medication management, contributing factors to unsafe care, and professional reporter's perceptions and patient constructions of safety.

Conclusion QHR can drive a holistic approach to interpersonal patient safety in palliative care. Mixed methods QHR using social theories to develop multi-voiced perspectives of safety generates 'real world' learning.

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P2 ABSTRACT WITHDRAWN

P3 CHALLENGES FOR QUALITATIVE HEALTH RESEARCH IN GERMANY

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Background Qualitative health research was established comparatively late in Germany. The establishment was done differently in the various scientific disciplines (medicine, public health, psychology, sociology, and nursing).

Objectives After an early blossoming of qualitative health research in the 1970s/1980s, it was not possible to establish a methodological discourse for qualitative health research of its own in Germany. With the establishment of health sciences and nursing science, qualitative research became increasingly recognized in the 1990s. However, the question arises to what extent qualitative research, especially reconstructive methods, can be further strengthened and established in times of mixed method research.

Methods Facing these challenges, a network for qualitative health research in Germany was founded. It provides a platform for methodological discussion and development to reinforce the establishment of qualitative health research in Germany. The network has also set itself the task of connecting to international research.

Results The aim of the network is to contribute to the strengthening of methodological competencies in the field of qualitative health research. The focus was on the following topics: the discussion of the fit of the research topic and the research method used, the theory embedding, the discussion of quality criteria, the disclosure of implementation problems and methodological criticism, the consideration of the reflexivity of the researcher. In terms of qualitative survey and evaluation methods, diversity is to be exploited more. In addition, socio-structural differences and regional differences in the German research landscape itself will be considered.

Conclusion The presentation illustrates current challenges, perspectives and development lines for example of qualitative health research. In addition, a reflection on qualitative health research, its acceptance and methodological progress on international health care research is to be based on the results of international research.

P4 THE CARING VALUES OF STUDENT NURSES, AND THEIR DEVELOPMENT DURING EDUCATIONAL PROGRAMMES

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Background Following the Francis Reports, and austerity cuts, frontline NHS healthcare professionals have faced criticism for perceived lack of compassion. Nurses' recruitment and education now increasingly emphasise caring values. Education programmes comprise university teaching and practice placements, including experiential learning to develop clinical skills, competencies, and reflexive abilities, yet it is unclear how to develop caring values. 'Caring' is conceptually complex, encompassing 'caring for' – direct bodywork, and 'caring about' – desiring to help. Most negative incidents concern 'caring for' tasks.

Objectives To explore newly-recruited, pre-registration student nurses' caring values; to understand whether/how these changed during education; to ascertain students' readiness for caring work post-registration.

Methods Focus-groups (n=10) with nursing students, placement mentors and lecturers at two UK universities, analysed thematically. For context, online surveys measured students' caring values (n=514).

Results Student nurses held what they perceived to be common values around caring, intending to operationalise these before and after qualifying. The vast majority felt welcomed to most placements, but most had 1+ negative placement. Although quantitative measurements of students' caring values did not change significantly during education, their expectations changed, and caring values became more sophisticated, particularly: learning how to care for patients when they had limited time; and observing poor caring practice. Some placements did not give students scope to complete their educational assessments. In response, some students undertook self-directed learning (which they also used when mentors were busy), and some mentors helped link students with other hospital departments and nursing-homes. Students greatly appreciated this, asserting that they would mentor future students positively.