

Collaborating with the family and team: Common practice challenges in child mental health

Tonight's webinar will be recorded and will be made available on the RACGP Events webpage in the next week.

Please use the Q&A box for any questions you may have. The chat function has been disabled.

Your 1.5 hours Education Activity CPD will be uploaded within the next 14 days.

Complete an additional guided reflection activity for 1 hour Reviewing Performance CPD.



Dr James Best

Chair, RACGP Specific Interests Child and Young Persons Health

James has been a general practitioner for over twenty years. His medical practice has a special focus on child development, child behaviour, parenting and children with disabilities. He has been widely published in medical and mainstream publications on these and other child health topics.

Acknowledgement of Country

I would like to acknowledge the traditional owners of the lands from where each of us are joining this webinar tonight.

I wish to pay my respects to their Elders past, present and emerging.



Partner



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Poll

Had you heard of Emerging Minds before registering for this webinar?

Poll

Have you used the Emerging Minds website resources or previously completed an Emerging Minds eLearning course?

Who are we?



Amanda Peters
Lived Experience



Dr Tim Jones
GP, Tasmania



Dr Kumudu Rathnayaka
Child and Adolescent
Psychiatrist, NSW

Learning outcomes

- Identify practical and effective ways of establishing relationships and collaborating with other services in the community
- Identify ways that general practice can adapt to better support families and child mental health
- Discuss innovative models of care which could benefit both practice and families whilst treating child mental health concerns

Case Study





Amanda Peters
Lived Experience

Collaborating with the family and team

Lived Experience Perspective

Amanda – Emerging Minds Family Partner

Mother of two

- Daughter – now 15
- Diagnosed with anxiety and a neurodivergent condition at age 7
- Diagnosed with depression at age 14

It can be terrifying for parents...

*How can I help her? Where do I go for help? Have I done something wrong?
Did I miss something? I feel sick with worry!*

Acceptance was important

Finding the confidence to work out useful strategies and implement them...

...and adapting these as she grew older and changed



The first port of call

My GP

- a sounding board
- the person that advises me what is normal
- Lets me know what we need to keep an eye on
- Recommends what we need to investigate
- I trust him



What's most useful in collaborating with a family?

When it comes to my child's mental health a GP can help support my family by:

- Listening to understand feelings and concerns of both my daughter and I
- Not assuming or commenting that you know how I am feeling
- Linking us to other services available
- Knowing WHAT services are available and discussing our options
- Providing information through brochures and handouts
- Keep me in the loop when information is shared between professionals
- Giving us something to take away, such as a strategy or idea to try
- Talking through the next steps in the process

Threads of hope in between

We all know that waiting lists are usually very long...

Even when you are a client/patient of a health care professional, there can be quite some time **in-between appointments** due to availability

When my daughter first started showing signs of anxiety, I wanted to help her straight away.

To feel like I was doing something, not just waiting on an appointment date.

I had to be **proactive**.

What would Anna find helpful?

I asked my daughter...

“If this was you, what would you want from the Doctor during the visit or what advice would you give the family?”

