

APLS NEWS DECEMBER 2008



ADVANCED PAEDIATRIC LIFE SUPPORT

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President's Report—Simon Young

Dear APLS Members

At the last APLS Board meeting I was elected President of APLS, Toni Medcalf was elected to vice president and Chris Webber and Jason Acworth elected to complete the Executive. We are all delighted to be on the Board and look forward to a dynamic and challenging year ahead.

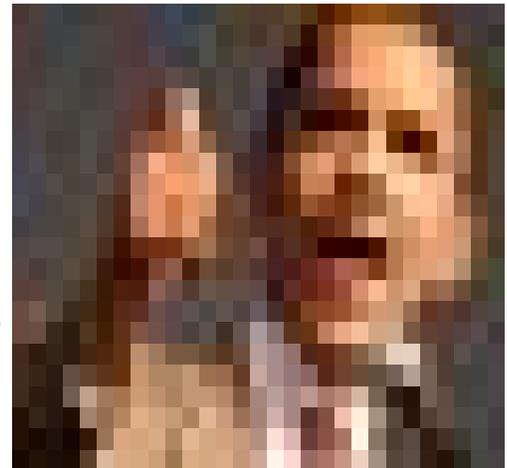
In the 11 years since its introduction into Australia APLS has been spectacularly successful and has grown into an organization that next year will conduct 50 APLS courses and many more PLS courses all around Australia. It is fantastic that so many talented clinicians and skilled educators such as yourselves are committed to training doctors, nurses and paramedics in the assessment and treatment of seriously ill and injured children. On behalf of your new Board and Executive I would like to pass on our thanks to you all.

Much of the analysis, decision making and implementation of various projects will be performed by the newly constituted subcommittees.

These subcommittees will be chaired by a Board member but will have a broad membership from the APLS instructors which will enable us to tap into the enormous expertise and energy that exists in our instructor pool. More information about these subcommittees appears in this newsletter.

One of the major commitments of the new Board will be to improve communication to you, our instructors. This newsletter which will be a regular feature, will figure highly in this and will be complemented by a better website, better feedback concerning your teaching history with APLS, and a very exciting 2009 instructor day. We welcome and look forward to your participation.

Simon Young
President APLS (ANZ)



****ALERT ALERT ALERT****

IF YOU HAVE NOT ALREADY SENT IT YOUR COURSE PREFERENCES FOR 2009 PLEASE DO SO IMMEDIATELY TO SARAH at Sarah.weatherby@apls.org.au

APLS in Fiji Report—Sarah Dalton

In August and October this year several Australian APLS instructors braved the wild seas of the South Pacific and headed over to Fiji to conduct the first APLS course in that country. Many years of planning came to fruition with the help of Joe Kado and Elizabeth Rogers, local paediatricians who completed their APLS Instructor courses in Australia.

Fiji is a nation of more than 300 islands, with one tertiary paediatric hospital situated in the capital, Suva. The Colonial War Memorial Hospital is a teaching hospital for the Fiji School of Medicine – the only medical school in the South Pacific and situated right next door to CWM. Postgraduate training programs are coordinated by these institutions and registrars are rotated throughout Fiji during their training. Many of these trainees are now APLS providers.

Three APLS provider courses were held at CWM, attended by an incredibly diverse and enthusiastic group of candidates. From distinguished Professors to first year registrars in paediatrics, anaesthetics and surgery, they all had a lot to give and seemed to lap up the opportunity to learn. For many it was the only resuscitation teaching they had ever received and for most, their first experience of scenario based learning. For us it was amazing to learn about their experience of tropical illness and seriously unwell children, as well

as to wonder at how they manage without purpose-built intraosseous needles, defibrillators and many of the other tools we take for granted in intensive (and expensive) care!

The courses ran very smoothly and were enjoyable for participants and instructors alike. Some of the scenarios had to be modified to be believable (skiing injuries were out!) but there were plenty of local adaptations to be made ... just see the photos. The candidates did extremely well, and all of them passed the practical aspects of examinations which were conducted to the same standard as APLS Australia. It was fantastic to see each of them develop over the 3 days and at the end of the course everyone was exhausted but very pleased.

