CONTINUOUS PROFESSIONAL DEVELOPMENT (CPD)

HEALTHCARE TRAINING LIST

PROVIDED BY

PES LOCUS HEALTHCARE.

BROCHURE CONTENT Page

A. INFECTION CONTROL & PREVENTION

B. CARE OF THE ELDERLY	5
C. ERGONOMIC ASSESSMENT AND TRAINING	7
D. TISSUE VIABILITY AND WOUND HEALING TRAINING	10
E. INCONTINENCE NURSING	12
F. AQUATIC THERAPY TRAINING	14
G. HEALTH PROMOTION	16
H. PRIMARY CARE INITIATIVES	18
I. HEALTH AND SAFETY/MANUAL HANDLING	20
J. LOWER LIMB BIOMECHANICS	22
K. CARDIOPULMONARY RESUSCITATION/FIRST AID RESPONDING	24
L. OPHTHALMIC (EYE) CARE	25
M. UNDERSTANDING ADHD	27
N. UNDERSTANDING ASD	29
CONTACT INFO	31

1

2

A. INFECTION CONTROL AND PREVENTION

Healthcare settings such as Hospitals, Clinics, Nursing homes, Health Centres, Diagnostic and Treatment Centres, Community-based centres are required to have infection control programs in place.

These programs are designed to protect patients, employees, and visitors from Healthcare Associated Infections (HCAI). These centres should have established guidelines, policies and procedures addressing a number of issues and concerns: disinfection and sterilization of equipment; waste disposal; hand hygiene; prevention of infections associated with surgeries; housekeeping; drug-resistant infection; intravenous therapy; use of urinary catheters and other invasive procedures.

Healthcare infections account for 5,000 direct deaths and 15,000 indirect deaths within the National Health Service (NHS) in the U.K within a particular year. More than 10% of the hospital population at any given time suffer from HCAI.

Through the surveillance of infection in healthcare settings, quality assurance, and risk management programs, compliance with infection control standards are monitored and problems identified early.

Low cost changes, such as hand hygiene, patient oral care and improved central line catheter use could save thousands of lives, reduce healthcare cost, reduce average hospital stay and improve health outcomes.

1. LEARNING OBJECTIVES

This mandatory training is to inform and educate healthcare professionals how infections may be transmitted in the workplace

The training also helps healthcare workers and settings recognize their responsibility for assuring that they and those for whom they are responsible, apply scientifically accepted infection control principles as appropriate to their work practices and settings and minimise the opportunity for transmission to patients, employees and visitors.

2. COURSE PARTICIPANTS

All Healthcare Professionals

All Healthcare Support Staff

3. COURSE CONTENT

-Background to infection control and microbiology

-Chain of infections and sources of microorganisms

-Modes and routes of transmission and possible susceptible host

-Prevention and control of infectious and communicable diseases in healthcare workers

-Selection and use of barriers and/or personal protective equipment (PPE) for preventing patients' and healthcare workers' contact with potentially infectious materials.

-Standard precautions and transmission based precautions

-Benefits of patients and healthcare workers adhering to scientifically accepted principles and practices of infection control

-Identify the individual's professional responsibility for maintaining a safe working environment

-Describe the professional's responsibility to adhere to and monitor scientifically accepted infection control practices

-Identify the consequences to healthcare professionals when there has been a failure to comply with scientifically accepted infection control practices

-Describe the professional responsibility to monitor infection control practices of those for whom she/he is responsible

-Discuss how the professional should intervene if infection control practices of those for whom she/he is responsible are not in compliance with the required standards of practice

-Infection Statistics; International, national and local

-Creation and maintenance of a safe environment for patient care through application of infectious control principles and practices for cleaning, disinfection and sterilization

-prevention and control of infectious and communicable diseases in healthcare workers

-Role and Function of Infection Control Committee, and other teams; WHO, CDC, Multidisciplinary infection team, Liaison Infection Control Personnel

