Tonight's webinar will begin shortly

RACGP
Royal Australian College *of* General Practitioners

Healthy Profession.
Healthy Australia.

After six years of diabetes check-ups, you notice that pigmentation on her cheek.

You decide to excise the lesion and find early melanoma.

General practice – everything you've trained for and more

become a GP

RACGP

GENERAL PRACTICE

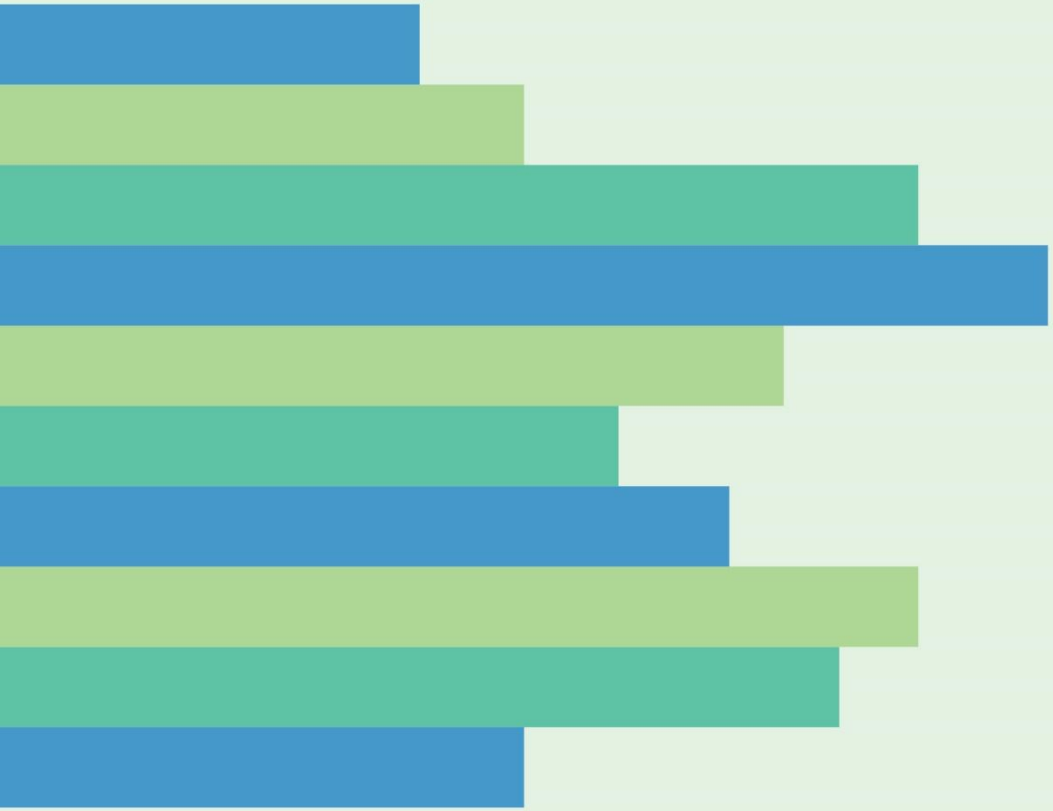
HEALTH OF THE NATION

2021

A unique insight into the state of Australian general practice

Visit our website to find out what this year's report reveals:
www.racgp.org.au/hotn

RACGP
Royal Australian College *of* General Practitioners



RACGP

PRACTICE OWNERS NATIONAL CONFERENCE

14–15 May 2022, Hobart

The fourth RACGP Practice Owners National Conference is coming to Hobart and will feature an exciting two-day program full of education, professional development and networking opportunities.

Visit practiceowners.racgp.org.au

#GPPracticeOwner

Upskill. Download.

Expand your skills in the diagnosis and treatment of dermatological conditions in your practice.

Sign up now for the new-look Certificate of Primary Care Dermatology.

REGISTRATIONS NOW OPEN
www.racgp.org.au/dermatology

RACGP

Simplifying and improving your CPD experience.

We've made even more improvements to your myCPD dashboard to save you time and personalise your experience.

Find out more at racgp.org.au/yourcpdhome

RACGP | CPD

2020
22

RACGP

General Practice Business Toolkit

Helping you look after the business side of general practice

Establish, manage and enhance your practice using our new General Practice Business Toolkit.

Build a sustainable business with six easy-to-navigate modules and a brand new set of interactive tools.

- Use the billing calculator to learn how to achieve your financial goals.
- Design your ideal practice layout.
- Set your vision and values and focus on what's important to you as a practice owner.

TO FIND OUT HOW YOU CAN GET THE MOST OUT OF THE TOOLKIT, VISIT www.racgp.org.au/gpbt

We will begin in 45 seconds

Simplifying and improving your CPD experience.

We've made even more improvements to your myCPD dashboard to save you time and personalise your experience.

Find out more at racgp.org.au/yourcpdhome

RACGP | CPD

2020
22

Upskill. Download.

Expand your skills in the diagnosis and treatment of dermatological conditions in your practice.

Sign up now for the new-look Certificate of Primary Care Dermatology.

