

Advocacy in Action at MUN Peds!

The **Pediatric Resident Advocacy Group at Memorial** consists of the advocacy representatives Dr. Allison Lamond (Senior) and Dr. Jennifer Mooney (Junior), the CPS representatives Dr. Alanna Roberts (Senior) and Dr. Katie Smith (Junior) and Dr. Kayla McNally. Their mandate is to develop a resident advocacy project as a part of the CPS Resident Section and to advocate on issues on behalf of pediatric residents.

Current projects and initiatives:

1. *Dental Health for Children and Youth in NL*
Project: Creating educational posters on dental health to place around the Janeway and in the community
2. *Anti-Bullying Campaign*
Project: Editorial piece published in The Telegram, written by the pediatric residents
Find the article at: <https://www.thetelegram.com/opinion/local-perspectives/letter-choose-kindness-please-558688/>

We have also been involved in the creation of the Children and Youth in Alternate Care (CAYAC) Clinic!

There is also a **Janeway Advocacy Committee** consisting of staff and residents. The staff lead is Dr. Heather Power and the resident co-chairs are Dr. Allison Lamond and Dr. Jennifer Mooney. Their mandate is to advocate on behalf of resident and staff physicians at the Janeway on various issues. They meet biannually to discuss ongoing advocacy projects at the Janeway.

Current projects and initiatives:

1. *Lunchtime Advocacy Series*
Project: Resident-led initiative with sessions from community organizations working with special populations on a quarterly basis. Previous sessions with Mary Fearon (Thrive NL) and Dr. Julie Temple (Adjunct Professor, Department of Gender Studies).
2. PPE
Project: We have also held mask making nights to sew masks for The Gathering Place.

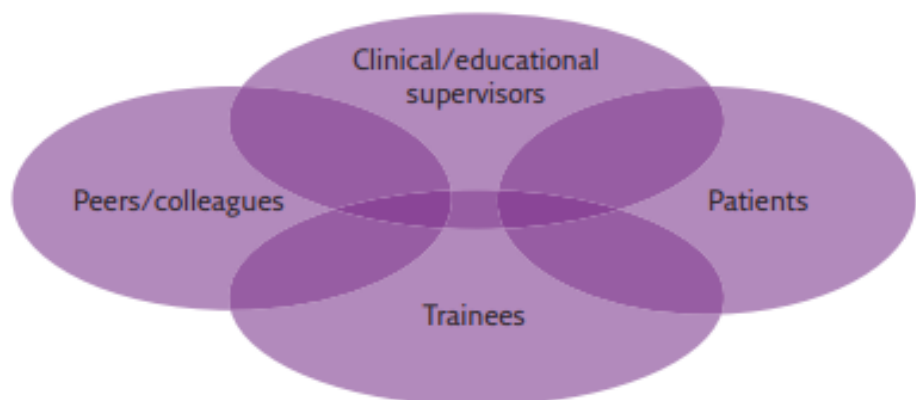


Preparations for CBD Launch in July!

We will be starting our “Soft-roll out” in the next week. We have a great group of residents that have volunteered to be assessed using EPAs through the MUNCAT app. We are hoping to work through any difficulties over the next few months ahead of the launch with our new residents starting in July. You will be receiving further information on what to do if you will be working with the residents who have volunteered!

The observations that will be recorded through the MUNCAT app will be a shift in how we are used to giving feedback. There is a great article on How to give and receive feedback that Internal Medicine suggested (Hardavella G, Aamli-Gagnat A, Saad N, et al. How to give and receive feedback effectively. *Breathe* 2017; 13: 327–333) - I will distribute so that people can have it for reference. It’s a quick and easy read! I have copied and pasted some highlights to emphasize a few pointers given in the article.

Who gives feedback?



What things should we consider when making our feedback as effective as possible?

Tips on giving effective feedback

- Plan in advance
 - Give promptly, right after the event
 - Think about what you want to achieve and drive discussion accordingly
 - One-on-one feedback is preferable
 - Start gently
 - Be specific
 - Encourage self-reflection
 - Be aware of nonverbal clues
 - Self-reflect after the feedback session is completed
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One of the things you want to promote when giving feedback is self-reflection – how can we do this?

