

Key learning from a pilot multidisciplinary paediatric FND service: *the importance of trust, respect and understanding*

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Introduction

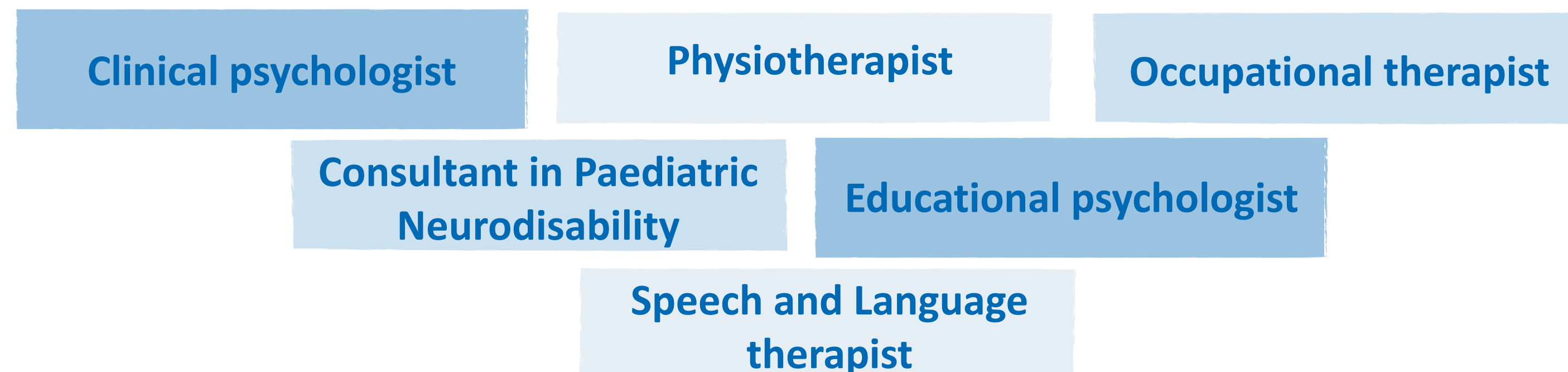
There is a dearth of dedicated services to paediatric FND. The pilot is still ongoing with one young person completed and two in progress. All the young people have made significant and remarkable gains.

Aims and Objectives

To present our reflections and key learning from implementing a pilot paediatric FND service.

Method

- A 20 week package was developed by reviewing the literature and existing models, consisting of 1-2 weeks inpatient followed by virtual outpatient sessions.
- Input was provided from:



- The principles of assessment and intervention for each young person were the same but implementation was highly idiosyncratic. All young people set their own goals, and these were reviewed regularly using a solution-focused framework.

Results

- All three young people achieved their goals, some early, allowing further goals to be set.
- Examples include:
 - Successful return to school
 - reconnecting and socialising with friends
 - pacing effectively to re-engage with cherished hobbies
- Key interventions were psychoeducation, co-producing shared formulations, fatigue management, relapse management, neuropsychological assessment, reinforcing self-management and generalisation of skills/strategies.

Conclusions

- Key learning was that successful implementation needed to be built on a foundation trust and shared understanding. All young people and their families came from a context of not having been believed and their trust in professionals undermined.
- Each package became highly bespoke not only to the young person's needs and motivators, but to those in the different layers of the ecological system including family, peers and school.
- The team implicitly used a young person-centred approach founded on a developmental framework that gave paramount respect for their identity needs, knowing that these would lead to true and meaningful change.

