PEDS and Brigance

Marcia Armstrong – MCH Coordinator
Wodonga is one of Victoria’s fastest growing regional cities strategically located on the Hume Highway between Melbourne and Sydney.

Wodonga has a population of 34,000 and covers an area of 430 square kilometres.

Boundaries include the Municipalities of Indigo, Towong and the NSW State Border (City of Greater Albury).

Awarded the Category three winner - Early Years Award 2006 - for Communities that are becoming more child and family friendly.
Maternal and Child Health

- ≈ 500 birth notifications per year
- One major delivery hospital – Wodonga Regional Health Service
- 5 MCH centres plus one outreach (Mungabareena)
- 5.4 FTE
  - 0.4 Coordinator
  - 4.2 Universal
  - 0.8 EHVS (0.6 + 0.2 Innovations)
PEDS Project - 2003

- Funded by the PCP ($40,000)
- Trial the use or the PEDS as a developmental screen by MCH nurses
- Trial the use of the PEDS as a parent communication tool by childcare workers, teachers and MCH nurses
- Obtain feedback from these provider groups as well as parents on the utility and uptake of the PEDS in these services
- Utilise information gained from this project to develop a sustainable model of intersectoral communication and early detection around child development
PRESCHOOL/CHILDCARE

Maternal and Child Health Nurse (MCHN)

Primary School Nurse (PSN)

ASSESSMENT SERVICES

Secondary BRIGANCE screen
PEDS Path A
PEDS Path B
Referral to MCHN or PSN for any concerns unable to be addressed

Interviews PEDS

Transition Information

PEDS Key Stage Visits

PREP CHILDREN IN PRIMARY SCHOOL

Interviews PEDS

Transition Information

Key Stage Visits PEDS
PEDS and Brigance

- PEDS used from 8 months onwards
  - Not used under 8 months as nurses felt that they had frequent contact with parents under 4 months
  - >80% felt confident and agreed it was a positive addition, and would use it in the future
  - Avenue to elicit parental concern and address these concerns
  - Issues with children more quickly identified
Brigance

- Used as secondary screen – Path A, Path B or Path D or professional concern
- Also used it as 3.5 year screen regardless of PEDS Path
  - Continued this use
  - Great deal of practice with screens
  - Quick to use and enjoyable for children
- Brigance screen scoring software – invaluable for referrals to GPs, early intervention and paediatricians
- Referrals have a validated screening tool that all providers understand
Brigance

- Path E – no concerns, no child has failed the Brigance
- PEDS and Brigance used as a triage system for early intervention
- Despite concise referral information, demand for secondary referral services outstrip need and waiting lists can be in excess of 6 months
PEDS and Brigance

- Continued use since 2003
  
  - PEDS found to be a useful and acceptable tool across provider groups and parents
  - PEDS has provided an increased attention on children’s developmental progress
  - Created a coordinated service framework focused on children’s development

- Full report can be found at
  
QUIT – Smoking cessation training for Maternal and Child Health Nurses – Helping smokers to QUIT

- Well presented and evidenced based update (October 2006)
- 5As principle
  - Ask
  - Assess
  - Advise
  - Assist
  - Arrange
- QUIT services
Key Age and Stage Review

- Small and experienced dynamic team
  - Nola Bales
  - Jane Caldwell
  - Jill Crouchhall
  - Brenda Coates
  - Juliette Harrison
  - Wendy McNally
- Regional centre representing North East Victoria
- Team keen to have input into service enhancement
- Thank you to DHS for the invitation to participate