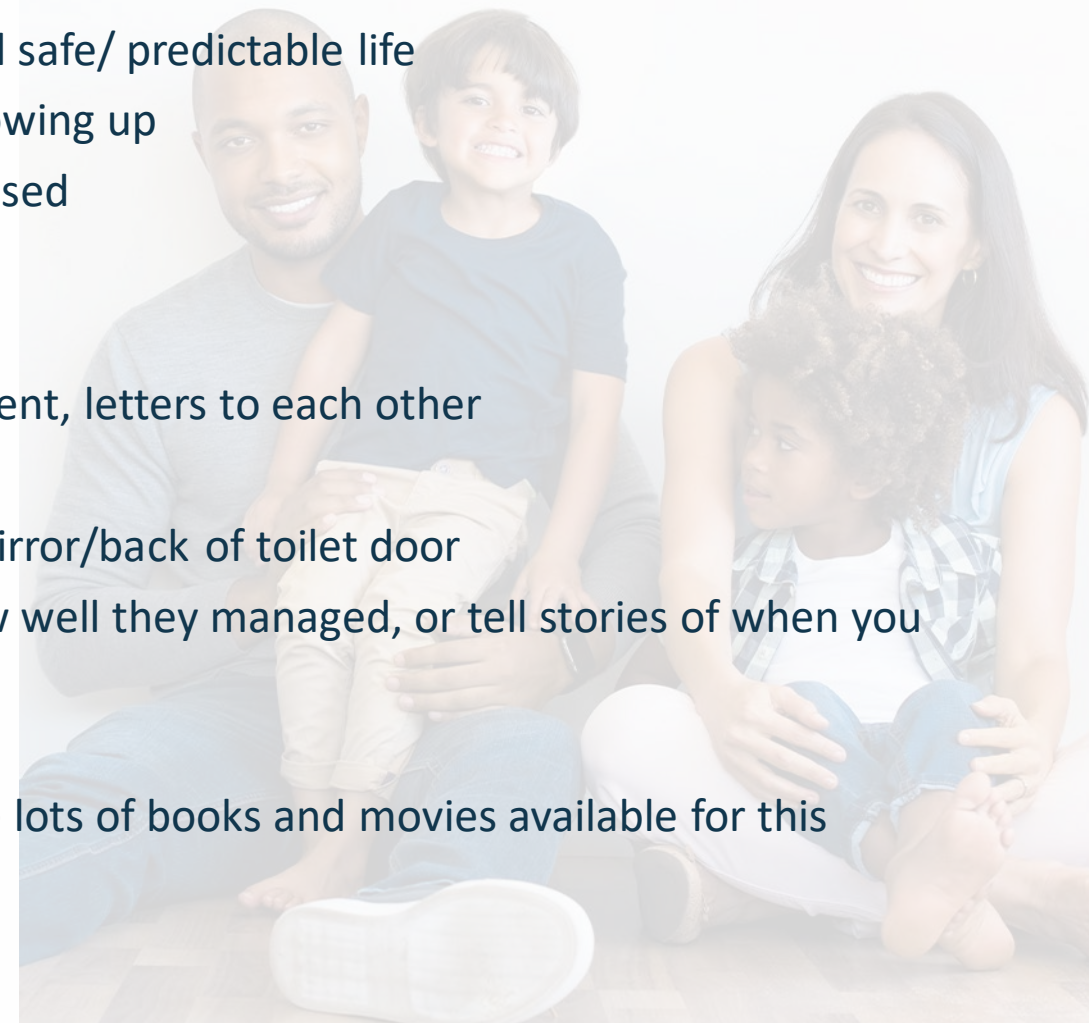
“I’d want strategies, like where I’m at a place I don’t want to be, I can do my counting fingers thing”

“Medication”

My daughter and I have created a practical list of ideas and strategies that you may like to suggest to families.

One or two of these ideas might be just what a family needs to walk away from a GP visit, to feel like they have SOMETHING they can do whilst they wait.

- Consistent routine including having a visual calendar of events to help prepare for what's to come
- No surprises/shocks, prewarn child regarding any changes
- Have consistent boundaries/consequence as it helps children to feel safe/ predictable life
- Child talking to trusted adults that have/had similar experiences growing up
- Create a sealed worry jar where worries are written down and released
- Create a sensory/fidget bag as a calming tool
- Encourage the child to write in a diary each day
- Create a 'Secret diary' passed back and forth between child and parent, letters to each other
- Provide cuddle toys, warm soft blankets
- Display positive affirmation cards/ framed images in room/home/mirror/back of toilet door
- Role model as parent, talk about hard that must have been and how well they managed, or tell stories of when you were that age (relate to them)
- Traffic light systems for managing feeling
- Teach children to recognize, name and manage emotions. There are lots of books and movies available for this



- Talk about emotions- anxiety is just a way that your brain tries to keep you safe. Can you thank your brain, and tell your brain you are, ok? Explore inner dialogue.
- Family time- connect, base it on the child's interest
- Can you make your child's bedroom their sanctuary? Give them a place that's just theirs.
- Be open to exploring different schools and models, there are different schooling models out there particularly in high school that may better suit your child.
- Advocate for your child at school. How is the school supporting them?
- Breathing exercises
- Listening to music (I would recommend buying them headphones)
- Using mental health apps, there are so many great ones out there!
- Reviewing social media content, my daughter unfollowed any pages that negatively impacted her
- Encourage the child to tell people what they need. Most people want to help but don't know how to, this is particularly true for grandparents. Encourage the child to advocate for themselves. "I'm starting to feel overwhelmed; can we please leave soon?"

- Have code words- ours was 'football' it means I'm on your side
- Reassure your child. I couldn't tell you how many times I've said "I've got you" to my daughter, because I do.
- Have cards with things written on them, they can just hand to you. Because sometimes it can be hard to say the words out loud. This also works well in the classroom setting.
- Good old exercise, sunshine and water, take the dog for a walk. Something simple outside with no pressure or expectations.
- Have a pet! They make great friends. They are good listeners; they don't tell your secrets and they generally like to cuddle
- Encourage a healthy diet, without using food as a reward
- Always encourage the child to be honest with health care professionals, they're there to help.
- Allow them time to just 'be' and/or come down from the day's pressure particularly after school.

