Theme of the week learning pack: Community Paediatrics

This learning pack can be used for local teaching and for individual reading and reflection. Several activities have been designed and they have been mapped to the RCPCH Progress curriculum.

Feel free to use any or all of this pack in your department. If you wish, you can reflect on the learning activity and upload to your e-portfolio linking to the relevant domains.

Comments/feedback to Amutha Anpananthar (TPD).

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1. What to do if you disagree with your supervisor about your learning needs? Community paediatrics scenario

Activity: Group Discussion (45 minutes)

Objectives

- Discuss issues arising from workplace settings not meeting the needs of their junior staff
- Improve understanding of ways these difficulties can be managed locally within teams
- Learn about other agencies available to support trainees

Target Level

- All
- ST3 or Consultant - to run/facilitate

Task: Split into groups of 3-4. Read the following article from the RCPCH on What to do if you disagree with your supervisor about your learning needs.

Discussion points to include:

- *Has anyone had any experience of similar situations they would like to share? What went well? What do they wish they had done differently?*
- *What factors might lead to these situations?*
- *This scenario is based in community paediatrics - what is similar and different to a hospital environment?*
- *How would you raise your concerns with your supervisor?*
- *How can we encourage open lines of communication within our teams?*

One person to feedback from each team and facilitator to lead the discussion as a larger group. Can you identify any learning points or action points applicable to your practice or trust?

Other resources you might be interested in:

- NHS Improvement Managing Conflict
- BMA Rostering Guidance and Rota Checking Tool
- If you are having problems that and you want to talk to someone outside your trust, don't forget you can always contact your TPD

2. Investigations in Global Developmental Delay

Objectives

- ❏ Learn about the different causes of Global Developmental Delay and which investigations are most useful or important
- ❏ Reflect on how a diagnosis (or lack of a diagnosis) may impact the child and the family
- ❏ Learn how to critically appraise a paper

Activity 1: Journal Club (45-60 mins)

Target Levels:

- Trainee Levels 1-3
- Excellent opportunity for trainees to develop their ability to critically assess a paper whilst keeping up to date with the latest evidence based practice for common neonatal presentations

Facilitator: Consultant or Registrar

Trainee: SHO or Registrar to present the paper

Journal Club Instructions

- Nominate a presenter to lead the discussion
- All participants read the following review beforehand
- Mithyantha, R *et al.* Current evidence based recommendations ofn investigation children with Global Developmental Delay. *Arch Dis Child* 2017;**102**:1071–1076

- As a group, discuss the quality of the evidence and its implications on your practice. You may want to use the CASP Systematic Review Checklist to help your evaluation.
- Some discussion points could include:
    - Was the authors' search appropriate? Was it too broad or too specific?
    - How did they take cost effectiveness into account? Was this adequate?
    - What population (or populations) is this relevant to?
    - What is the current practice in your place of work? Will this alter it?

Reflection: link to domains 4 and 11

- Have I developed skills and confidence in critically analysing a paper?
- Would I feel confident presenting a paper in future journals clubs?
- Will I feel more confident requesting investigations for children with developmental delay in the future?

Further resources:

- How to critically assess a paper: "Critical appraisal of a journal article"
- Critical Appraisal Skills Program Checklist Tools
- Temple Univerisity tools for critical appraisal

2. Investigations in Global Developmental Delay ctd

Activity 2: Communication scenario (45 mins)

Target Levels: 1 - trainees due to sit MRCPCH Clinicals examination
2 - registrar can run teaching session and receive feedback

Facilitator: Consultant or Registrar **Role-player**: Registrar
Trainee: SHO (particularly trainee due to sit MRCPCH Clinical exam)

Read this review on GDD from Hardimon, M. Global Developmental Delay, Don't Forget the Bubbles, 2019

Case
You are an paediatric trainee working in an outpatient clinic. You are talking to the mother of Charlie, a 3 year old boy. He was seen last week in clinic with concerns about his development. History and examination showed significant impairment across multiple developmental domains. He was diagnosed as having Global Developmental Delay with no obvious cause. His mother was very upset and has been brought back today to discuss the diagnosis and further investigations.

