Neuro genetic MDT Embracing genomics in paediatric clinical practice

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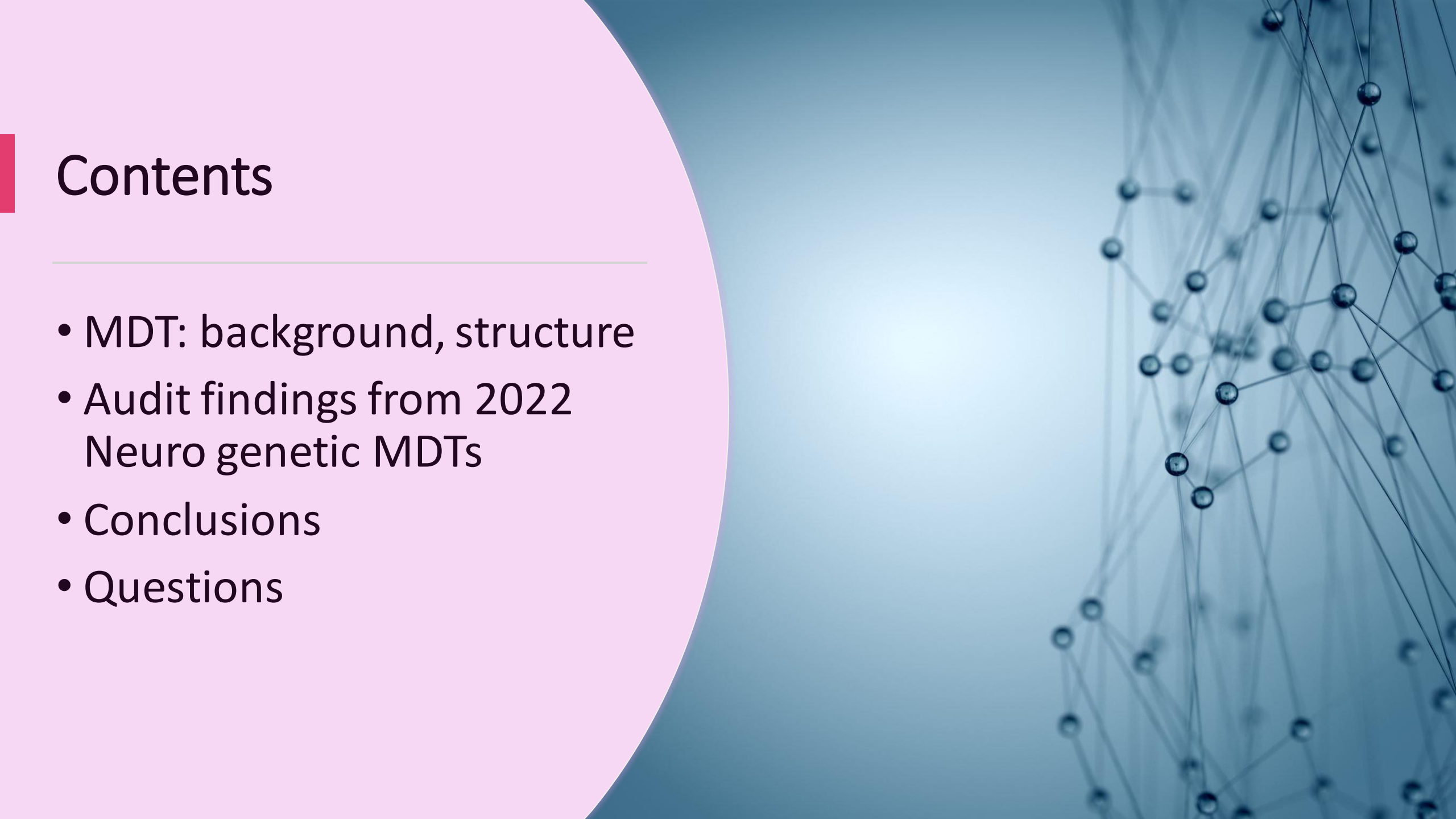


Background

- Unique MDT set up between the Community Paediatrics/ Neurology/Epilepsy team HUTH and Clinical Genetics from Leeds Teaching Hospitals
- Started in 2020

MDT Structure

- MS Teams
- Monthly (2nd Tuesday of each month from 14:00-15:00).
- Impact of COVID

Membership

Minimum attendance of 1 Paediatric Consultant and 1 Clinical Genetics Consultant

MDT coordinator

Wider MDT members :

- Clinical Fellows
- Paediatric and Clinical Genetic trainees
- Advanced Nurse Practitioners
- Genetic Counsellor
- Paediatric Consultant (Neurodisability/ Epilepsy/Neurology
- Community Paediatricians

Agenda Items

- **Case discussion**
- **Service development**
- **Service risk and issues**
- **Teaching and Training Session**

All members to be given the opportunity to add to the agenda.

