Queensland Statewide Child and Youth Clinical Network

2015 Forum Report
About the forum

Title: *Healthy Kids, Healthy State: The changing environment of child and youth health*

Date: Tuesday 14th July, 2015

Venue: Lady Cilento Children’s Hospital (LCCH), level 7 auditorium

The 2015 Queensland Statewide Child & Youth Clinical Network (SCYCN) forum was facilitated by Dr Julie McEniery, SCYCN chair. The forum offered both in person and videoconference registration. The forum was held at the LCCH auditorium for a number of reasons:

- Opportunity for staff who do not work at LCCH to visit the new hospital
- No hire fee due to the collaborative relationship between Children’s Health Queensland (CHQ) and the SCYCN
- Excellent support from the CHQ education centre staff
- Close proximity for the SCYCN coordinator to organise logistics
- Availability of videoconference facilities and ease of communication with Queensland Health sites statewide.

The response to the forum was outstanding with 160 registrations and approx. 130 in attendance for in person and 96 for the videoconference. In fact, the in person registrations needed to close early due to the capacity of the room.

Due to the absence of a SCYCN coordinator in 2014 and subsequent lapse in forum activity, it was decided that the 2015 forum should focus on reengagement with the SCYCN membership base. As such, three broad themes were chosen for the day: child development, child health and mental health and wellbeing (the full program can be found in appendix 1). Within each themed session, there was one key speaker followed by a number of shorter presentations. The key speakers included:

1. Dr Kerri-Lyn Webb - Chair of the Child Development Sub Network
2. Professor Cathrine Fowler - Tresillian Chair in Child and Family Health and University of Sydney
3. Dr Andrew Court - Child and Adolescent Psychiatrist, RCH Melbourne and private practice

The eight shorter presentations highlighted both key network project and other statewide child and youth activities.
For the first time, a poster display option was offered to showcase the fantastic child and youth health work occurring around the state. We had a great response to this option with 15 posters displayed. A list of posters descriptions can be found in appendix 2. The network was also pleased to offer in person registrants the opportunity to have a brief tour of LCCH at the end of the forum. This was a popular option with 52 registering for the tour.

As a great sign of a successful forum, the SCYCN had 32 requests for new membership from attendees. This is a great outcome to extend the reach of the SCYCN throughout Queensland.

**Summary of the sessions**

Most presentations (both the slides and video) will be available online shortly for all Queensland Health staff to access. Some presentation slides may not be available, which is as the discretion of the presenter.

**Session 1 - Do you dare to go there? Challenging barriers in Child Development**

Facilitator – Dr Kerri-Lyn Webb, Chair, Child Development Sub Network

**Understanding the development and participation of children with significant health needs**

*(Dr Kerri-Lyn Webb, Chair, Child Development Sub Network)*

Dr Webb provided a retrospective analysis of the evolution of contemporary health services that have led to a different burden of disease and the emergence of biopsychosocial development disorders. Changes in contemporary health were also discussed along with a family centred approach to understanding the needs of children with co-morbid medical and developmental concerns. The presentation was concluded with a proposed way forward for the health system to improve service access and provision to this group of children.
Taking the lead: supporting transition to the National Disability Insurance Scheme

(Kate Weller, NDIS Project Officer, QLD Statewide Child & Youth Clinical Network)

The Child Development Services National Disability Insurance Scheme (NDIS) Transition Project has produced a number of draft documents specifically for Queensland child development services. This presentation focused on the literature review and data coming from trial sites which would be relevant for most child health services. A number of references were provided for clinicians to follow up to help them prepare for the transition to the NDIS.

Same but different: how HHS are revitalising developmental services to children in rural and remote communities

(Carly Hislop, Team Leader, Child Development Services – Townsville & Ninette Johnstone, Program Manager, Community and Allied Health – Roma)

This presentation looked at comparing and contrasting the approaches of the South West Hospital and Health Service and Townsville Hospital and Health Service to grow effective and efficient child development services across geographically large areas. As both Hospital and Health Services utilise the same foundational resources, there are a lot of commonalities which ensures equitable access to quality services.

Panel discussion

(Dr Kerri-Lyn Webb, Carly Hislop, Ninette Johnstone, Bethany Hooke)

Attendees had the brief opportunity to ask the presenters questions at the end of the session. Videoconference participants were able to email questions into the forum site. The majority of questions focused on the NDIS which demonstrates the importance of this issue for all child health workers.