Instruction for the trainee:
Please discuss the diagnosis of Global Developmental Delay with Charlie's mother and explain what investigations he will need. *You do not need to take a history.*

Instruction for the Charlie's mother:
You were very surprised by the diagnosis last week - you knew Charlie was a bit behind but you thought he was just a late bloomer. You are very worried you did something wrong and anxious to know if there is any chance of Charlie catching up. You and your partner are planning to have more children and really want to know what the chances are of you having another affected child.

Instruction for the facilitator:
- Appoint a trainee to play the clinic doctor and another to play Charlie's mother.
- Review the following:
  - Does the trainee introduce themselves and explain their role?
  - Do they explore the mother's concerns and expectations?
  - Do they explain what investigations are needed?
  - Do they explain that they may not be able to find a cause?
  - Do they summarise at the end and give an opportunity for the mother to ask any questions?

Feedback (15 mins):
- Facilitator and group to provide structured and constructive feedback according to the above checklist

3. Managing Autistic Children in ED and Outpatients

Objectives

- ❏ Consider the challenges to managing children with autism in different healthcare settings
- ❏ Discuss how these patients are managed in your trust. Is there anywhere improvements could be made?
- ❏ Discuss Quality Improvement methodology that is currently in use, and may be used, to improve these factors

Activity 1: Group Discussion (45-60 mins)

Target Level: 1-3

Instructions for the group (MDT if available, including doctors, nurses, midwives, pharmacist, physiotherapist, dietitian):

- Read the following 2 articles on paedFOAM about behavioural problems in children and managing autistic children in the Emergency Department
- Watch the two short videos (3 min and 3 min) about Running your QI Project, IHI (Institute for Healthcare Improvement), as part of the East London NHS Foundation Trust QI programme.

Task: Consider the presentation of a child with autism to A&E with possible tonsillitis.

Split into 3 groups,

- one to consider the viewpoint of the child
- one of the parents
- one of the healthcare providers.

Discuss in small groups:

- *What are your prior expectations/understanding of what will happen? (You may want to consider the different people you will talk to, the environment you will wait in etc.)*
- *How do you think you will feel? What anxieties will you have and why?*
- *What factors will impact your mood and your approach to the other people in this scenario?*
- *Are there any simple things that can be done to improve this experience?*

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3. Managing Autistic Children in ED and Outpatients ctd

One person from each small group to feed back to the larger group and the facilitator to lead the discussion. You may wish to consider:

- *What are the barriers to children with autism and other behavioural problems accessing health care?*
- *Reflect as a group on cases where you feel autistic children were managed well or managed badly by your department*
- *What systems are already in place in your trust to help these children and families access health care?*
- *Are there any small changes that could be made to improve things further?*
- *How could this be done using the QI methods?*

Further resources:

- National Autism Society guidance for health professionals
- NICE guideline for management and support of children and young people on the autism spectrum
- Review article on interventions used in healthcare settings to support young people with autistic spectrum disorders. Straus J, et al. Medical Encounters for Youth With Autism Spectrum Disorder: A Comprehensive Review of Environmental Considerations and Interventions. *Clin Med Insights Pediatr*. 2019

Activity 2: Individual Learning

Target Level: 1-3

Resources available:

- The National Autistic Society has a template Health Passport that could be adapted for use in your trust or a Social Story could be produced for your department to help explain procedures or treatment to children with certain learning difficulties.

- The RCPCH has an e-learning module on Quality Improvement:
- For further inspiration on QI projects, have a look at the RCPCH QI Central site, a sharing hub of different interventions and solutions people have used across paediatrics:

- If you are interested in learning more about Quality Improvement methodology with the London School of Paediatrics, watch out for future teaching sessions as part of the online learning, and consider signing up for a future "Improve ONE Thing: Change Champions" programme

4. Health Promotion: Obesity

Activity: Group Discussion (45 minutes)

Objectives

- Discuss aspects of child health and well being and the role health care professionals have in health promotion
- Improve own knowledge of recommended amounts of sleep, nutrition and exercise for children
- Share ideas about how to promote a healthy lifestyle with families to help them engage with making positive choices

Target Level

- All
- 2 or 3 - to run facilitate

Task: Read the following article from Paediatric FOAMed on health promotion or watch the RCPCH Webinar it is based on (50 minutes)
Consider the following health indicators from the State of Child Health Report, with particular reference to obesity.