A maximum of 12 patients will be discussed at the meeting; if they are not discussed, they will be reallocated to the following months MDT.

Ground rules

- The Admin Team Coordinator will distribute a blank patient list to members with a stipulated deadline date of return.
- All information received will be transferred onto one patient list and will be forwarded to each member of the group 10 working days prior to the meeting.

- In some circumstances where an urgent patient is to be discussed, the patient list will be updated and re-sent for circulation.

Ground Rules

Clinicians submitting a case for discussion will be required to provide:

- Patient name and NHS number
- Consultant/ Service patient is under
- Specific query for genetic team
- Key diagnosis
- Relevant clinic letter
- Copies of available genetic testing results

Administrative/ Clinical support

- Timeline maintained by MDT coordinator
- Clinician to identify patients requiring discussion
- Secretarial support to email documents
- Option to nominate colleague to present at MDT
- Minutes with actions circulated by MDT coordinator
- Paediatrician to update family as appropriate and summarise on EPR
- Paediatrician / Geneticist to action additional testing/referral

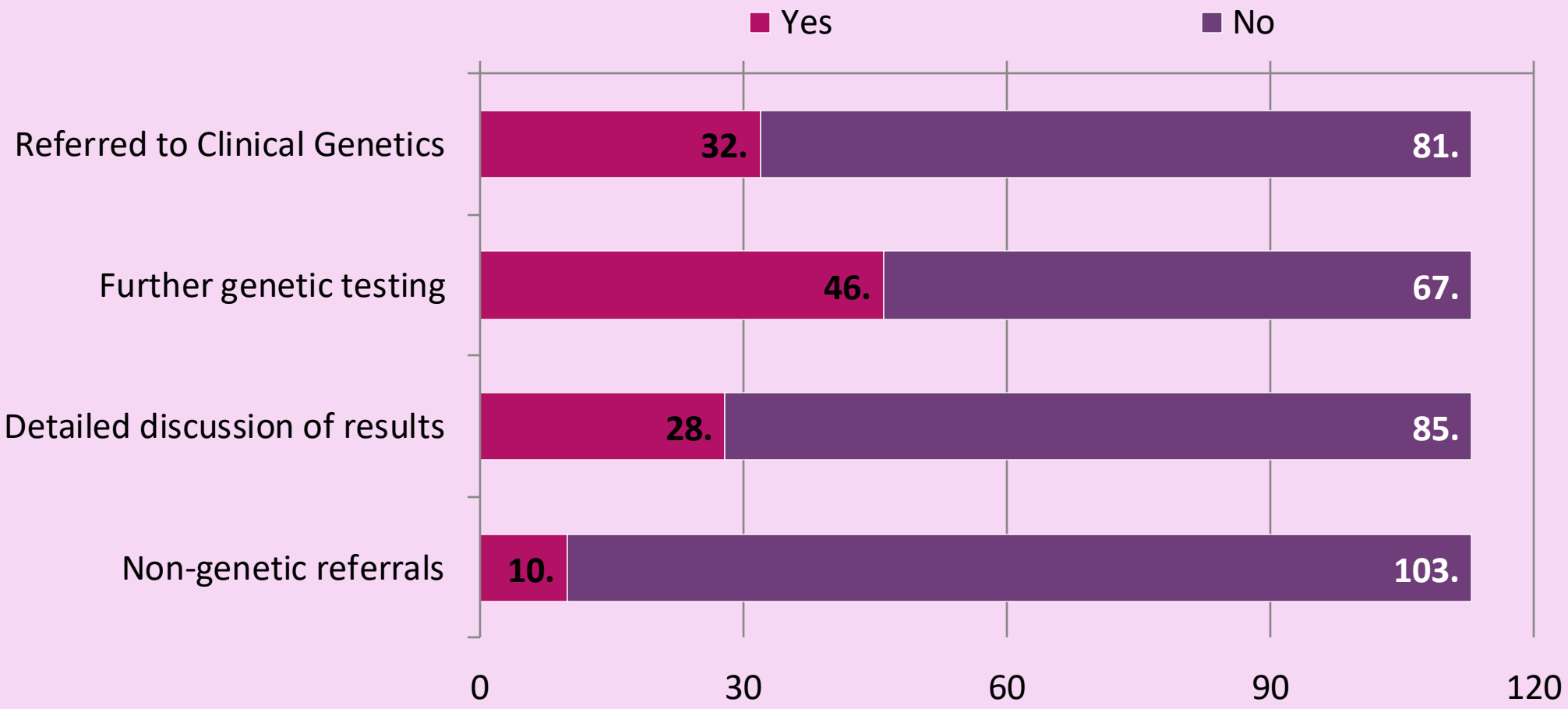
Clinical queries

- Genetic result received – interpretation
- Advice/guidance on further investigations
- Advice/guidance on management / expedite request
- Suitability for referral to genetics?
- Other