REGISTRATIONS NOW OPEN
www.racgp.org.au/dermatology

RACGP

Alcohol and Other Drugs
GP Education Program

Training GPs to help people tackle alcohol and other drug use

RACGP

racgp.org.au/AOD

NACCHO–RACGP Resource Hub

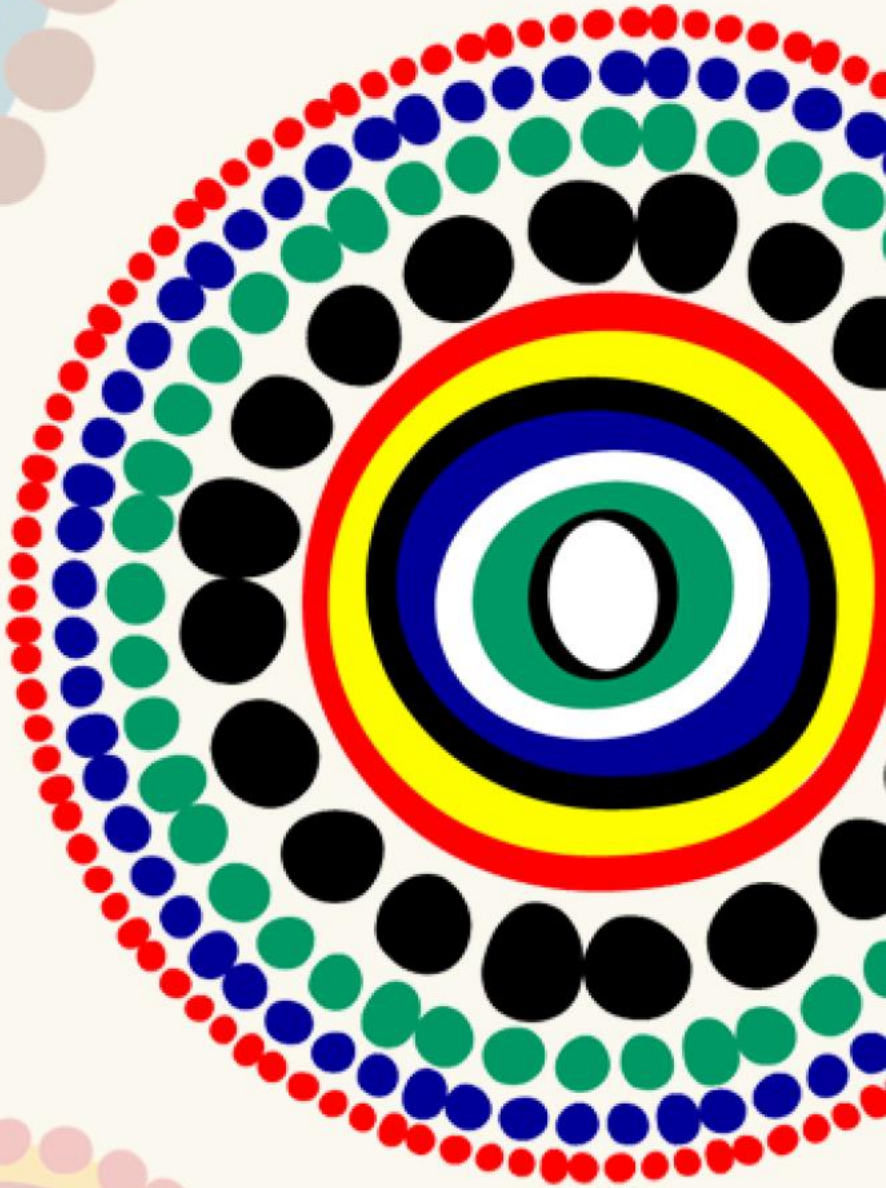
Supporting effective and culturally safe primary healthcare

Learn more at www.racgp.org.au/cultural-safety

RACGP

Royal Australian College *of* General Practitioners

NACCHO



RACGP

General Practice Business Toolkit

Helping you look after the business side of general practice

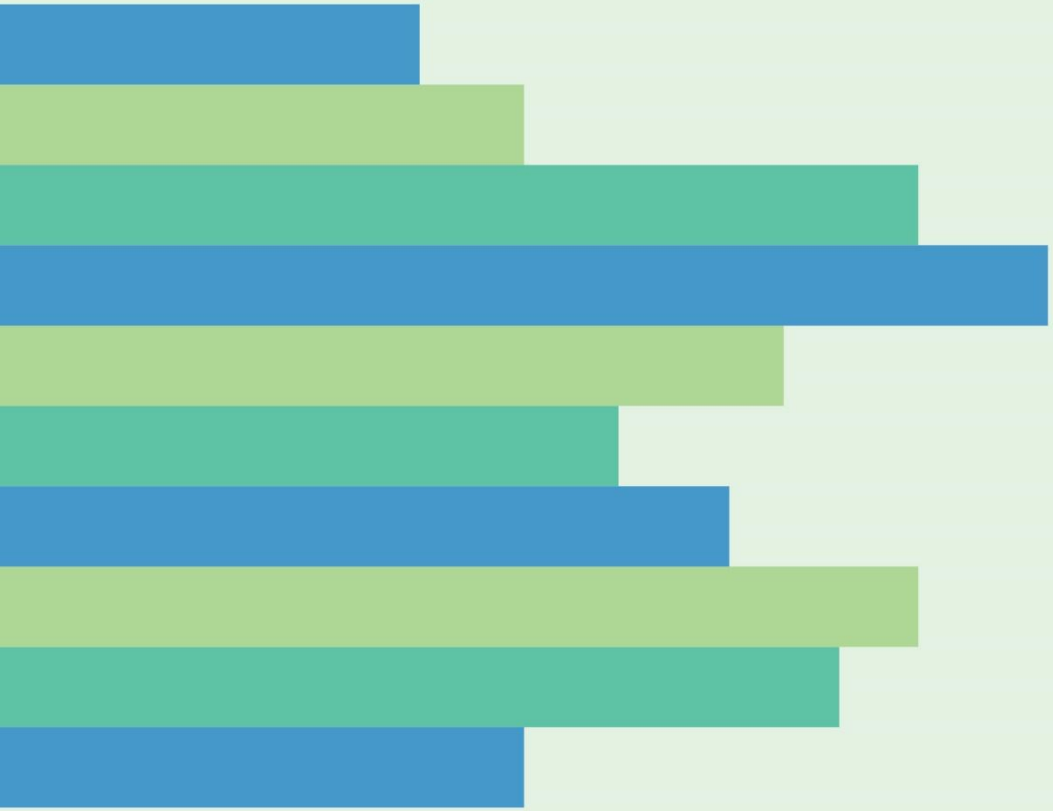
Establish, manage and enhance your practice using our new General Practice Business Toolkit.