-Waste Management and Segregation

-Multi-drug resistant micro-organisms

-Emerging infections and challenges in infection control

-Use of engineering and work practice controls to reduce the opportunity for patient, visitor and healthcare workers' contact with potentially infectious materials

-Use and safe disposal of sharps; safe handling and disposal of waste; safe management of laundry; maintenance of a clean environment and decontamination

-Hand Hygiene and strategies for prevention and control of infections in healthcare settings

-Identification of the hierarchy of exposure prevention strategies

-Identify the strategies for effective pre-cleaning, chemical disinfection, sterilization of instruments and medical devices intended to prevent the transmission of infections

-Audit-Survey-Quality Assurance-Risk Management-Traceability-Clinical Outcomes

-Extensive demonstration session involving hand washing technique and use of alcohol handrub technique.

4. DURATION

-ONE TO TWO FULL DAYS

5. ACCREDITATION

-Infection control training is a certificated course

6. COST: TBC (TO BE CONFIRMED)

B. CARE OF THE ELDERLY

Care of the elderly is a skilled branch of healthcare with many complexities. To be effective, carers need to be knowledgeable, flexible and positive in their interventions. This course enables healthcare workers in the field of elderly care not

only to be up-to-date in their approaches, but to understand the holistic nature of elderly care and effectively deal with challenges and issues associated with care delivery.

1. LEARNING OBJECTIVES

The program is aimed at equipping attendants with the knowledge and skills particular to the care of the elderly in diverse settings.

The training will empower participants to deliver care at the appropriate level and highlight topical issues in care of the elderly.

2. COURSE PARTICIPANTS

-Nurses

-Nurses Assistants

-Healthcare administrators and planners (in charge of Nurses' Assistants)

-Members of the public looking after a relative

-Nursing Home staff

3. COURSE CONTENT

-The Aging Process

-Understanding the carer's role in promoting positive attitudes to aging

-Care Settings

-Caring for the older person with special needs

-Falls and falls prevention (and management) in the elderly.

-Working as a member of the multidisciplinary team (MDT)

-Identifying the services necessary for the Older Population

-Social context of care for older people

-Function and promotion of independence in the older population

-Socio-cultural and religious dimensions to care for the older population

-Challenges of care and specific conditions peculiar to the older person

-Topical Issues: Abuse, Dignity, Confidentiality, Neglect, Advocacy, Etc

4. DURATION

-One full day

5. ACCREDITATION

-Training is certificated and tutored by a an advanced nurse practitioner and Clinical Specialist

6. COST

TBC (TO BE CONFIRMED)

C. ERGONOMIC ASSESSMENT AND TRAINING

Ergonomic training and assessment involve customising workstations to suit the need of individuals rather than the individuals fitting in to suit his/her workstation.

This involves the critical assessment of workplace chairs, desks, equipments (computers, telephone, filing/storage compartments, trolley, car seats, etc) and making the necessary changes. Employees, employers, Human Resources Managers, etc have role to play in making the work environment ergonomically suitable and user-friendly.

Back problems affect people from all walks of life. It does not discriminate between a school going child and a company director or a medical specialist and an administrative assistant.

80% of the population will suffer low back pain at some stage in their lifetime. 60% of the 18-29- and 30–49-year-olds reported back pain compared to 70% of the over 50s

1. LEARNING OBJECTIVES

-Ergonomic training and assessments are designed to equip occupational health practitioners and human resources managers to prevent and reduce the incidence of workplace low back pain and soft tissue injuries

-This intervention is designed to highlight the roles of the employer and the employee in promoting health in the workplace

-This program is aimed at reinstating fun into work while taking out the pain, reducing the rate of workplace absenteeism from low back pain and repetitive strain injuries, increasing efficiency and productivity

