

Using simulation to teach child protection.

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Abstract

Background:

Addressing child protection concerns is a daunting task but there often is little opportunity to practice required skills. We felt this challenge could be aided using simulation. Simulation is used frequently and effectively to improve management of resuscitation situations but is rarely used for child protection.

Aim:

To develop a multidisciplinary delivered simulation course for paediatric junior doctors to develop and practice skills in child protection.

Method:

The course was aimed at paediatric trainees in the latter SHO years or early middle grade years. The faculty consisted of a senior Social worker, a senior Police officer, a Consultant Community Paediatrician, a Consultant General Paediatrician and two paediatric community grid trainees. The programme incorporated two structured talks and table top exercises in the morning.

The afternoon consisted of simulation scenarios conducted in a simulation suite, arranged mimicking a paediatric assessment unit. Three medical actors took various roles with one candidate actively running the scenario. The scenario was observed by all other participants in an adjacent seminar room linked via audio-visual stream from the simulation suite. The

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scenarios lasted approximately 15 minutes with feedback for 30 minutes. Scenarios covered were: seeing a baby with bruising, sexual abuse disclosure and a strategy meeting. The bruising scenario was divided into three parts; meeting the family for the first time and history taking, discussing the child protection process and then discussing results of investigations. This case was then discussed at a simulated strategy meeting.

Results:

Twenty one paediatric trainees attended the course. The overall feedback was very positive. Using a scale from 1-5 with 5 being positively "completely agree", participants rated all feedback questions 4-5. Comments from the trainees showed that they enjoyed the simulation scenarios and multidisciplinary teaching the most.

Conclusions:


Child protection is a challenging issue for trainees to address. The skills required can be taught and practised using simulation. We found multidisciplinary delivered simulation to be a popular way to teach child protection to our trainees.



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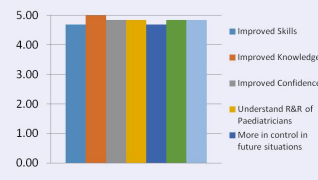
Bwrdd Iechyd Prifysgol
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University Health Board

Abstract

Results

To help trainees gain confidence and skill in dealing with child protection cases we developed a course based on simulated child protection scenarios using actors and multi-disciplinary input. The feedback has been very positive. This novel way of teaching child protection has the potential to enhance current training throughout the UK.

Thirteen paediatric trainees attended the course. The overall feedback was very positive.
Chart of ratings provided (1 = completely disagree to 5 = completely agree) on a number of questions about the course by 13 candidates.



Background

Child protection cases often demand excellent interpersonal skills. There is little opportunity for trainees to establish these skills in a safe environment. Simulation is a well established tool in General Paediatric Training but rarely used in Community Paediatric Training. Simulation is a new resource with significant potential for multi-professional learning in the area of child protection.

"An excellent day – thank you very much. Fantastic opportunity to learn practical processes and procedures, ask questions and experience real life scenarios – very useful & learnt a lot."
"This day motivated me to look at things from a distance and think laterally"
"Excellent course, very practical. Thank you, very useful for clinical practice in an area/topic which currently is very poorly taught / trained. More days like this please!"
"Excellent day, valuable insight into CP procedures and medicals in safe environments. Please could you try to repeat this course – maybe every year!"
"Learnt lots from the social worker and police officer present."
"Overall, really excellent course which has helped to demystify child protection."

Objectives

To establish a multi-professionally delivered simulation course to allow participants to develop practical skills in child protection.



Methods


Target audience: Paediatric trainees (ST3-8)
Faculty:
Senior Social worker,
Senior Police Officer,
Safeguarding liaison nurse,
Consultant Community Paediatrician,
Consultant General Paediatrician
2 Paediatric Community Grid trainees

Programme
Structured Talks (Multi-agency):
The rights of the child & the responsibilities of all doctors. The child protection process. The roles of the different agencies.
Table Top Exercises:
Neglect, acute head injury, fractures and sexual abuse. Relevant RCPCH Child Protection Companion Good Clinical Practice points were covered during each.
Simulation Scenarios:
Conducted in a simulation suite with medical actors. One candidate actively ran the scenario. Other participants observed in an adjacent room linked via audio-visual stream. The scenarios lasted 15 minutes with feedback for 30 minutes.

1. **A Baby With Bruising.** This scenario was divided into three parts:
 - i) The initial meeting with child and family & communicating the need for the child protection process.
 - ii) Taking a difficult history from the mother who had experienced domestic violence and the effects of drugs and alcohol in the family.
 - iii) The challenge of relaying the results of the investigations with the parents which showed rib fractures of different ages.
2. **Sexual Abuse Disclosure.** Teenager requests contraception in looked-after clinic and discloses sexual abuse. The candidate must address the child's safety and the need to inform Social Services
3. **Neglect.** Family attend general paediatric clinic. Older sibling is caring for the baby and parents are intoxicated. The candidate must gather information and ensure the children's safety.
4. **Vulnerable teenager.** A troubled teenager, who frequently goes missing from home, is referred for a child protection medical after alleging assault whilst being arrested. She is difficult and defensive. The objective is to gather as much history as possible and decide on your report.
5. **The Strategy Meeting.** The baby with bruising was discussed at a simulated multi-agency strategy meeting. Participants took on unfamiliar roles and experienced the meeting from a different professional perspective.



Bruised baby scenario. Printed with permission.




Simulated Strategy Meeting. Printed with permission.

Conclusions

The course was very successful with the highest level of candidate participation. Using simulation with the help of professional actors works well. The inclusion of social services and the police adds depth and realism. Candidate numbers have been reduced to eight to further enhance active participation in scenarios. The course will be run six monthly.
Using simulation within a multi-agency led course is a new method of providing child protection training. It has the potential to strengthen current training provisions in the UK.

References

RCPCH Child Protection Companion 2013.
All Wales Child Protection Procedures 2008.
CORE Info www.core-info.cardiff.ac.uk



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