Implementation of adolescent medicine curriculum in the pediatric QI: Adolescents' Friendly Health Services

Screening is an international standard of care necessary for 40 patients presented to A & E with suicidal attempt Royal Hospital Experience Feb 2016 - Feb 2017:

Screening for Self Harm and Suicide

Screening for Self Harm and Suicide

1- Outreach Oman Adolescents population through the establishment of a pioneer service unique of its kind across the country. The Adolescent Medicine division was founded at the Royal Hospital in February 2016.

2- Meet the International standard of care in prevention and early intervention for potentially harmful risk taking behaviors that shape adolescence years.

ACHIEVEMENTS

Clinical services and Treatment Modalities:

- Introduction of comprehensive, holistic assessment: Adopting patient centered care approach in response to patient individual needs and values. In addition keeping a balance and advocating for family- centered care approach and shared health care decision plans.

- Routine Screening for risk behaviors that shape adolescence years: Pinning down the contributing factors for potential morbidity and mortality during adolescence years and discussing with adolescents and anticipatory guidance.

Adolescent Medicine: Reasons for referrals

- Chronic illness management challenges and related Psychosocial issues (poor compliance, coping and adjustment issues).
- Eating disorders, including anorexia nervosa, bulimia nervosa, and obesity.
- Growth and development.
- Puberty and related issues (delayed puberty, coping with body changes).
- Reproductive health (menstrual disorders).
- Substance use or abuse.
- Mental and Behavioral Health: Anxiety disorders, depressive disorders (non-suicidal).
- Sleep disorders.
- Body image concerns and low self-esteem.
- Poor school performance with no clear reason, school avoidance.
- Adjustments disorders (going through new transition: coping with a new diagnosis / acute life event requiring reinforcement of coping skills).
- Family conflict.

Risk Taking Behaviors in Adolescence Behaviors that Contribute to Unintentional Injuries and Violence

- Mental Health Risks leading to Risk taking Behaviors
- Sexually transmitted Infections and reproductive health
- Substance abuse and Tobacco use
- Unhealthy dietary Behaviors
- Physical inactivity
- Risky online behaviors
- Poor sleep Hygiene

Screening for Self Harm and Suicide

- Royal Hospital Experience Feb 2016 - Feb 2017 :
- 40 patients presented to A & E with suicidal attempt
- Screening is an international standard of care necessary for prevention and early intervention.

Gender

<table>
<thead>
<tr>
<th>Method of suicide</th>
<th>Males</th>
<th>Females</th>
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</thead>
<tbody>
<tr>
<td>Ingestion</td>
<td>25%</td>
<td>75%</td>
</tr>
<tr>
<td>Detergent</td>
<td>75%</td>
<td>25%</td>
</tr>
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Implementation of Cognitive Behavioral Therapy ‘CBT’:

A goal oriented, short term therapy that focuses on the patients thoughts and behaviors, a frame work to gain power and skills for problem solving and thoughts redirection to boost coping skills. CBT is widely used in adolescents with eating disorders, in the growth charts below we share the outcome in weight restoration of two of our Anorexia Nervosa patients after medical management and CBT.

Implementation of Motivational Interviewing ‘MI’: A strength - based approach to identify patients strengths and weaknesses and to accordingly tailor the necessary treatment plan to empower adolescents and boost their coping skills so they can develop into functional adults.

Transition program from Pediatric to Adult-care: Prepare adolescents patients with chronic diseases navigate the health care system, cope with their conditions and gain the necessary skills for self-management.

EDUCATION

- Implementation of adolescent medicine curriculum in the pediatric residency training program.
- Mandatory rotation for pediatric residents.
- Educational activities: Speaker in national and international conferences to promote for adolescent health and well-being.

ADVOCACY FOR ADOLESCENT HEALTH

- QI: Adolescents’ Friendly Health Services Creating a dedicated waiting area in pediatric OPD to accommodate adolescents and their unique health needs. The lack of age appropriate, friendly, and appealing milieu is a huge barrier for adolescents to seek medical care.

- Reaching out adolescents in the community:
  - Integration of Adolescent health care in primary care and in school health:
    - Guideline for Adolescent health services submitted for revision and approval in June, 2017, Ministry of Health, Directorate General of Health Affairs, Department of School health.
  - Contribution and launching the National campaign for Children online safety in December 7, 2017.

CONCLUSION

Adolescents are healthy but there is still substantial premature death mostly due to preventable and treatable causes. Many health risk behaviors are established during adolescence, and often they go undiagnosed and undetected for the lack of services geared toward the unique health needs for adolescents. Establishing Adolescent Medicine services at the Royal Hospital promote for healthy behaviors during adolescence, and taking steps to better protect young people from health risks through prevention and early intervention.