Session 2 - Child Health: Leading the way forward to 2020

Facilitator – Karen Berry, Chair, Child Health Sub Network

A national perspective on parenting and working with families

(Prof. Cathrine Fowler, Tresillian Chair in Child and Family Health)

Professor Fowler presented an overview of findings from the Child Health: Researching Universal Services (CHoRUS) study. The study investigated the feasibility of implementing a national approach to child and family health services in Australia through 3 phases – 1) consultative forums with professional associations; 2) surveys and interviews of child and family health nurses & midwives, general practitioners and consumers; 3) innovation in practice across 21 sites.
Introducing PEDS & ASQ3

*(Desiree Croft, PEDS & ASQ3 Project Officer, Child Health Sub Network)*

The Parents' Evaluation of Developmental Status (PEDS) and Ages and Stages Questionnaires 3rd Edition (ASQ3) is a statewide screening project currently implemented by the Child Health Sub Network. The project aims to improve statewide referral pathways and define common language between Child Health and Child Development Services. Every Hospital and Health Service is engaged in this project and elements of the project such as training, an implementation guide and communication plan are due to be completed by the end of 2015.

Local clinical networks - Can make a difference

*(Caroline Diamond & Pamela Hueber, Northern Child & Youth Clinical Network)*

Caroline and Pamela discussed how the Northern Child and Youth Clinical Network supports clinicians in North Queensland via clinical service planning and implementation, clinical practice improvement and quality and safety enhancements. Current Northern Network projects were also discussed including Circle of Security and the Diamond Maternal Reflective Functioning Scale.

Innovative use of telehealth in child health nursing practice

*(Robyn Penny, Telehealth Project Officer, Child Health Sub Network)*

This presentation highlighted the initial child health telehealth project and future trial of tele-mentoring for rural and remote child health nurses in Queensland. Extensive consultation has occurred across all Hospital and Health Service. As a result, a framework for a telehealth mentoring/mentee relationship has been developed and is anticipated to be implemented during the trial stage.

Telehealth across Queensland

*(Matthew Page, Principal Project Officer, Telehealth Services)*

Matthew’s presentation highlighted the fantastic work that Telehealth Services conducts across the state including both medical consultations and new equipment technology. Attendees were encouraged to contact telehealth to discuss how telehealth can assist their services. Feedback from this presentation was extremely positive and it is anticipated that telehealth will receive a lot of interest from child health.

*Unfortunately, due to time constraints there was no time available for the panel discussion.*
Session 3 – Mental wellbeing from tiny to teens

Facilitator – Dr Sue Wilson, Consultant Psychiatrist, CYMHS Consultation Liaison, Children’s Health QLD

Paediatricians and psychiatrists working together in a medical setting: eating disorders, somatising and chronic medical illness

(Dr Andrew Court, Child and Adolescent Psychiatrist, RCH Melbourne and private practice)

Dr Court presented on a range of topics including:

- Paediatricians and Psychiatrists working together (a snapshot of Dr Court’s Archives article)
- How the Royal Children’s Hospital Melbourne multidisciplinary team and model of care for eating disorders was developed
- Dr Court’s model of somatising and how this will be developed in collaboration with Paediatricians.
- Chronic medical illness and psychiatry (focus on Insulin-Dependent Diabetes Mellitus with 4 brief case studies)

Given the time allocated for his presentation, each topic was delivered as a snapshot rather than an comprehensive education to give participants a variety of information.

Functional symptoms and syndromes

(Dr Sue Wilson, Consultant Psychiatrist, CYMHS Consultation Liaison)

Following on from Dr Court’s presentation, Dr Wilson discussed in more detail functional somatic symptoms and the difficulty with assessment and management. A range of helpful strategies were presented including taking an interest in the whole child and normalising the interaction of biological and psychosocial influences. Treatment options were also discussed.

Looking to the future – perinatal and infant mental health service development in QLD

(Libby Morton, Social Worker, QLD Centre for Perinatal and Infant Mental Health)

Libby provided a background on the QLD Centre for Perinatal and Infant Mental Health (QCPIMH). The presentation then detailed the current work of the QCPIMH including National Perinatal Depression Initiative and Perinatal Mental Health Peer Support Project.
Feedback

The forum received a good feedback response rate with 60 in person feedback forms and 10 videoconference feedback forms collected. Overall, the feedback was very positive with most indicators receiving scores of 4 or above on a 5 point scale.