Build a sustainable business with six easy-to-navigate modules and a brand new set of interactive tools.

- Use the billing calculator to learn how to achieve your financial goals.
- Design your ideal practice layout.
- Set your vision and values and focus on what's important to you as a practice owner.

TO FIND OUT HOW YOU CAN GET THE MOST OUT OF THE TOOLKIT, VISIT www.racgp.org.au/gpbt

We will begin in 15 seconds



RACGP

PRACTICE OWNERS NATIONAL CONFERENCE

14–15 May 2022, Hobart

The fourth RACGP Practice Owners National Conference is coming to Hobart and will feature an exciting two-day program full of education, professional development and networking opportunities.

Visit practiceowners.racgp.org.au

#GPPracticeOwner

NACCHO–RACGP Resource Hub

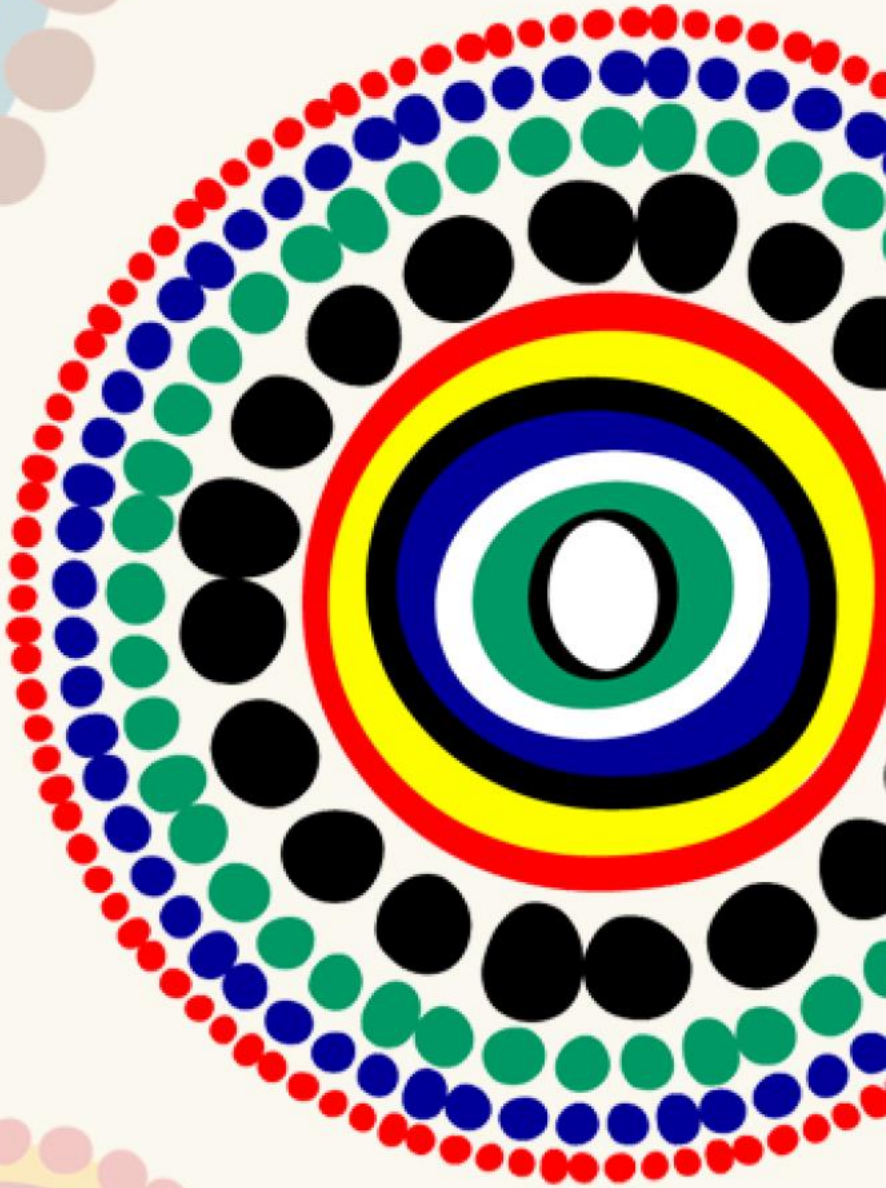
Supporting effective and culturally safe primary healthcare

Learn more at www.racgp.org.au/cultural-safety

RACGP

Royal Australian College *of* General Practitioners

NACCHO



Welcome to tonight's webinar

RACGP
Royal Australian College *of* General Practitioners

Healthy Profession.
Healthy Australia.

