

Rapid changes to paediatric services in the pandemic early days – what went well? What can we learn?

Gadsby E¹, Christie-de Jong F², Bhopal S³, Corlett H⁴, Turner S⁵

¹ University of Stirling ² University of Sunderland ³ Newcastle University ⁴ NENC Child Health & Wellbeing Network ⁵ University of Aberdeen

A qualitative study with paediatricians and other child health professionals conducted in mid-2020

AIM

To describe and analyse changes in the delivery of child health services in the North of Scotland and the North East and North Cumbria (England) brought about by the first-wave of the SARS-CoV-2 pandemic response, from the perspective of healthcare providers.

METHODS

Purposive sample of **39** child healthcare professionals.
Review of government & local documents and RCPCH data.
Semi-structured telephone interviews (April – Oct 2020).

- What are the key changes in service delivery?
- What types of innovation have been introduced?
- What impact have the innovations had on services?
- What barriers have been overcome?
- What changes might usefully be sustained?

	North of Scotland	North England
Paediatricians	5	5
Specialist nurse	7	5
CAMHS	6	2
Allied Health Professionals	4	1
Other	-	4
TOTAL	22	17

KEY MESSAGE

Despite serious challenges experienced by staff during the first wave of the pandemic, there were significant opportunities for positive change which might be usefully sustained. However, some innovations must be carefully evaluated to mitigate potential risks.

Vast changes to working practices

- Opportunities for greater efficiency & wider networking
- Risks to staff wellbeing & team cohesion, and loss of personal contact with children & families

Freedom for staff and opportunity for staff-driven change

- Opportunities through reduced bureaucracy, new collaborations, integrated working and more innovative 'culture'.
- Risks in relation to workload and change fatigue.

Perceived impact on children and families

- Opportunities for less travel, reduced geographical inequities, increased self-care.
- Risks of reduced effectiveness of online working, privacy issues, parental wellbeing, child wellbeing, poorer care.

New ways of ...

Relating

"Is there anything we can do to help?"

Doing

"A big part of our work can now probably be done without asking the patients to travel to hospital"

Organising

"What we'd be looking at is far more a capacity across the region rather than per Trust"

Thinking

"There's been a lot of change in all parts of the organisation so people are willing to think about things differently"

Knowing

"It turns out, if you really, really have to, you can"