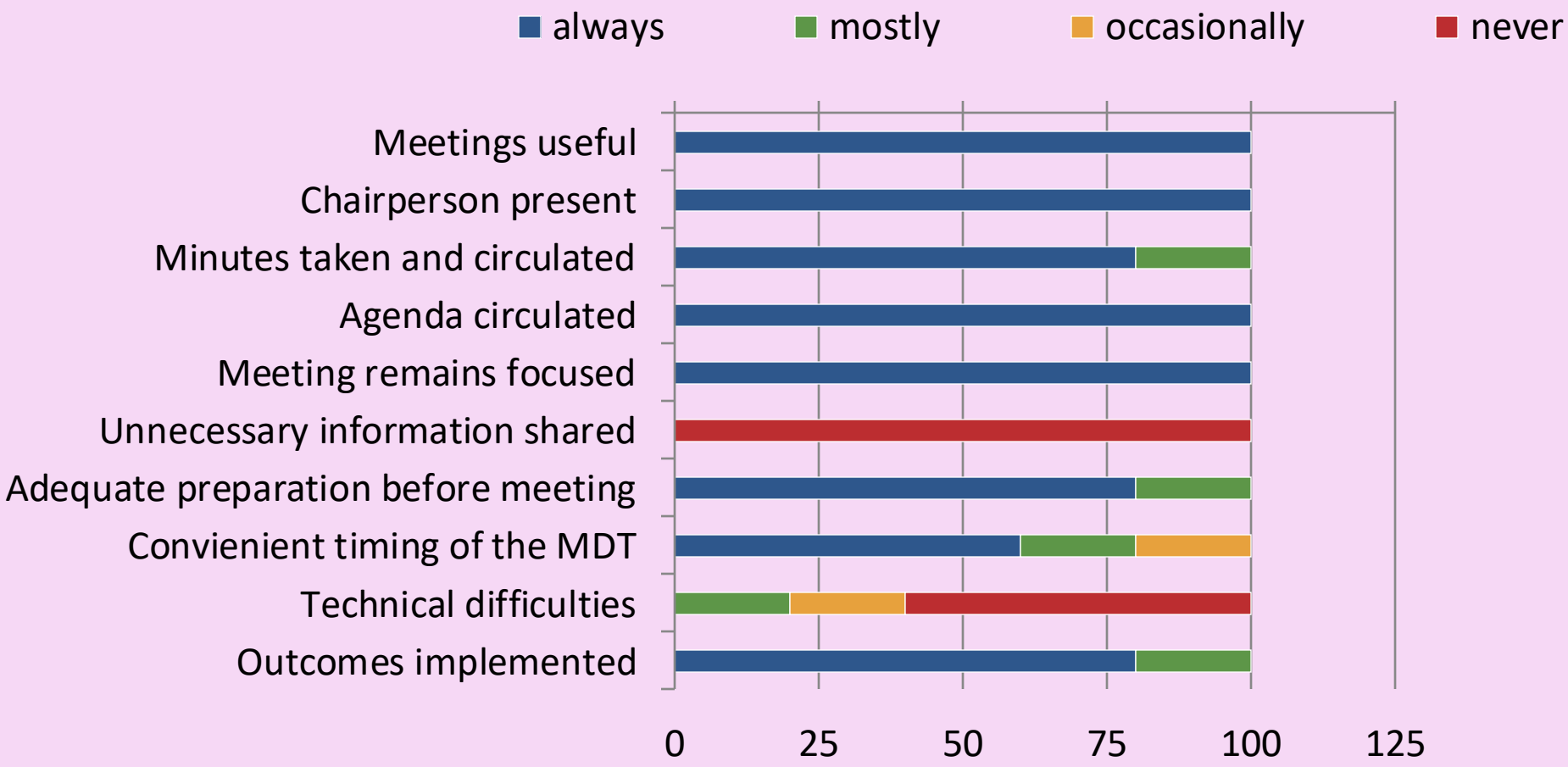
Outcomes

- Further genetic testing (WGS 84 over18months)
- Action testing on stored sample
- No further testing for now unless profile changes
- Phenotype not clear: Requires more in-depth clinical review (Neurology referral)
- Refer to genetics
- Genetic counsellor support

Outcomes from 2022 meetings (n=113)



Feedback from MDT members



Outcomes

1

Build and share knowledge of genomics and embed it in routine clinical practice

2

Facilitate and Standardise access to genetic advice and genomic testing for children and families.

3

Cost Effective

Referrals to genetics: 70%reduction

Additional testing40%

4

Facilitate training opportunities for paediatric and genetic trainees.

Questions?