Infant and child mental health:

Connecting with children and families

RACGP and Emerging Minds

Royal Australian College *of* General Practitioners

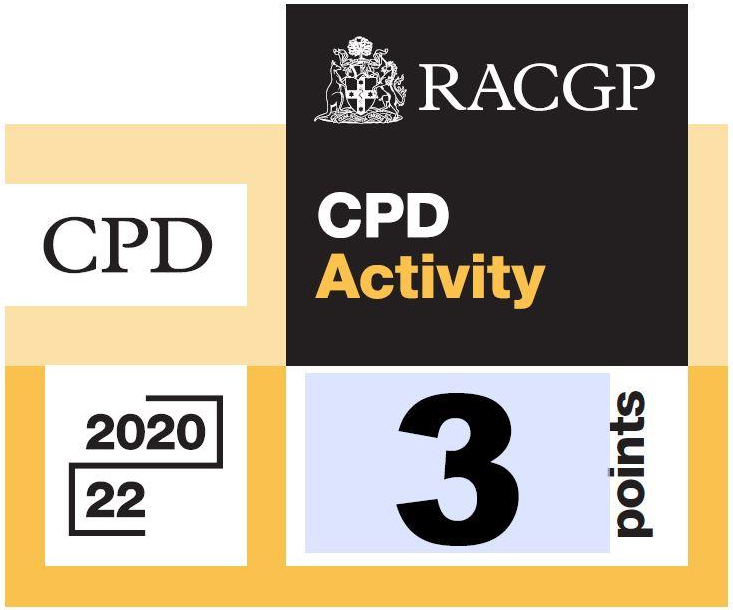
Specific Interests

emerging minds®

Advancing the mental health of infants, children and adolescents

Healthy Profession.
Healthy Australia.

CPD



EventsGPSI@racpg.org.au

RACGP
Royal Australian College *of* General Practitioners

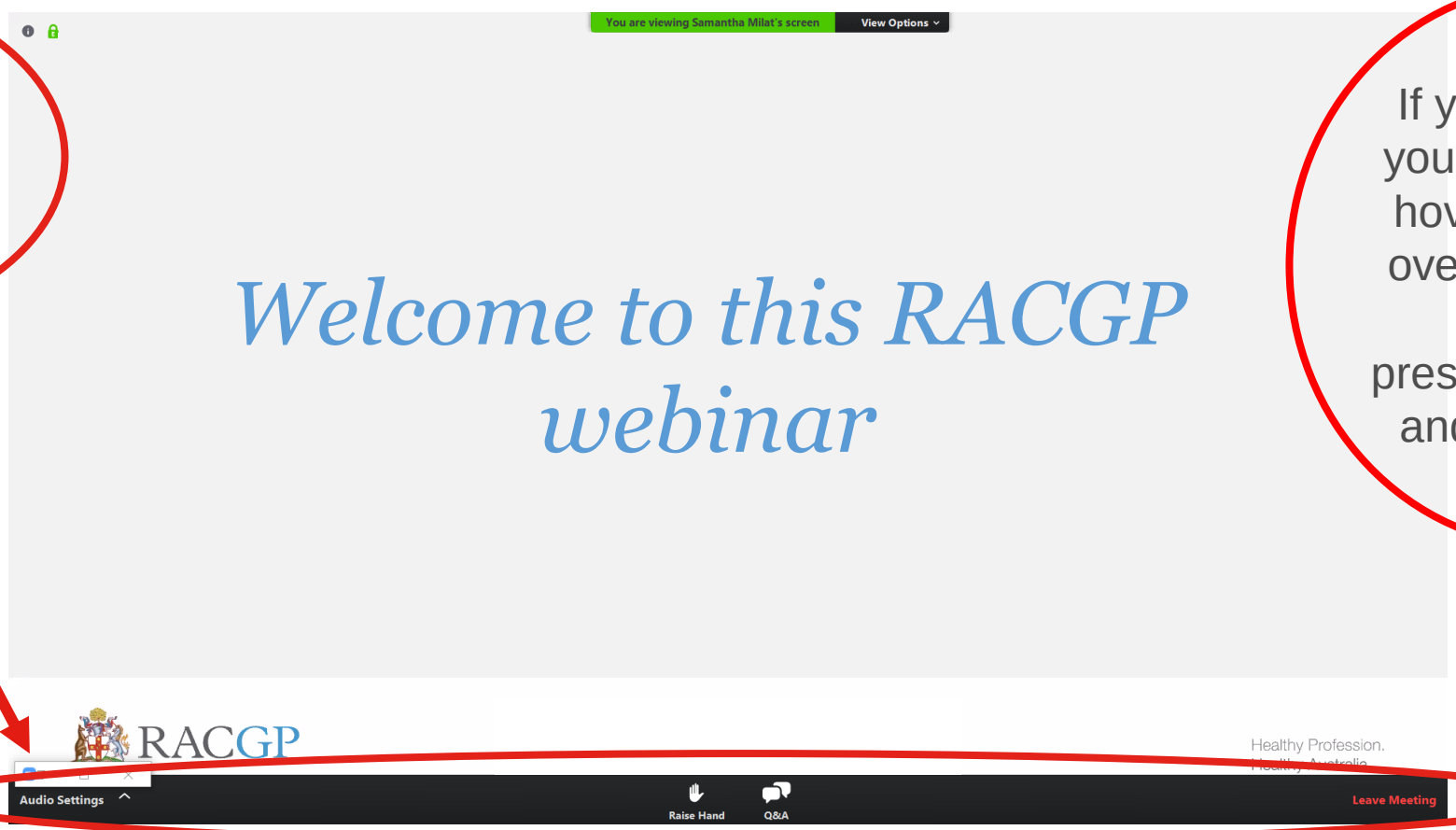
Specific Interests

emerging minds®
Advancing the mental health of infants, children and adolescents

Healthy Profession.
Healthy Australia.

Where is my control panel?

