Hospital das Clínicas da Faculdade de Medicina de Botucatu, São Paulo/Brasil. A IBD specific test was applied in two moments: before and after the educational intervention. The test was consisted of 3 topics: concept of IBD, nursing care and use of biological therapy. Each topic was ranked from 0 to 100 points. The educational intervention was composed by a theoretical and practical IBD course ministered by a multidisciplinary team (physicians, nurses, dieticians and psychologist) with duration of 20 hours. Statistical analysis: descriptive.

Results: Twenty-nine nurses and 3 nursing technician were included in the study. The mean time of experience in nursing practice was 9.6y (±4.8y). Most part of the subjects (66%) was in contact with IBD patients and 56% reported to have knowledge about biological therapy. It was observed a rise of knowledge after the educational intervention about the concept of the disease (60.71±28.95 vs 75.93±22.45), nursing care (28.57±32.31 vs 42.59±38.49) and biological therapy (58.93±30.39 vs 75±20.8). The personal security in administering biological therapy increased from 40% to 83% after the educational intervention. The assessment of the impact of the course regarding the participants' knowledge was effective, with mean 8.79 (±1.11), being zero the absence of impact and ten high impact.

Conclusions: The knowledge about IBD was considered average among these professionals assessed and the educational intervention was effective in the increase of this disease-related knowledge.