Read the following case:
Abigail is a nine year old girl referred to paediatric outpatients with knee pain. History, examination and investigations have excluded significant pathology. You note that her BMI is significantly raised and wonder if her knee pain is mechanical. She attends the clinic with her mother and sister who also have raised BMIs. Both her parents work full time so she and her sister are often looked after by their maternal grandmother after school. Further conversation reveals that her grandmother "gets tired easily" so usually the children are fed "whatever is easiest" and when you ask Abigail what she likes to do, she tells you she "just watches TV".

Split into groups of 3-4. Consider the following questions:

- *What factors are contributing to Abigail's raised BMI?*
- *Is it your role as a doctor in outpatients to discuss Abigail's BMI?*
- *How confident do you feel advising parents on appropriate amounts of food and exercise for children of different ages?*
- *Do you have any examples of how to raise these topics without sounding judgemental?*
- *As Abigail's parents, how would you feel having this conversation? What might and might not be useful to hear?*

One person from each group to feedback to the larger group. The facilitator to lead the group discussion and summarise key learning points.

4. Health Promotion: Obesity ctd

Other resources you might be interested in:

- **Promoting a healthy living for pre-school children** Paediatric FOAMed
- **Diet:**
  - Change for life food facts and recipes
  - British Nutrition Foundation portion sizes for toddlers booklet
- **Sleep:**
  - Paediatric FOAMed Sleep
  - NHS Sleep tips for children
- **Exercise:**
  - Change4Life Activities
  - ELearning for Health: Physical activity and health
- **Motivational Interviewing:**
  - Royal Australian College of GPs Motivational Interviewing Techniques
- **Full Fact:** Independent fact checking charity - fact check a lot of false health claims including false information about vaccines

5. Health Promotion: Unaccompanied Asylum Seeking Minors

Activity: Group Discussion (45 minutes). Split into small groups or pairs

Objectives: Discuss the additional health needs of unaccompanied minors

- Improve knowledge of different types of sections
- Share ideas about how to overcome communication issues due to language barrier or difficulty establishing rapport
- Improve consultation skills with teenagers, including a HEADSS assessment

Amina, a 14 year old girl, attends A&E with urinary frequency and abdominal pain, she is dipstick positive for nitrites and leucocytes. You are the paediatric doctor in A&E seeing her. The triage nurse has already informed you she has been brought in by a social worker as she is on a section 20 as she is an unaccompanied asylum seeking minor.

You diagnose her with a urinary tract infection and prescribe oral antibiotics. She has not yet had her 'looked after child' medical assessment.

- *What are the potential communication issues you might face, and how might you overcome these*
- *What is a section 20? Who has parental responsibility?*
- *What are the potential health issues that asylum seeking children may face?*
- *What social and cultural issues might you consider?*
- *Her social worker is concerned about the recent measles outbreak as she has an unclear immunisation history; what would you advise about immunisations required?*
- *If you had needed to do blood tests as part of your assessment, what extra blood tests might be useful to consider in these children which could then be used as part of their 'looked after child' assessment*

Considerations for migrants health:

- Height, weight and nutritional status - Potential risk of refeeding sydnrome
- Often unclear immunisation status - Higher risk of blood borne diseases
- Bloods - vitamin D, haemoglobinopathies, latent TB, consider hepatitis & HIV
- Lifestyle and safety issues (HEADSSS assessment),
- Female genital mutilation (where relevant) -Often uncertain family history
- Must consider mental and emotional health

Useful resources

Nice pathway for Looked After Children

Immunisation guidelines for uncertain immunisation status

Parish, E (2019) HEADSSS assessment tool for teenagers. Paediatric.pearls.co.uk

Gov.uk country guide to migrant health

Every Child Matters