Your control panel will appear as a bar at the bottom of the presentation screen



If you cannot see your control panel, hover your cursor over the bottom of the shared presentation screen and it will appear

RACGP
Royal Australian College *of* General Practitioners

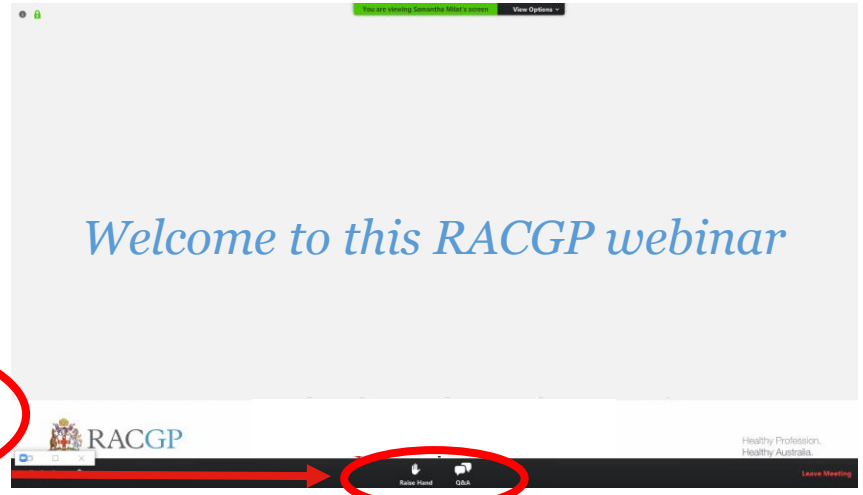
Specific Interests

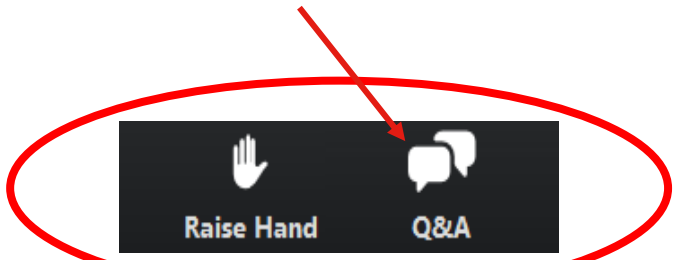
emerging minds®
Advancing the mental health of infants, children and adolescents

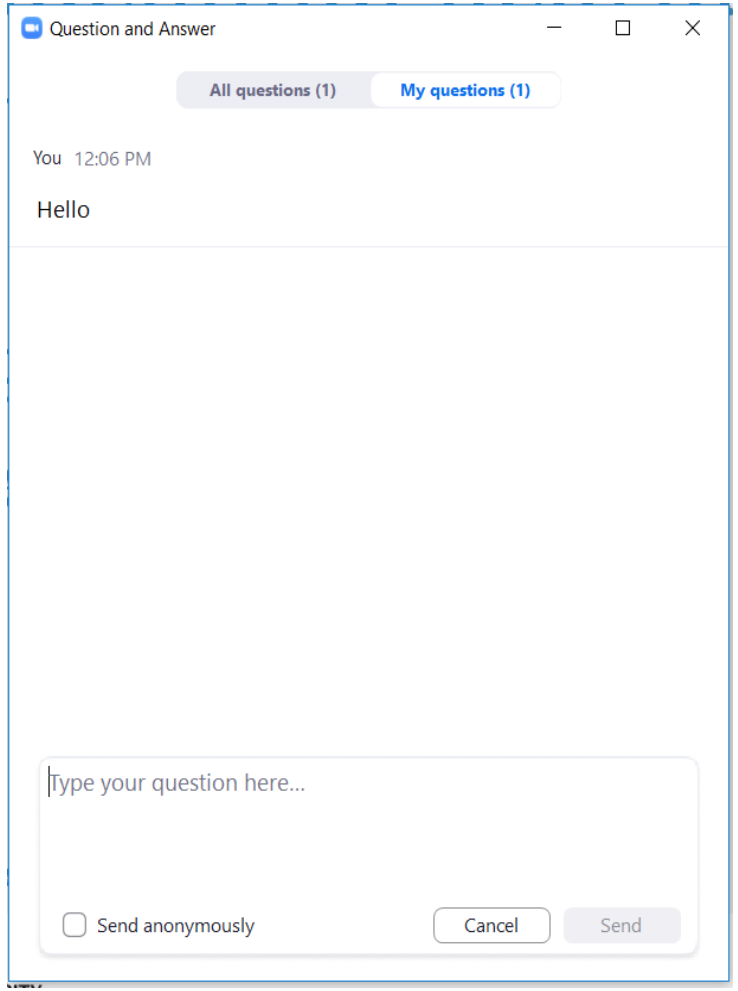
Listen only mode

You have been placed on “mute” to optimise the learning experience for you and your peers

Use the question box function to talk to us.







RACGP
Royal Australian College of General Practitioners

Specific Interests

emerging minds®
Advancing the mental health of infants, children and adolescents

emerging minds®
Advancing the mental health of infants, children and adolescents

Dr James Best

Chair – RACGP Specific Interests
Child and Young Person's Health

RACGP Royal Australian College *of* General Practitioners

Specific Interests

emerging minds®
Advancing the mental health of infants, children and adolescents

Healthy Profession.
Healthy Australia.

Acknowledgment of country

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

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

Partner

emerging minds®

Advancing the mental health of infants, children and adolescents

emergingminds.com.au

@EmergingMindsAU

RACGP Specific Interests

Royal Australian College *of* General Practitioners

emerging minds®

Advancing the mental health of infants, children and adolescents

Healthy Profession.
Healthy Australia.

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?

Dr James Best
GP host & Facilitator
Chair, RACGP Specific Interests Child and Young Persons Health

Melissa McCosker
Lived experience

Dr Cathy Andronis
GP
Chair, RACGP Specific Interests Psychological Medicine

Dr Ewa Bodnar
Child & Adolescent Psychiatrist
Queensland Centre for Perinatal and Infant Mental Health (QCPIMH)

RACGP
Royal Australian College *of* General Practitioners

Specific Interests

emerging minds®
Advancing the mental health of infants, children and adolescents

Healthy Profession.
Healthy Australia.

