

# **Children and Young People**

# The Role of the GP and emerging issues in primary care

- Acting as the first point of contact for the unwell child
- Ensuring high quality evidence-based care for children and young people
- Identify vulnerable children when seeing adult patients and demonstrating competence in appropriate safeguarding
- Multi-professional working across clinical sectors, enabling care closer to home
- The transition to adulthood as a time of risk. Health promotion in adolescence to encourage greater autonomy and ownership of future health, for example diet, exercise, and obesity.
- Social determinants of health are particularly important with rising incidences of child poverty and inequality. Reducing inequality of access to services and integrating health with social care
- The role of the GP in commissioning and coordinating services.

## **Knowledge and Skills Self-Assessment Guide**

#### The normal child

- Developmental milestones and assessment of development delay
- Growth including interpretation of growth charts
- Maturation including puberty
- The neonatal period including screening (e.g. phenylketonuria, hypothyroidism, cystic fibrosis)
- Physical development with normal variations
- Emotional and psychological maturity and normal variation in childhood behaviour
- Awareness of norms and referral standards when undertaking Newborn and Infant Physical Examination Programme (NIPE) examinations.

## **Symptoms and Signs**

• Adolescence as a developmental stage and its particular issues, in particular the importance of being opportunistic in assessing mental well-being.

- Behavioural problems
- Developmental problems
- Faltering growth
- Features of the acutely unwell child including fever, rashes, irritability, breathing and circulatory signs
- Mental health problems including bullying, stress and suicide.

# **Common and Important Conditions**

- Acute paediatric emergencies and resuscitation
- Appropriate acute and repeat prescribing and reviews
- · Behavioural and mental health problems (e.g. (ADHD), depression, eating disorders,
- Behavioural problems (e.g. enuresis, encopresis, eating disorders, tantrums)
- Childhood infections (e.g. exanthemata, bronchiolitis, croup)
- Childhood malignancies (e.g. leukaemias, lymphoma, brain tumours, retinoblastoma)
- Chromosomal disorders (e.g. Down syndrome, Fragile X, trisomy 18)
- Congenital abnormalities (e.g. congenital heart disease, hypothyroidism
- Dermatological disorders in childhood
- Diagnosis and management of diseases relating to children (e.g. asthma, diabetes, epilepsy, respiratory infections such as pneumonia, bronchiolitis, croup)
- Disease prevention and well-being (e.g. prenatal diagnosis; breastfeeding; infant feeding
- Faltering growth and underlying causes, including ineffective intake (e.g. due to lack of breast milk), chronic diseases (e.g. cystic fibrosis, coeliac disease), chronic infection, non-medical causes such as abuse or neglect
- Early and undifferentiated presentations, and recognition of a seriously ill child
- GI conditions that present in childhood (e.g. intussusception, coeliac disease, cows' milk protein allergy, cystic fibrosis)
- Immunisation in children
- Learning disabilities in children (e.g. cerebral palsy, disorders with developmental delay, autism, dyslexia, dyspraxia, autistic spectrum disorders including Asperger's syndrome)
- Musculoskeletal problems relevant to children (e.g. inflammatory arthritides (osteochondritis, Osgood-Schlatter's, Perthes' disease)
- Neurological problems relevant to children including seizures (e.g. febrile convulsions, epilepsy, awareness of rare degenerative neurological diseases
- Obesity in childhood
- Poisoning: accidental ingestion, iatrogenic, overdose and deliberate self-harm
- Prematurity and complications such as chronic lung disease, cerebral palsy
- Renal diseases relevant to children

- Safeguarding children
- Sex identity and intersex including Risk of Female Genital Mutilation
- Sleep physiology and pathology of sleep disorders in infants and adolescents
- · Teenage pregnancy, risks of sexually transmitted infections, and Child Sexual Exploitation
- Transitional issues from child to adolescent and from adolescent to adult.

#### **Examinations and Procedures**

- Age-appropriate clinical examination and normal variation in biometrics
- Informed consent and assessment of competence
- Perform accurate measurements including peak flow and blood pressure
- Appropriate use of and techniques for venesection in children and young people
- Indication and administration of injections and immunisations.

### **Investigations**

- Appropriate investigations for common diseases need to be clearly understood (e.g. asthma, urinary tract infection)
- Prenatal diagnosis including screening available in UK for disorders such as Down syndrome, spina bifida, and structural defects
- Liaison with specialist colleagues when considering invasive or complex investigations and their correct interpretation
- Appropriate use of sedation and pain relief

## How this might be tested in MRCGP

#### AKT

- · Recognition of normal stages of child development
- Recognition of serious illness
- Shared care protocols for treating ADHD with methylphenidate

#### **RCA**

- A 15-year-old girl requests the contraceptive pill
- Phone call: a health visitor is concerned about the welfare of a baby in a vulnerable family. You are due to see the baby's mother later that day.
- A mother expects her three-year-old son to be potty-trained and wants to discuss why he is not.

#### **WPBA**

- Case-based Discussion about a mother who is very emotional about her young son's diagnosis of a brain tumour when he is also in the room
- Log entry reflecting on a consultation with a teenager who appears uncooperative
- Log entry about attending and contributing to a case conference for child safeguarding
- CEPS demonstrating a competent 6-week baby check.

# How to learn this topic

This section describes *examples* of opportunities for learning. We recognise that Covid-19 restrictions have significantly affected their

# Other relevant specialties

- A&E
- Public Health
- Child and Adolescent Mental Health services
- Paediatric oncology
- Other medical and surgical specialties e.g. neurology, orthopaedics, dermatology, ENT, Ophthalmology.

# Community/MDT

- Liaison, Co-ordination of care as advocate
- Awareness of other agencies

   roles and remit e.g. HV,
   Social workers, police, allied health care professionals,
   community paediatricians,
   CAMHS



### **Acute**

## The Sick Child: Recognition & Management

- Vomiting, rash, fever, abdominal pain, acute shock, altered consciousness, anaphylaxis, scrotal pain
- Acute exacerbation of chronic illness: Asthma, diabetes, epilepsy,
- Acute Infections: Respiratory tract infections, urinary tract infections, meningitis



## **Core Themes**

- Communication and Consultation
- the uncooperative child, the anxious parent, breaking bad news, competency and consent
  - The normal and the abnormal developmental milestones/relationships
  - Prescribing dosage and fluids
  - Safeguarding and protecting abuse, vulnerable groups, NAI, impact of drug and alcohol misuse
  - Health promotion & prevention screening, immunization, parenting skills

## **Primary Care**

- Day to day patient contacts
- Out of Hours in GP
- Outpatients/specialised clinics
- Child Health Surveillance
- Community Child Health
- CAMHS clinics

# Tips

- Audit
- Significant Event Analysis
- Clinical governance
- Risk Assessment
- Dr as teacher
- Leadership
- Local Immunisation policy