The provision of safety net advice to parents of febrile children: Do Interventions at Induction improve adherence to evidence based guidelines?

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With thanks to NICE, Dr. Jay Banerjee, Dr. Monica Lakhanpaul & Dr. Logan Manikam
Aims

- To compare the adherence to NICE Fever guidelines of two different rotation cohorts of junior doctors across two years.

- To determine Junior Doctor perceptions on the role evidence based guidelines in their practice.
Box 3 The safety net should be one or more of the following

- Provide the parent or carer with verbal and/or written information on warning symptoms and how further healthcare can be accessed.
- Arrange a follow-up appointment at a certain time and place.
- Liaise with other healthcare professionals, including out-of-hours providers, to ensure the parent/carer has direct access to a further assessment for their child.
81% of parents recalled receiving safety netting advice (i.e. told what to do if their child got worse / there was a change / didn’t get better).
Parents who did not receive safety netting advice were more likely to seek another contact than those who did (52% vs. 35%; p=0.01).
Method

- All paediatric emergency department presentations were selected between July and August 2009 and July and August 2010
  - Presented with/had a history of a fever
  - Were under 5 years old

- Demographic and Physiological Data Recorded
- Disposition and documentation of provision of safety net advice recorded.

- Induction intervention with questionnaire
Click on Favourites and then the ED Favourites Folder.
Results

July '09

- Home with Safety Net/No.
- Home with No Safety Net/no.
- Percentage Home with Safety Net
Results

- Home with Safety Net/No.
- Home with No Safety Net/no.
- Percentage Home with Safety Net

Bar chart comparing July '09 and August '09.
Results

- Home with Safety Net/No.
- Home with No Safety Net/no.
- Percentage Home with Safety Net
Results

- **Home with Safety Net/No.**
- **Home with No Safety Net/no.**
- **Percentage Home with Safety Net**
Results

Please state whether you agree or disagree with the following statements?

1) senior clinicians influence my opinion of evidence based medicine
   - Strongly Disagree
   - Disagree
   - Unsure
   - Agree
   - Strongly Agree

2) one cannot access evidence based pathways in current place of work
   - Strongly Disagree
   - Disagree
   - Unsure
   - Agree
   - Strongly Agree

3) rely more on senior advice than depending on guidelines
   - Strongly Disagree
   - Disagree
   - Unsure
   - Agree
   - Strongly Agree

4) refer more to handbooks than to guidelines for supporting clinical...
   - Strongly Disagree
   - Disagree
   - Unsure
   - Agree
   - Strongly Agree

5) time pressures prevent me from practising evidence based medicine
   - Strongly Disagree
   - Disagree
   - Unsure
   - Agree
   - Strongly Agree
Discussion

- Osmotic uptake versus directed learning
- Intervention versus Induction
- Educate the teacher or the trainer?

- Analysis of website hits, traffic light system and literature review still needed.