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My top tips to share with families

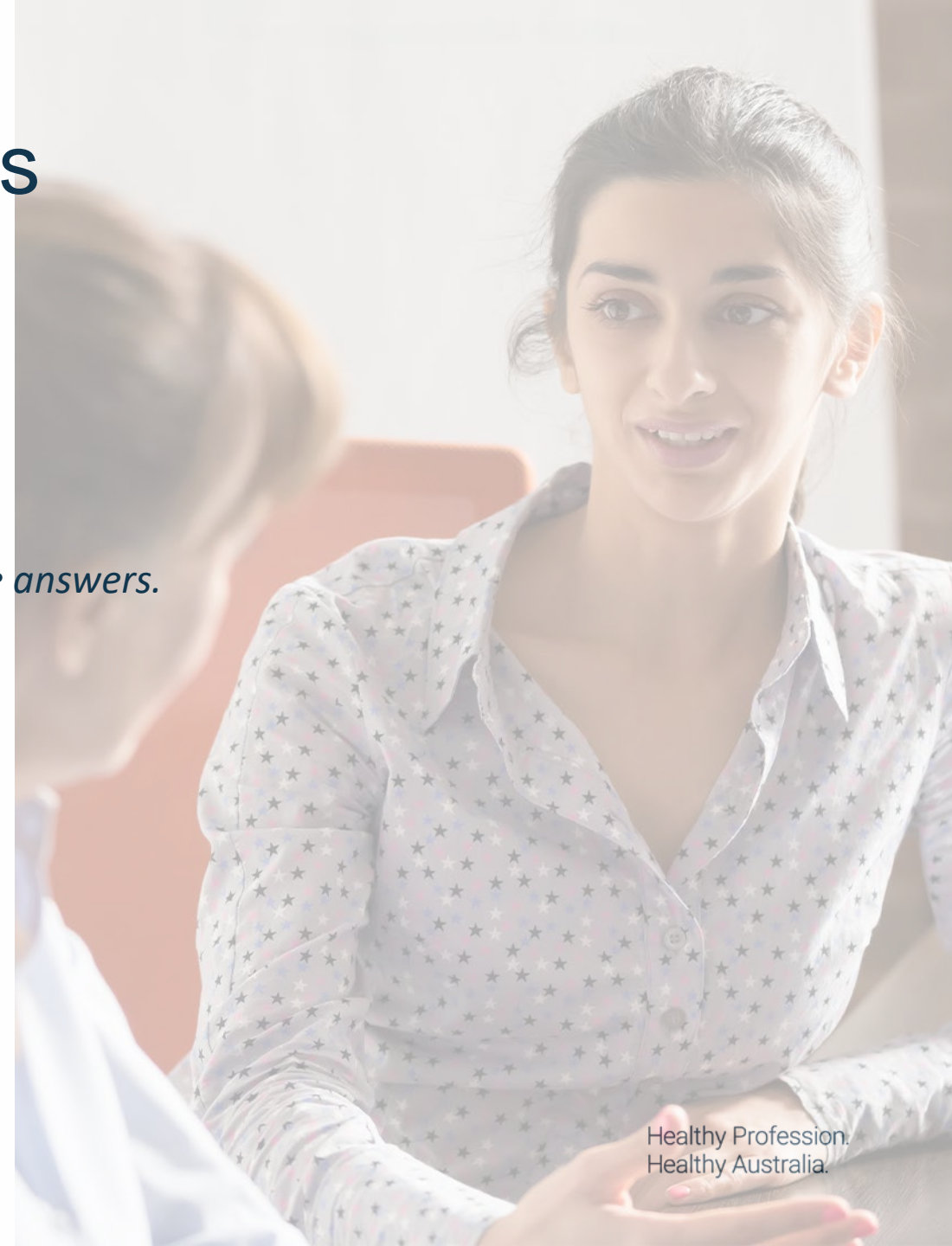
1. Find your tribe.
2. Start now.
3. 'Age and stages'

But most of all advocate for your child, ask the questions, look for the answers.

Listen to your child, learn from them.

Ask them what they need.

Give them your support and understanding.





