

## CLINICAL GUIDELINES DEVELOPMENT

Dear Colleague,

*I would like to thank all staff for their contributions so far. The process has taken longer than originally envisaged. A number of factors have contributed to this: the accreditation process, and the Royal Children's Hospital Redevelopment, as well as an unprecedented demand for Banksia beds.*

### CLINICAL GUIDELINES DEVELOPMENT

The object of this project is to ensure that the Royal Children's Hospital Mental Health Service is a premium service. It is to ensure that it is premium service **routinely**, and **consistently**.

This project is to help us identify optimum practice for the clinical problems we are asked to treat, and identify practice for which there is the best evidence. We also need to identify practice for which there is little evidence, so that we can decide which is the "best bet" as an initial framework for practice. This will enable us to formulate processes to help us establish evidence to support what we are doing, or to change what we are doing if the information indicates it.

Peter Orchard has been appointed as Project Coordinator and you should have received some information about him and the outline of the process as envisioned so far. There will be an opportunity to meet him in the near future so that everyone can have an opportunity for input. The standard of application for Coordinator/Chair positions for the Clinical Guideline Development Working Groups (CGDWG) was very high and the selection difficult to make. All who applied for these positions were very clearly equally knowledgeable and capable of fulfilling the role but unfortunately we had to choose one, so I am sorry for any disappointment. I would nevertheless like to thank you all for your interest so far and look forward to your contributions to the whole process.

The Coordinators of the CGDWGs are as follows:

1. **Assessment and Triage:** David Reid
2. **Eating Disorders:** Megan Chapman
3. **Autism:** Janine Majiviona /Deb Marks
4. **Psychosis:** Donna Hansen
5. **Disorders of Conduct and Attention:**  
Lesley Bretherton
6. **Mood and Anxiety Disorders:**  
Chidambaram Prakash
7. **Infant Mental Health:** Wendy Bunston

There will be a need to ensure that no one team or clinical area makes a disproportionate contribution to this process. To ensure that there is an equitable commitment across all teams there will be a meeting of the Team Leaders and Coordinators to finalise membership of these working groups. The idea is that the working groups are big enough to enable the workload to be reasonable, but that they are not too big to be unwieldy as task groups. This may mean that not everyone who has put their name down for inclusion in a group will become a member of that formal group. This does not mean that you will be unable to make a contribution. On the contrary, sharing of information from these groups will be an important part of the process. A web based notice board will be established so that everyone will be able to see what is happening at every step of the journey. Every clinician will be able to have an input through this facility, to make comments and suggestions for consideration by the work groups.



Clinical Director RCH MHS