Our next challenge is supporting the new APLS Fiji in their future development. After one instructor course there are now 10 local instructors,

with plans underway for more instructor and provider courses in 2009. Thanks to everyone who has been involved in the process, from funding applications to equipment management and, of course, the faculty who gave up their time and leave to introduce APLS to a whole new family



Being a Course Director—Toni Medcalf

Are there any APLS Instructors looking for the added adrenaline rush of being a Course Director??? As an APLS Instructor we know you have exceptional interpersonal skills and a commitment to medical education, but can you multi-task and problem solve? Would you remain calm if the power failed during testing on Day Three? What if half the faculty was struck down by illness (not ethanol related) or it looked like the equipment wasn't going to make it on time? If none of this flusters you, then you would make an ideal Director and the purpose of this article is to outline the pathway.

An instructor becomes eligible to nominate as a Director when they have completed a total of 6 courses as an instructor. This will include 2 courses as an Instructor Candidate. Those interested in becoming a Director can then apply to the Course Development

Subcommittee outlining their interest in teaching and nominating 2 APLS Directors with whom they have taught. This will be followed by a Director Candidacy. We are also asking that current Directors identify and nominate potential Directors from amongst their faculty groups. So if you are interested please mention this to a Director.

The process of Director Candidacy in Australia reflects that of the Instructor Candidacy. After nominating to become a Director you will need to direct two courses as a Director Candidate, with a second, experienced Director allocated to the faculty for both of those courses. It would be advantageous if this was a different Director for each of your courses, to gain a broader perspective of course management.

In your first course as a Director Candidate, the more senior Director will assume the “front seat” or the controlling role, while sharing the in-

sights they have acquired as Directors with the DC. In your second course as DC you will assume the “front seat” role while the more senior Director takes a supportive, but more background role. This process was settled on as a means of providing support and advice to our DCs while protecting the fidelity of the course as we continue to grow as an organisation.

Thank you to the large number of instructors participating in the recent Director Day in Melbourne. You will already have been asked to nominate the courses you would like to direct in 2009. Your faculty lists should include a second Director for your first two courses as Directors as outlined above. If this is not the case please let us know.

All the best for next year and thank you for your valuable contribution to the ongoing success of APLS in Australia.

Board Member Profile – Malcolm Higgins

I am a paediatric emergency physician working in the Emergency Department at the Women's and Children's Hospital in Adelaide. I did my Paediatric training in Adelaide but completed much of my advanced training overseas in the UK, Canada and United States. My first experience of APLS was whilst working in Scotland in 1996 where I completed a provider course followed by the generic instructors course in Manchester. Since my return to Australia I have taught and directed numerous APLS and PLS courses all around Australia. Like

most faculty I appreciate the opportunities APLS has given me to keep my own knowledge and skills up to date, to improve the quality of paediatric resuscitation in Australia and to meet a great group of like minded people from a variety of backgrounds. It has been a great honour to be elected to the APLS board and I hope I can help to keep the course contemporary and sustainable in the long term.

Away from work I keep myself busy helping care for my 2 young boys, Angus aged 7 years and Jack aged 3 years. My wife Helen works as a GP in

a busy suburban practice. I also am somewhat of a watersports enthusiast with surfing, sailboarding, dinghy sailing and snowboarding as my main sports. Sailing is my second career and I continue to compete nationally and internationally often several times per year. However my great love is surfing and my surfboard has often accompanied me to APLS courses and my yearly course preferences usually are directed more towards surfing potential than anything else!

APLS RURAL COURSE IN BENDIGO 2008



TREATMENT: Nurse Fiona McLaren, Dr Diana Badcock and Dr Al Rudock.

Picture: BILL CONROY

AN advanced paediatric life support course has been held in Bendigo for the first time.

Bendigo Health hosted the course for industry professionals, which outlined methods for treating critically ill children.

Dr Simon Young of the

Royal Children's Hospital co-ordinated the course, which was run by accredited trainers including Bendigo Health's Dr Diana Badcock.