Dr Tim Jones
GP, Tasmania

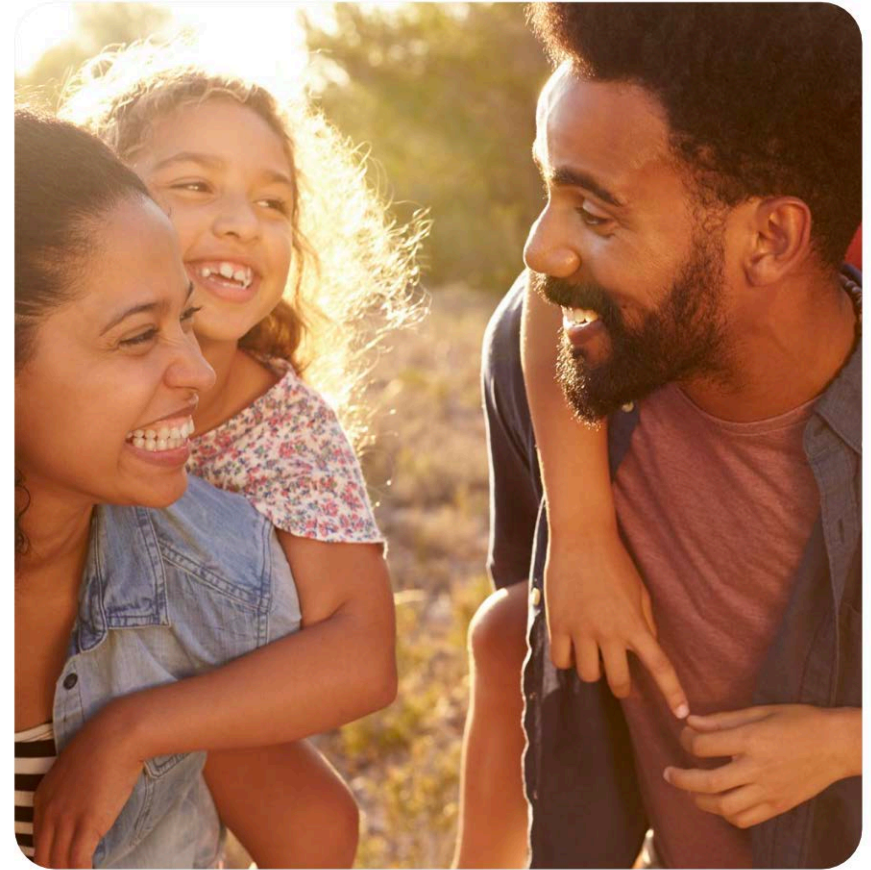
Anna, aged eight and her family

As a GP collaboration is key

Making the goals realistic and family focused

Being the 'hub' in 'hub and spoke'

Adapting to suit a changing population



Collaboration

What am I prioritising?

What will achieve the greatest positive impact for the family?

How can I connect with the school?

How can I connect the family to supports?

How can we keep Anna connected?



Being family focused

Anna needs a voice and to be heard

Her parents will benefit from debriefing

The school will benefit from engagement

We can use the team around us to support this



Adapting General Practice in innovative ways

Using reception/front of house teams to support families when you're collaborating

Using them also when you're running late

Using practice nurses and their endless skill and trust to keep the connection strong