1 – Strongly disagree
2 – Disagree
3 – Neutral
4 – Agree
5 – Strongly agree

Table 1- General forum feedback

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<td>Suitable venue</td>
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<td>Well organisation</td>
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<td>Relevant topics</td>
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<td>Networking opportunities</td>
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<td>Recommend to a colleague</td>
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Table 2 – Presenters feedback

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<td>Informative and prepared</td>
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<td>Adequate time</td>
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<td>Questions well handled</td>
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Table 3 - Videoconference feedback

As part of the feedback, participants were able to provide comments regarding the forum. A few very constructive lessons have been learnt from this feedback including:

- Muting all videoconference sites and reminding participants continually to remain muted
- Showing videoconference sites at start of day, but remove visual after this as it is distracting to have behind the presenters
- Separating the food tables in 2 spots to avoid congestion
- Increasing the time available for presenters, particularly key note speakers
- Increasing time available for questions
Appendix 1 – Forum program

<table>
<thead>
<tr>
<th>Time</th>
<th>Topic and presenter</th>
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<tr>
<td>9:00am</td>
<td>Registration and refreshments</td>
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<td><strong>Welcome</strong></td>
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<tr>
<td>Facilitator – Dr Julie McEniery, Chair, QLD Statewide Child &amp; Youth Clinical Network</td>
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<td>9:30am</td>
<td>Welcome to country</td>
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<td><em>Uncle Joe Kirk, Turrbal Elder</em></td>
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<td>9:35am</td>
<td>Official opening</td>
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<td></td>
<td><strong>Session 1 – Do you dare to go there? Challenging barriers in Child Development</strong></td>
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<tr>
<td>Facilitator – Dr Kerri-Lyn Webb, Chair, Child Development Sub Network</td>
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<td>9:40am</td>
<td>Understanding the development and participation of children with significant health needs</td>
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<td><em>Dr Kerri-Lyn Webb, Chair, Child Development Sub Network</em></td>
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<td>10:20am</td>
<td>Taking the lead: supporting transition to the National Disability Insurance Scheme</td>
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<td><em>Kate Weller, NDIS Project Officer, QLD Statewide Child &amp; Youth Clinical Network</em></td>
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<td>10:30am</td>
<td>Same but different: how HHS are revitalising developmental services to children in rural and remote communities</td>
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<td><em>Carly Hislop, Team Leader, Child Development Services – Townsville</em></td>
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<td><em>Ninette Johnstone, Program Manager, Community and Allied Health – Roma</em></td>
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<td>10:45am</td>
<td>Panel discussion and questions</td>
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<td><em>Dr Kerri-Lyn Webb, Kate Weller, Carly Hislop, Ninette Johnstone, Bethany Hooke</em></td>
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<td>11:00am</td>
<td>Morning tea and poster display</td>
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<td><strong>Session 2 – Child Health : Leading the way forward to 2020</strong></td>
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<td>Facilitator – Karen Berry, Chair, Child Health Sub Network</td>
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<tr>
<td>11:20am</td>
<td>A national perspective on parenting and working with families</td>
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<td><em>Prof. Cathrine Fowler, Tresillian Chair in Child and Family Health – Sydney</em></td>
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<td>Time</td>
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| 12:00pm | Introducing PEDS & ASQ3  
*Desiree Croft, PEDS & ASQ3 Project Officer, Child Health Sub Network* |
| 12:15pm | Local clinical networks - Can make a difference  
*Caroline Diamond & Pamela Hueber, Northern Child & Youth Clinical Network* |
| 12:25pm | Innovative use of telehealth in child health nursing practice  
*Robyn Penny, Telehealth Project Officer, Child Health Sub Network* |
| 12:35pm | Telehealth across Queensland  
*Matthew Page, Principal Project Officer, Telehealth Services* |
| 12:45pm | Panel discussion and questions  
*Prof. Cathrine Fowler, Desiree Croft, Helen Holzwart-Jones, Pamela Hueber & Robyn Penny* |
| 1:00pm  | Lunch and poster display                                                                   |

**Session 3 – Mental wellbeing from tiny to teens**  
Facilitator – Dr Sue Wilson, Consultant Psychiatrist, CYMHS Consultation Liaison, Children’s Health QLD

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<tr>
<th>Time</th>
<th>Presentation</th>
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| 1:30pm  | Paediatricians and psychiatrists working together in a medical setting: eating disorders, somatising and chronic medical illness  
*Dr Andrew Court, Child and Adolescent Psychiatrist, RCH Melbourne and private practice* |
| 2:30pm  | Functional symptoms and syndromes  
*Dr Sue Wilson, Consultant Psychiatrist, CYMHS Consultation Liaison – Brisbane* |
| 2:45pm  | Looking to the future – perinatal and infant mental health service development in QLD  
*Libby Morton, Social Worker, QLD Centre for Perinatal and Infant Mental Health* |

**Forum close, afternoon tea, networking and pre-booked LCCH tour**
Appendix 2 – Poster information

1. Dalby Child Health - Danita Driscoll and Leanne Perry

Summary of the local service provision at Dalby Child Health.