The course — which wound up yesterday afternoon — attracted about 30

people to the Bendigo Regional Clinical School.

Advanced Paediatric Life Support is a worldwide organisation that has organised courses Australia wide, but never before in Bendigo.

"We are thrilled that many of our own doctors

and nurses will be taking part in this course over the next three days," Dr Badcock said.

"What is particularly pleasing is that some of our nursing staff are able to participate through funding by Bendigo Health's fundraising department."

APLS members at work



Subcommittee Information

The APLS Board has established four Subcommittees each subcommittee has clearly defined Terms of Reference and a Board member is the chair of each of these committees. The following provides information on each of the four subcommittees. Each committee reports directly to the Board.

Audit Subcommittee

The Audit committee was established to oversee the financial management of APLS. The Audit committee is responsible for ensuring that APLS operates within the laws and regulations of the Australian Tax Office. The role of the audit subcommittee is as follows:

Reviewing and ensuring accounting policies and procedures are defined, adopted and maintained;

Reviewing and reporting the financial statements prior to their approval by the Board;

Develop and implement an annual audit plan;

Overseeing and reporting that all the internal codes of conduct and standards of corporate behaviour are being complied;

Actioning any other business process or functions which may be referred to it by the Board;

Review the external auditors;

Review and report on the effectiveness of systems for internal control, financial reporting and risk management; and

Review and report on accounting

practices and processes and make recommendations as required.

Review, recommend and appoint suppliers through tendering process.

Report to the Board significant issues that may impact upon the financial performance of the Company

The chair of this subcommittee is Simon Young. This committee is comprised of only Board members due to the nature and role of the committee.

Course Development Subcommittee

The course development subcommittee was established to assist the APLS Board in relation to the conduct and ensuring quality control to the course materials of the three-day APLS Providers and Instructor Course. Specifically the Course Development Subcommittee is responsible for:

Review all three-day APLS course reports

Identify significant APLS course issues in relation to:

Regulations

Course materials

Course conduct

Course quality

Prioritise and prepare recommendations for information to the APLS Board in relation to issues identified, that have the potential to impact on the strategic operations of the

Board and APLS.

Facilitate decisions made by the APLS Board in relation to the conduct and course materials associated with the three-day APLS Provider and Instructor courses.

Examine new evidence in relation to paediatric life support and make recommendations to the APLS Board regarding the incorporation of such evidence into the three day APLS Provider and Instructor courses

To implement course changes as required, so long as these changes do not impact on the strategic operations of the Board and APLS.

To develop and review course delivery modes

Make recommendations to the APLS Board on Course Instructor and Course Director selection.

To review applications for Course Instructors and Course Directors

To ensure changes made to the course are communicated to the Course Instructors, Course Directors and Course Coordinators.

Toni Medcalf is the chair of this Subcommittee other members of the committee are Chris Webber, Matthew O'Meara, Stephen Priestley, and Di Crellin. Should you require more information on the workings of this committee please contact either Toni Medcalf – toni.medcalf@apls.org.au or Vanda Fortunato vanda.fortunato@apls.org.au.

Subcommittee Information

PLS Course Subcommittee

The PLS Subcommittee was established to assist the APLS Board in relation to course materials and conduct of the PLS course.

The specific roles of this committee are to:

The PLS Course Sub-Committee of APLS is to be directly responsible to the Board of Directors and the sub-committee should serve the following functions:

- To review the PLS and its management in each of the states
- To identify significant issues in relation to:
 - Regulations
 - Course materials
 - Course conduct
 - Course quality
- To recommend and implement course changes as required
- To prioritise and prepare recommendations for information to the APLS Board in relation to issues identified that have potential to impact on the strategic operations of the Board and APLS
- To facilitate decisions made by the APLS Board in relation to the conduct and course materi-

als associated with the PLS course.

- To examine new evidence in relation to paediatric life support and make recommendations to the APLS Board regarding the incorporation of such evidence into the PLS course.
- To develop and review course delivery modes

To make recommendations to the APLS Board on Course Instructors and Course Director selection for the PLS course

Jason Acworth is the chair of this committee the other two members are Linda Durojaiye and David Kriesser. Should you require any further information please contact either Jason Acworth at Jason_Acworth@health.qld.gov.au or Vanda Fortunato on vanda.fortunato@apls.org.au.

