Using Paediatric Hot Clinics as an Integrated Learning Tool
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**Background**
- In response to increasing paediatric A&E attendances, Queens Hospital started a rapid access referral clinic; a ‘Hot Clinic’
- Audits of the hot clinic showed almost half of patients could safely be cared for in the community – Patients were not admitted, no investigations performed and no follow up made from clinic
- The most common problems referred were gastroenterology and nutritional (34%), followed by neurological and developmental concerns (15%)

**Aim:**
Provide a learning opportunity to GP trainees to increase their knowledge and confidence in the management of children, allowing them to safely be cared for in the community. Improve communication and integration of community and hospital paediatric services

**The Project**
Initially we engaged with GP’s and GP trainees via an online survey to help us devise a tool that met the area’s needs and gain support for the project.

- **18% of GPs indicated they were not confident in dealing with children** and 73% felt they needed more paediatric training.
- 73% of GPs reported problems with communication between primary and secondary care.
- GP trainees survey showed locally only 2/3 gain formal paediatric training in their GP VTS.
- 65- 88% felt happy to use study leave for Paediatric learning opportunities.
- 60% indicated they would like learning to be hospital based.
- **More than 90% of trainees would be willing to engage** in learning together clinics, integrating paediatric and GP care.

**Participant feedback**
- Some reported feeling more confident in treating children after the project
- **100% would recommended the project to peers**
- Particularly found it helpful in management of feeding issues
- Clinics only had 2-3 patients per list so limited learning. Suggestions for expanding project to include time in Paediatrics A&E

**Future Plans**
1) Open this learning opportunity to other VTS schemes in the area and also qualified GPs
2) Amalgamate case reports into a booklet that others could learn from.
3) Invite participants to attend paediatric departmental teaching on day of clinic
4) Re audit hot clinic/A&E attendances and GP confidence