Setting up dedicated appointment types/spaces as a GP

Running practice parenting groups

Barriers for implementation

Practice culture

Developing workflows

Recognising that it takes time to see results





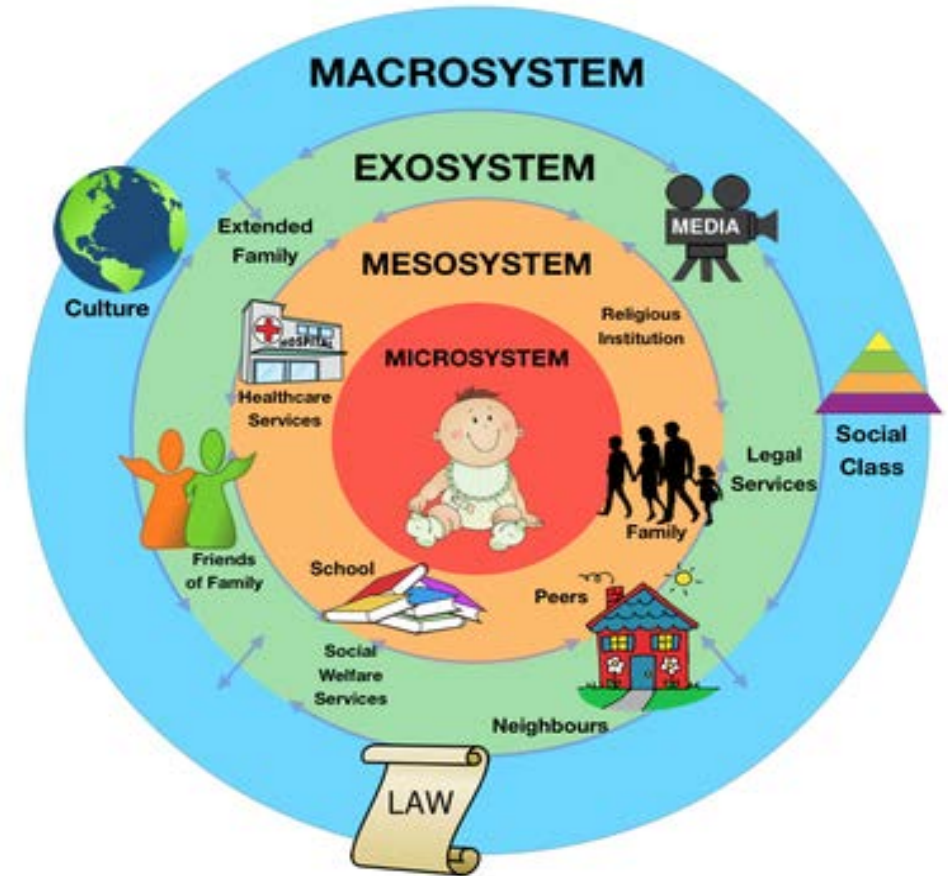
Dr Kumudu Rathnayaka
Child and Adolescent Psychiatrist, NSW

Re cap - How to understand children's presentations ?

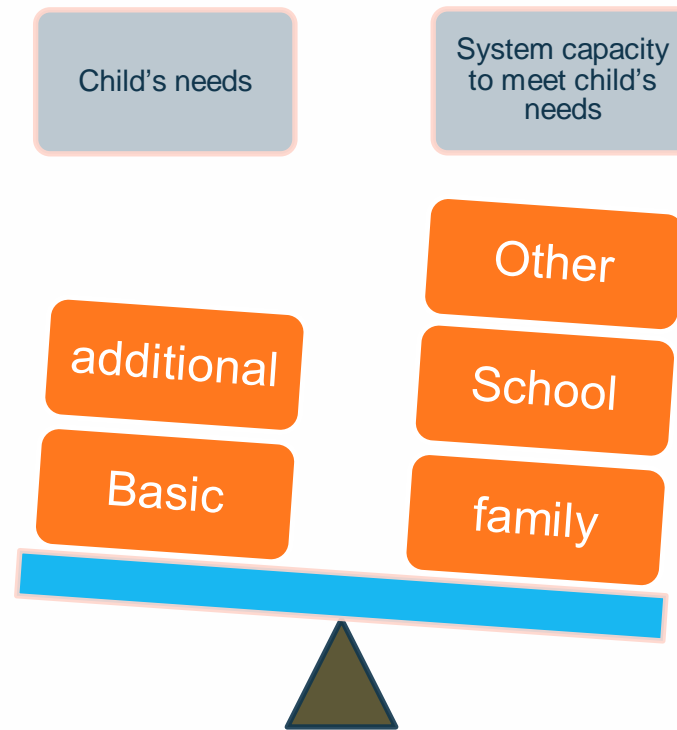
Children are not isolated individual entities.

Its an interaction between what's happening within, in family, school, media give rise to children's presentations.

Though the expression can be “now” there have been contributory factors that have been cumulating.



When do problems occur?



Challenges for the GP

Though it's the child who present, the problems can be somewhere else.

Family, parents may not recognize the systemic complexity

People may share different formulation

May not have capacity

Child or family may not be able to access support they need

Your factors

You are overburdened, time poor.

Anna - 8

Nocturnal enuresis

Poor sleep, dysregulated behavior

School refusal Struggles with attention

Ok at school

Physical Ex – normal including hearing, vision

Worsening and impacting the family



Steps

1. Best foundation is your relationship with the family , community and services around you. You know them.
2. Developing a shared formulation.
3. Developing a shared step wise management plan. Not everything needs to be done immediately. Agree on what to do first.
4. Knowing what services are out there, what they can do and how to access.
5. You are the one who hold the child and the family and whom they come back to.



Collaboration

You can't do it alone.

Figure out who can do what.

How each of the team can support others

- Family, School, Health care workers, Child protection services , Other important people around child's life

Case conferences – Family to be involved when ever possible.



Questions?