2. Australian Hip Surveillance Guidelines for Children with Cerebral Palsy 2014 - Meredith Wynter, Noula Gibson, Megan Kentish, Sarah Love, Pamela Thomason, Kate Willoughby, Graham HK (Kerr)

Recommendations for type and frequency of hip surveillance in an effort to identify children “at risk” of hip subluxation and dislocation in a timely fashion. Early identification will support the best options for intervention and assist in preventing hip dislocation in children with cerebral palsy and the accompanying sequelae of pain, difficulty with positioning and reduced function.

3. Promoting Optimal Maternal and Infant Nutrition project - Carolina Chirinos, Cindy Dawson and Anita Cowlishaw

The Promoting Optimal Maternal and Infant Nutrition project is funded by the Queensland Government to reduce the prevalence of childhood overweight and obesity and improve children’s nutrition by promoting healthy lifestyle behaviours of women before, during and post pregnancy and optimal infant nutrition in Queensland.

4. Baby Feeding Cues - Women’s and Newborn Services, RBWH

The Baby Feeding Cues poster is a visual resource which aims to support:
- Consumers and clinicians who care for babies.
- Consumers from diverse backgrounds including low literacy and non-English speaking.
- Baby Friendly Health Initiative (BFHI) accreditation for health facilities.

5. Paediatric Palliative Care Service Development, Referrals and Outcomes over 24 Months - Anthony Herbert, Natalie Bradford, Lee-anne Pedersen, Leigh Donovan, Jean Kelly, Helen Irving

Paediatric Palliative Care (PPC) is an emerging specialty within paediatrics and as such there is a need to document and understand the outcomes that a service delivers. Additionally there is a need to define the population of children who may benefit from a palliative approach to their care.

6. Learning After a Child’s Death - Lee-anne Pedersen, Anthony Herbert, Jean Kelly, Natalie Bradford

The primary aim of a paediatric palliative care service is the provision of competent and compassionate care at the end of life for all children. To ensure this aim is being met, and the service continues to develop, quality measures have been integrated into every day practice. One of these is the development of a death review process.

7. The Land of "Oz" An Overview of the Australian Paediatric Palliative Care Reference Group - Helen Irving, Anthony Herbert, Lee-anne Pedersen, Natalie Bradford

Explains the function and purpose of the Australian Paediatric Palliative Care Reference Group. It facilitates co-operation and collaboration between each of the paediatric palliative care services (and children's hospices) within each state of Australia and New Zealand.
8. Children with Significant Health Care Needs - Child Development Sub Network

A synthesis of feedback received from families as part of the Child Development Sub Network’s project “Understanding the Development and Participation of Children with Significant Health Needs”. This is a partner document to the booklet of the same name. The aim of the poster is to challenge health service providers to consider the needs of children and families beyond the medical, and to grow partnerships with families to improve the outcomes of children who interface frequently with the health care system.

9. HPEC Programme- Health Promotion in Early Childhood – Deborah Wells

Covers approx 20 different topics over the course of the year in day cares, kindergartens and infantschools mostly prep classes. Covering health promotion and injury prevention for early childhood.

10. Translating Research to Improve Oral Health Outcomes - Leigh Harrison-Barry and Kerri Dimou

Metro South Oral Health has undertaken research to investigate preventive strategies for Early Childhood Caries that are most suitable for those children and families that are high risk and socially disadvantaged. Data from this research provides an understanding of our community and their needs as well as highlighting successful preventative interventions.

11. Improving Access to Care - Leigh Harrison-Barry and Kerri Dimou

Metro South Oral Health provides flexible strategies for service delivery to best support our most ‘at risk’ and vulnerable child clients in accessing care and preventive initiatives.

12. The Diamond Maternal Reflective Functioning Scale - Caroline Diamond

An 18-item scale was developed for primary health services from data collected from 219 mothers and babies across North Queensland (Mackay, Townsville and Cairns).

13. ieMR - Dr Helen Healy and Louise Hayes

An overview of the ieMR with a brief case study outlining benefits of the use of an electronic medical record during times of disasters.

14. Growth Charts - Judy Grant, Julie Rees and Denyse Hayes

An overview of Growth Charts, general information, benefits of ieMR records, and accurate measurements in infants/children in both a hospital and community environment.

15. Mater Young Adult Health Centre Brisbane - Greg McGahan and Amanda Tilse

The newly established Mater Young Adult Health Centre Brisbane will provide dedicated specialised services and environments for people predominately aged 16 to 25. It will deliver the highest standards of clinical care and provide programs for adolescents and young adults to address their emotional, social and educational needs. The centre will also manage patients with chronic and complex conditions such as diabetes, cystic fibrosis, complex urology conditions, and inflammatory bowel disease.