Learning outcomes

1.Identify key concepts in infant and early childhood mental health including the common mental health conditions experienced by infants, toddlers, and pre-schoolers.

2.Describe the importance and phases of a child-centred and family-focused approach to responding to infant and child mental health concerns.

3.Apply skills in engaging and connecting with young children and their families.

Case Study

Dylan (2 years old)

The parent, Charlotte, has come to see the GP to review how her two-year-old son, Dylan, responded to antibiotics. Two weeks ago, Charlotte visited her GP after Dylan became unwell, and he was found to have an ear infection. At the time, Charlotte reported that there had been incidents at childcare due to Dylan's aggressive behaviours. Charlotte reported that she was seeing these same behaviours at home.

https://vimeo.com/668436296/daefab141e

RACGP
Royal Australian College *of* General Practitioners

Specific Interests

emerging minds®
Advancing the mental health of infants, children and adolescents

Healthy Profession.
Healthy Australia.


Healthy Eating is Fun

Melissa McCosker

Lived Experience

RACGP
Royal Australian College *of* General Practitioners

Specific Interests

emerging minds®
Advancing the mental health of infants, children and adolescents

Healthy Profession.
Healthy Australia.

Lived Experience

Melissa McCosker -
Mother of two
(17 months and 5 years)

TAKE CARE WHEN NORMALISING

- It can be reassuring as a parent to be told something is normal BUT… note that some parents may also feel that it is not OK to be struggling with ‘normal behaviour’.
- Normal does not mean it is not hard e.g. infant sleep
- Normal can still have negative impacts on child or family unit e.g. child in video
- Think about strategies to put into place to help the family cope and get through the difficult period

TAKE CARE WHEN NORMALISING

Assurance it is a safe space to talk about struggles - no judgement

When normal is not - looking beyond milestones/statistics - look holistically at situation, address concerns

Early intervention is important

It is ok and not a failing to investigate even if the overall outcome is reassurance, it is normal

DO NOT LEAVE THEM HANGING/ WONDERING WHAT NEXT

- Don’t end without questions answered, book another appointment, refer to resources, formulate a plan
- Ensure the patient knows who to contact if it doesn’t work or there are continued struggles
- Let the patient know it is OK to revisit and where to go for help

LIKE ADULTS, NOT ALL CHILDREN ARE THE SAME

- Observe the child or take guidance from the parent, some will respond to distraction, others will not
- Talk to parent, watch child’s cues, don’t be afraid to change your approach if it isn’t working
- It isn't personal, it is the environment or situation - doing what you can to make it less clinical etc.

LIKE ADULTS, NOT ALL CHILDREN ARE THE SAME

Speak to the child in age-appropriate terms.

Talk to them, not just the parent. Be confident.

Giving autonomy/agency where possible to the child

Dr Cathy Andronis

Chair, RACGP Specific Interests
Psychological Medicine

RACGP
Royal Australian College *of* General Practitioners

Specific Interests

emerging minds®
Advancing the mental health of infants, children and adolescents

Healthy Profession.
Healthy Australia.

Connecting with families in GP

A child-centred and family-focused approach: Practice Skills

A GP, a toddler and his parent: engaging with the young child, listening to the parent.

Reviews mother and child, **aware of child behaviour concerns**

Co-operative Physically Well '**Aggressive**' at childcare, and at home

Preoccupied, concerned, feeling **stressed**

RACGP Royal Australian College of General Practitioners

Specific Interests

emerging minds

Healthy Profession. Healthy Australia.

The GP Actively Listens and Responds
(What we Do)

Dylan's Perspective – mostly non verbal

Behaviours

Mum's Perspective – **I**deas
Concerns
Expectations

Words, emotion, body language

GP's Task**:**

Listens and Responds

Naming the emotion, normalising
Understanding
Respectful and appropriate responses
Silence and Supportive statements
Empathy, exploring

RACGP Royal Australian College *of* General Practitioners

Specific Interests

emerging minds®
Advancing the mental health of infants, children and adolescents

Healthy Profession. Healthy Australia.

Clinical Micro-skills of GP Engaging with Dylan and his mother (How we Do It)

Provide structure Sign-posting; chunking and checking; summarizing

Build Rapport (attunement throughout consultation) Introductions; purpose of consultation; active listening (reflecting, eye contact, paraphrasing); empathy – implicit and explicit/ verbal, non-verbal.

Bridging the **GP**(disease prevention model) and **Patient** (social stressors) ***Perspectives***.

Balancing conflicting needs.

Clinical Micro-skills of GP Engaging with Dylan and his mother in 8 minutes (Summary)

- After **reassuring** Dylan and his mother at this **review** appointment that Dylan is physically well, the GP engages with both of them, encouraging **security** and **trust** (between mother and child, and between GP and patient(s), before **exploring** the important behavioural **concerns** raised by the childcare team.
- The GP **listens actively**, **empathically validating** the parent's position, **acknowledging** her hardship and distress, and **encourages** the mother to **express** her emotions and beliefs.
- The GP is **mindful of the child's presence**, and **advocates** on his behalf.
- The GP remains **calm** and **objective**, **witnesses** the mother's distress, and avoids judgmental reactions while **assertively** expressing serious concern.
- Once the mother has '**felt heard**', she is **open to further exploration** of the child's 'problem' behaviours.
- **Securely balancing** the needs of mother and child(the 'identified patient'?)

Dylan, his mother and the GP

<u>Building Rapport, Encouraging Security</u> (0.33-0.55).

Engages Dylan **playfully**, **observing** his responses, assesses his **development** while promoting mother-child **attachment** and safety.

Respects boundaries- mother-child / Dr-Patient(s)

<u>Active Listening, Exploring</u> (1.15-1.33).