Open-ended questions for giving feedback that encourage self-reflection

- How do you think things went?
 - Did it go as planned? If not, why not?
 - If you were doing it again what would you do the same next time and what would you do differently? Why?
 - How did you feel during the session? How would you feel about doing it again?
 - How do you think the patient felt? What makes you think that?
 - What did you learn from this session?
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Remember not all feedback is helpful! General feedback can be confusing and unclear. Some things to consider when planning to give feedback?

Barriers to effective feedback

Generalised feedback not related to specific facts
Lack of advice on how to improve behaviour
A lack of respect for the source of feedback
Fear of upsetting colleagues
Fear of damaging professional relationships
Defensive behaviour/resistance when receiving feedback
Physical barriers: noise, or improper time, place or space
Personal agendas
Lack of confidence

We want to adapt a learner-centered approach; adopting an open-minded listening strategy that promotes reflection and engagement of the learner such that they want to improve their performance. We want the learner to be receptive to the feedback!!

Tips for receiving feedback

Be a good listener

When in doubt, ask for clarification

Embrace the feedback session as a learning opportunity

Remember to pause and think before responding

Avoid jumping to conclusions, and show that you are invested in the learning process and keen to improve

Think positively and be open to helpful hints

Learn from your mistakes and be motivated

Be a good sport and show appreciation

Be proactive

The Royal College has great information on feedback and assessment – remember the CBD Coaching Model:

Coaching in the Moment:

- 1) **R**APPORT
- 2) **E**XPECTATIONS
- 3) **O**BERVE
- 4) **C**ONVERSATION
- 5) **D**OCUMENT



RX-OCD

Highlighting Resident Research

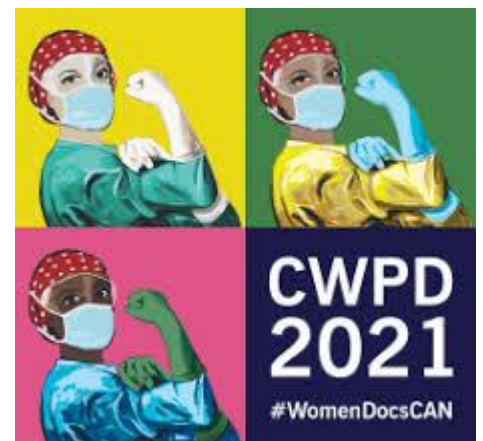
Evaluating our NICU's antibiotic stewardship program

Antibiotics are the most commonly used medication in Canadian neonatal intensive care units (NICUs). In 2017, our NICU team established an antibiotic stewardship program (ASP). The program consists of once weekly rounds between infectious disease staff and neonatal physicians. The program is certainly addressing an important issue, but it was not clear if it was having the intended impacts. **Dr. Marika Hirtle-Lewis**, a 4th year pediatric resident, conducted an evaluation of the ASP. Using Canadian Neonatal Network data, she and her team compared antibiotic usage in the two years before the ASP started to the two years after it began. 1380 infants were admitted to the Janeway NICU during the study period. There was a significant reduction in the number of infants treated with antibiotics in the post-intervention cohort (78.6% vs. 61.1%, $p < 0.001$) with a relative reduction of 22.2% (95% CI 16.4-27.6%). The introduction of ASP did not require significant additional expenditures, but was associated with a decreased in antibiotic usage within the NICU. The adoption of similar programs should be explored in other NICUs across Canada. Her supervisors on this project were Drs. Natalie Bridger, Roger Chafe, Julie Emberley and Cheryl Foo.



March 11th, 2021 is the first-ever **Canadian Women Physicians Day**, a day designated to honor women's achievements in medicine. It also marks a significant milestone: on March 11, 1875, Dr. Jennie Trout became the first **woman** licensed to practice medicine in **Canada**.

Thank you to all of the wonderful women physicians who work at the Janeway!! Who lead by example, act as mentors, guide research and are just overall amazing!!!



Welcome Back Dr. Marisa Chard!!!