International Subcommittee

The International subcommittee was established to provide advice to the APLS board on the co-ordination of international activities and monitor performance in its internationalisation plan. The specific role of this committee is to:

To provide advice to the Board on the development of the international elements of the strategic and operational plans in relational to international activities

To develop and review policies and

provide strategic advice to the APLS Board on international matters including:

- The development and implementation of an International Plan,
- International development and trends likely to impact upon the implementation of international programs and achievement of its international objectives.

To develop and form collaboration with international partners

To coordinate and monitor implementation of APLS's Internationalisation Plan.

The chair of this committee is Christine Sanderson, Setthy Ung and Simon Young also sit on this committee, should you require any further information please contact Christine Sanderson at ca.sanderson@bigpond.com or Vanda Fortunato at vanda.fortunato@apls.org.au

In every addition of the newsletter information regarding the working of these committees will be provided.

CLINICAL ARTICLE

Group Management in Australia and New Zealand: PREDICT study of physician practice and clinical practice guidelines

OBJECTIVE: Comparison of clinical practice guideline (CPG) recommendations and reported physician management of croup at PREDICT (Paediatric Research in Emergency Departments International Collaborative) sites as baseline for planned randomized controlled trials.

METHODS: Review of CPGs for croup from PREDICT sites and survey of specialist pediatric emergency physicians regarding croup management. PREDICT sites included 8 tertiary pediatric hospitals and 3 large mixed emergency departments in Australia and New Zealand. **RESULTS:** Nine of the 11 sites had a CPG for croup. Response rate was 94% (78/83). Adrenaline was recommended for moderate croup (3%), severe croup (52%), and life-threatening croup by (100%). Steroid therapy was recommended for mild croup (45%), for moderate croup (97%), for severe croup (97%), and for life-threatening croup (96%). Steroid choice was oral dexamethasone (60%) and oral prednisolone (38%). In severe croup, 77% used intravenous/intramuscular dexamethasone, 10% used intravenous/intramuscular methylprednisolone, and 8% used nebulized budesonide. Commonest dosage regimens were 0.15 mg/kg dexamethasone or 1 mg/kg prednisolone. A standard volume dosage regimen for nebulized adrenaline was used by 54%, whereas 39% used a weight-based formula. Clinical practice guidelines recommended 5 mg (11%) or 10 mg (33%) for standard volume dosing, and all CPGs using weight-based dosing recommend 0.5 mg/kg with maximum doses ranging from 5 to 15 mg.

CONCLUSIONS: Croup management at PREDICT emergency departments is similar, based on oral steroids and nebulized adrenaline. The steroid and adrenaline regimens used by respondents and their CPGs were not consistent. This reflects limitations of available evidence for management of this common disease, highlighting the need for definitive trials, particularly in the management of mild croup.

Borland ML., Bable FE., Sheriff N., Esson AD

Pediatric Emergency Care, 2008 July, 24(7):452-6

Seasons Greetings



Around the world, more than three billion people celebrate Christmas, transcending language, culture and religious beliefs. As a cultural celebration, it's a peculiar mix, part myth, part magic and part religion.

While Christmas celebrations are under way in the Christian world, Jewish people are commemorating Hanukkah, Muslims are celebrating Eid al-adha, African Americans are celebrating Kwanzaa, and in Hong Kong, the festival of Ta Chiu is held. Christmas has come to be regarded as the festival of peace and goodwill, when families are reunited, houses are decorated and gifts are exchanged. Each of these traditions and beliefs illustrates an aspect of the true Christmas message, peace, generosity, humility, and goodwill all of which have been attributes that you as our members have shown throughout the past year.

In closing, I want to recognize the significant contributions and dedicated work of the APLS Board, the instructors, members and staff who "make APLS happen". You are all the backbone of our organization.

Best wishes for the festive season.

Vanda Fortunato

CEO

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