

# IMPACT OF REGULAR VIRTUAL PAEDIATRIC PSYCHOSOCIAL MULTIDISCIPLINARY MDT ON PATIENTS' PROGRESS FROM REFERRAL TO INITIATION OF TREATMENT.

## Authors

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## OBJECTIVE

The purpose of the MDT was to ensure that all relevant referring specialties had the opportunity to discuss their cases, assess patient progress, and determine any additional actions needed by the referring clinician before the Paediatric Psychology team accepts the referral for further evaluation.

## METHODOLOGY

A fixed online biweekly MDT meeting to discuss patients with suspected functional symptoms was circulated to all pertinent paediatric specialties. Attendees included the mental health lead of the trust, clinical psychologist, mental health nurse from the paediatric psychology team, and general paediatric liaison consultant for functional neurological disorders (FND). Open participation resulted in variable numbers. Discussion focused on progress of referred cases and suitability of new referrals. Patients were discharged from discussions once management plan was agreed.

## RESULTS

Over six months, 21 patients aged 8 to 16 were referred and deemed appropriate for discussion and evaluation. The male-to-female ratio was 1:1.3, potentially skewed by the small referral count, contrasting with the higher usual incidence in females [2]. The majority of referrals (66.6%, n=14) came from general paediatrics, while the remainder originated from various subspecialties. Functional neurological disorders, including non-epileptic seizures and atypical limb movements, were observed in 7 patients (33.3%). Functional gastrointestinal issues, such as globus sensation, functional dyspepsia, abdominal pain, and rumination syndrome, were reported in 23% (n=5) cases.

Noncompliance with other diagnosed medical conditions leading to symptom exacerbation and inpatient monitoring prompted referrals for 19% (n=4). Notably, there was a substantial reduction in inpatient or emergency department visit following the initial family assessment, particularly for patients with FND.

## CONCLUSION

Regular MDT meetings involving referring and psychology liaison team members significantly enhanced the timeliness of initial assessments by the psychology team, accelerating treatment when necessary. Despite being a biweekly meeting, its impact was profound, underscoring the importance of consistent communication between medical and psychology teams to expedite the evaluation and treatment of patients with functional symptoms, an essential step toward early recovery.

## REFERENCES

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