I started my new position at the Provincial Medical Genetics Program, Eastern Health in December 2020 and I am delighted to be working with the Janeway team once again! I am originally from Harbour Grace, NL, and many people may remember me from my time in medical school and pediatrics residency which I completed in St. John's, NL. Following this, my husband, Steve, and I then travelled to Calgary, AB, where I completed my fellowship in clinical biochemical genetics (also known as metabolic genetics). I had my son, Raylan, during this busy time in fellowship. I then came back to Eastern Health for a short locum in 2018 and then went back out west to work as a metabolic geneticist in Saskatoon, SK for 2 years. Now, after relocating across the country a couple of times, my family and I are pleased to be back with our friends and family in St. John's. I am equally as excited to be working in what I consider my dream job alongside Dr. Lesley Turner in medical genetics! I am looking forward to serving the people of this province and helping to further develop the medical and metabolic genetics programs here. My main interests are newborn screening and exploring treatment options for patients with rare genetic disease. I look forward to working with you all!



Helpful Resources for Anxiety

Provided by Dr. Jennifer Davis and Dr. Allison Lamond

Websites:

1. **Anxiety Canada**- Resource for children, teens and families about anxiety. Helpful videos and common anxiety topics.
Website: <https://anxietycanada.com/learn-about-anxiety/anxiety-in-children/>
2. **Caring for Kids**- Resource through the Canadian Pediatric Society for families. Section on behaviors and mental health.
Website: https://www.caringforkids.cps.ca/handouts/mental_health
3. **About Kids Health**- Resource through the Hospital for Sick Children (SickKids) in Toronto. Excellent resource with information for children and parents on common disorders. Specific section on mental health.
Website: <https://www.aboutkidshealth.ca/MentalHealth>

Activities:

1. **Mighty Moe-** Anxiety Workbook for Children by Lacey Woloshyn directed at children ages 5- 11. Follows the story of Moe and should be completed with a parent, counsellor or other mental health professional.
Website: <http://www.cw.bc.ca/library/pdf/pamphlets/Mighty%20Moe1.pdf>

Resources in the St. John's Area:

1. **Janeway Family Centre-** Offer individualized, group and family therapy for children up to age 17. Cool Kids (anxiety group) offered for children ages 8 to 12.
Between teens (empowerment for girls) offered for teens ages 14 to 17
Parenting Your Anxious Child (PYAC) for parents
Phone: (709) 777-2011
Website: <http://www.easternhealth.ca/WebInWeb.aspx?d=3&id=2117&p=2467>
2. **The Bridges Program-** Offer individual, family and group sessions for teens ages 13 to 18. Have an Adolescent Anxiety Group which is an 8-week program. Sessions last 1.5 hours, once a week with concurrent parent sessions while teen sessions happening.
Phone: (709) 777-7715
Website: <http://www.easternhealth.ca/WebInWeb.aspx?d=3&id=2112&p=2467>
3. **Outpatient Psychiatry-** Need referral from a physician to the Janeway Child and Adolescent Outpatient Psychiatry program. Goes through Central Intake.
Phone: (709) 777-4484
Website: <http://www.easternhealth.ca/WebInWeb.aspx?d=3&id=2118&p=2467>
4. **Doorways-** Walk-in clinic with rapid access to mental health and addictions counseling
St. John's: Building 532, Pleasantville
Phone: (709) 752-4903
CBS: Villa Nova Plaza
Phone: (709) 834-7912, (709) 834-7916
Website: <http://www.easternhealth.ca/WebInWeb.aspx?d=2&id=2455&p=2106>
5. **Private counselling**
 - www.bridgethegap.ca
 - Service directory for all counsellors in NL

Other:

1. **Strongest Families** – Support families by teaching skills through the phone or internet in comfort of own home. For ages 3-17 years. Great for busy families.

Help Lines:

- **Health line:** 811
- **Mental Health Crisis Line:** 1-888-737-4668
- **Kids Help Phone:** 1-800-668-6868
- **Bullying Helpline:** 1-888-456-2323
- **Mental Health Helpline:** 1-877-303-2642
- **CMHA-NL:** 1-877-753-8550