GP invites mother to talk, **observes mother- child interaction** closely, empathy,
Acknowledges and **validates** Dylan's response

<u>Witnessing, Curious and Non-judgmental stance</u> (2.00-2.43).

GP **remains calm** despite mother's anger, avoids reacting negatively (transference)
Normalises and **educates**, provides information and **models curious examination**

<u>Stays on target, Returns focus to Dylan and Assessment</u> (3.15-3.32)

Gentle and **respectful, assertiveness**, encouraging "**reflecting, not reacting**" and consideration of facts while **not dismissing emotions**

The GP as a "**secure base**" for exploration.

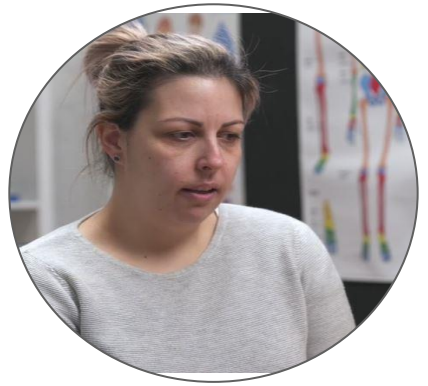
<u>Assertiveness- the "broken record"</u> (3.56-4.19)

GP continues active listening, validating mother, returning to Dylan's psychosocial needs.

Dylan, his mother and the GP

<u>Validating the Patient</u> (4.30-4.40)

Responding to the patient with **compassion** and reflection. Making the implicit, explicit.



<u>Witnessing and accepting</u> (4.48-4.55)

Mother now comfortable to accept her **vulnerability** (less anger, more reflective).

<u>Keeping the Child in Mind</u> (5.18-5.57)

GP **assertive**ly (calm but firm) reminds mother of **boundaries, security needs of child**. Validates conflicting needs.

<u>Advocating for the Child, respecting limits</u> (6-10-6.39)

GP repeats child's needs, raises child perspective, **reframes** the 'problem behaviour'.

<u>Empowering mother, offering Hope</u> (7.07-7.21).

GP continues on target, assertively, respectfully **guiding mother**, offers empathic **support and advocacy** for parent.

Engaging Families in Distress

Take Home Messages:

Challenging family issues are common GP presentations.

The “identified patient” may not be the one who with the problem

Treating individuals requires treating the family – systemic management

Safety is paramount. Stay on target.

Respond assertively. Don’t React aggressively or passively.

Preventative care is possible. Take Time and Keep Reviewing.

Dr Ewa Bodnar

Child & Adolescent Psychiatrist

Queensland Centre for Perinatal and Infant Mental Health (QCPIMH)

Connecting with children and families

RACGP
Royal Australian College of General Practitioners

Specific Interests

emerging minds®
Advancing the mental health of infants, children and adolescents

Healthy Profession.
Healthy Australia.

Recognition of Lived Experience

The Queensland Centre for Perinatal and Infant Mental Health (QCPIMH) honours babies, children, parents and families experiencing challenges to mental health and social emotional wellbeing during pregnancy, infancy and early childhood.

We are deeply grateful to those who share their lived experience, stories and recommendations
to help improve services for expectant and new parents, babies, children and families.

Infant Mental Health

Osofsky & Thomas, **Zero to Three**, 2012

"The field of **Infant Mental Health** may be **defined** as multidisciplinary approaches to enhancing the social and emotional competence of **infants** in their biological, relationship, and cultural context.“

(Zeanah & Zeanah, 2001).

"Infant mental health" refers to how well a child develops socially and emotionally from birth to three.

Understanding infant mental health is the key to preventing and treating the mental health problems of very young children and their families. It also helps guide the development of healthy social and emotional behaviors.

RACGP
Royal Australian College *of* General Practitioners

Specific Interests

emerging minds®
Advancing the mental health of infants, children and adolescents

Healthy Profession.
Healthy Australia.

In IMH there is a clear emphasis on need to <u>Balance</u> the need to identify children with clinically significant impairments who require treatment, with not pathologizing children who are displaying a variant of typical development

Diagnostic Categories (DC0-5)

- 10 Neurodevelopmental Disorders
- 20 Sensory Processing Disorders
- 30 Anxiety Disorders
- 40 Mood Disorders
- 50 Obsessive Compulsive and Related Disorders
- 60 Sleep, Eating and Crying Disorders
- 70 Trauma, Stress and Deprivation Disorders
- 80 Relationship Specific Disorders

Babies always exist in a relationship with another

Disorders Listed all have impairment Criteria

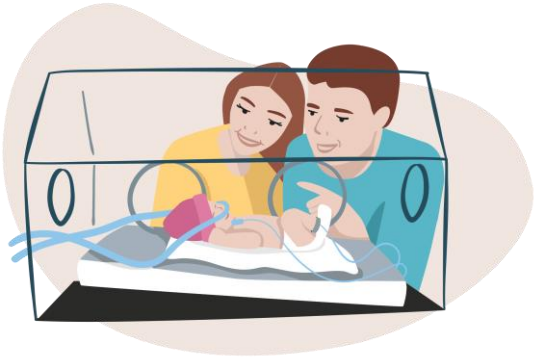
- Cause distress in infant / young child
- Interfere with the infant / young child's relationships
- Limit the infant / young child's ability to participate in activities and routines
- Limit the family's participation in everyday activities or routines
- Limit the infant / young child's ability to learn and develop new skills, or interfere with developmental progress

Decisions: what type of problem is the family presenting with

- Medical
- Parentcraft
- Parental Mental Health
- Infant Mental Health
- Child Safety – direct harm, neglect, DV
- Other – eg homelessness, parental conflict, acculturation difficulty, legal dispute,

Often there is overlap but it useful to triage priorities

How to Tell?



Like with any consultation:

- History
- Examination
- Collateral

How is Infant Mental Health different?

- Deliberate observation - infant / young child + infant / young child with carer

Observation ➡ Pattern recognition – how does this infant and carer compare to others I have seen in the same situation? eg for a vaccination, with a temperature.

If not, then what is different? What do I need to understand in order to help?

Case Study

- Lots of excellent points
- Engagement with mother excellent
- Child friendly space
- Many themes raised by mum
- Identification that topics raised by mum need a parent only consultation to explore
- Acknowledgement of child and interaction aimed at making child feel at ease
- Limitations - actors – information from observation is inaccurate

<u>BUT</u>

Difference between parenting consultation and IMH consultation is observation of and engagement with the child + questions aimed at understanding whether parent can mentalise for the child

Observation in a consultation

- Ongoing observations throughout routine consultation
- Have toys for different age groups to engage child with
- If time poor consider another appointment for deliberate observation

Ask parent to spend a few minutes on the floor / chair interacting with the child

> ***"Could we spend a few minutes on the floor together so I can watch Sam with you and understand him better"***
>
> ***"Could we play together with Sam for a few minutes so I can understand what you're telling me better***"

You can join in play after a minute or so if it feels natural to do so and especially if the parent is unsure what to do. Different information is gained from observing parent / child and from interacting yourself.

Areas to Observe

- Infant / child general competence in developmental areas – social, emotional, speech,
- Parental interaction style
- Infant / child interaction style
- Your internal response to being around this dyad / family

Themes to look for

- Do they look comfortable interacting
- Does it look like they play together often
- Is there eye contact
- Does the child seek reassurance from the parent
- Is the parent reading their child's cues
- Is the parent intrusive or withdrawn
- Is the parent hostile
- Is the child intrusive or withdrawn
- Is the child flat or sad
- Does the baby arch away from parent
- How do I feel watching them interact
- If I didn't know would it be obvious to me that this adult is this child's parent / carer
- Can the parent follow their child's lead
- Can the parent take charge kindly when necessary
- Can the child be comforted by the parent

In summary

- Infants / young children are vulnerable to a variety of mental health difficulties now and into the future
- Labels are useful but having an understanding of why the family are presenting (and why now) is more useful
- In IMH we always take notice of what the infant / young child is communicating through their behaviours and interactions
- Engagement and observation of the infant / young child is crucial to assessment
- Prof Kimble c1999 “Children are more like small adults than large cucumbers” – true even for mental health
- Trust your instincts and observational skills
- Trust your pattern recognition

RACGP Royal Australian College of General Practitioners

Specific Interests

emerging minds® Advancing the mental health of infants, children and adolescents

Healthy Profession. Healthy Australia.

Further Information

www.developingchild.harvard.edu

www.zerotothree.org

www.jaspermountain.org

www.childtrauma.org

www.danielhughes.org

www.circleofsecurityinternational.com

www.childrens.health.qld.gov.au/chq/our-services/mental-healthservices/qcpimh

Emerging Minds

The case study from this webinar comes from Emerging Minds eLearning

'A GP Framework for infant and early childhood mental health assessment (0 - 5 years)'

This course is accredited with the RACGP as a CPD Accredited activity, and is also accredited with the GP Mental Health Standards Collaboration as a stand-alone Clinical Enhancement Module (as part of the MHST modular pathway)

Emerging Minds has a range of toolkits, practice papers, webinar recordings, and podcasts for GPs.

www.emergingminds.com.au

Royal Australian College *of* General Practitioners

Specific Interests

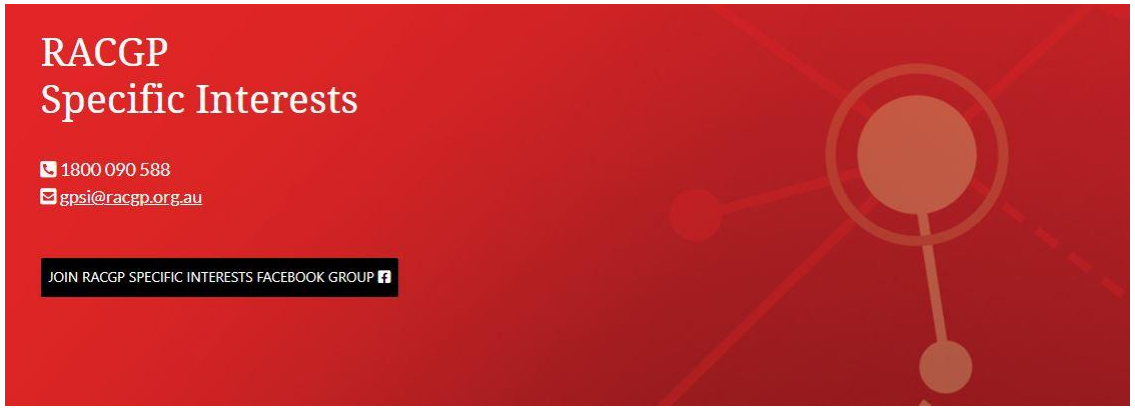
emerging minds®
Advancing the mental health of infants, children and adolescents

Healthy Profession.
Healthy Australia.

RACGP

Join the Child and Young Person's Health Specific Interest Group

GPSI@racgp.org.au



https://www.racgp.org.au/the-racgp/faculties/specific-interests/become-a-member

RACGP
Royal Australian College of General Practitioners

Specific Interests

emerging minds®
Advancing the mental health of infants, children and adolescents

Healthy Profession.
Healthy Australia.

Q&A and panel discussion

Please type your question in the Q&A box below or upvote a favourite question

Thank you

RACGP

Royal Australian College *of* General Practitioners

Healthy Profession.
Healthy Australia.