2. COURSE PARTICIPANTS

-Occupational Health Physicians

-Primary Care Physicians

-Human Resources Practitioners

-Occupational Health Nurses

-Employee Relations Practitioners

-Health and Safety Advisor

-Health Promotion Practitioners

-Physiotherapists

-Rehabilitation Practitioners

-Occupational Therapist

-Ergonomist

-Organisational Psychologist

-Health Insurance Companies (HMOs)

-Workers in office/admin-based industry: banking, telecom, logistics, transport, public/private sector involved in the use of visual display units (notebooks/desktop computers)

3. COURSE CONTENT

-Prevalence of Low Back Pain (LBP) in the workplace

-Work-related Musculoskeletal Dysfunction (wmsd)

-Health and Social cost of LBP and MSD

-Employers and Employees' responsibilities in the workplace

-Preventing LBP and WMSD in the workplace

-Workstation Assessment

-Workstation Customisation

-Visual Display Unit

-Workplace Physical Activities

-Behavioural Modifications and changes

-Ergonomic advice and practice in the workplace

-Back Care and Postural Awareness

-Musculoskeletal Dysfunction (WMSD) toolkit, Risk Assessment and management

4. DURATION

-Workplace Ergonomic assessment varies from 1-5 days depending on the size of the workplace

-Ergonomic training is a full day program

5. ACCREDITATION

Training program is fully certificated.

6. COST

TBC (TO BE CONFIRMED)

-Workplace Ergonomic assessment fee dependent on size and task involved in a particular workplace (contact- training@peslocushc.com for further enquiries).

D. TISSUE VIABILITY AND WOUND HEALING TRAINING

The human skin serves as a barrier to the outside world and helps to protect the body from infection, radiation, and extremes of temperature. There are many types

of wounds that can damage the skin as result of abrasions, lacerations, rupture injuries, punctures or due to medical conditions such as cellulitis and diabetes.

The purpose of wound care is to prevent complications and preserve functions. It will focus on the combination of best practice research outcomes with clinical expertise and patient values.

1. LEARNING OBJECTIVES

-Training program will allow participants to expand and consolidate their theoretical knowledge and practical skills in wound care and management. It will also consolidate their understanding of the consequences of acute and chronic wounds from an individual and population perspective.

-The training will provoke critical and clinical reasoning and problem solving capacity of attendants. This is with a view to developing an effective and evidence-based clinical decision-making culture in the management of people with wounds

-To develop leadership and innovation in wound care and management that is underpinned by continuous quality improvement framework

2. COURSE PARTICIPANTS

- -Primary Care Physicians -Registered General Nurses
- -Community Nurses
- -Physical Therapists

-Nurses' Assistants in Care Home/Primary Care/Community Setting

3. COURSE CONTENT

-Wound Care Overview -Wound Causes and Types -Wound Signs and Symptoms

-Wound Healing: 1. What is wound healing?

- 2. Causes of wound healing
- 3. Physiology of Healing

-Medical and Nursing care for Wounds

-Wound Diagnosis, Assessment and Treatment

-Wound Self Care

-Wound Medical Treatment

-Pain management and Choice of Dressing

-Wound Healing Outcome Measures

-Care Procedure and Guidelines

-Wound Prognosis and Prevention

-Problematic Wounds and Risk factors for Hard-to-Heal Wounds

-Technology and Ancillary Care in Wound Healing: Physical Therapy, Hyperbaric oxygen therapy, Nutritional component of wound healing, etc

4. DURATION

-One (1) Full Day

5. ACCREDITATION

-Training Program is certificated and delivered by Specialists in Wound Healing and Tissue Viability.

6. COST : TBC

E. UROLOGY, BLADDER AND BOWEL CARE, AND INCONTINENCE NURSING

Incontinence is the involuntary loss of bladder or bowel function. Urinary Incontinence (UI) is a stigmatized, often under-reported and under diagnosed ailment. It is often thought that UI is a normal part of the aging process. Fortunately, better understanding of the normal bladder function can enlighten practitioners and the public that incontinence is not a normal part of the aging process but a symptom of another problem. Urinary Incontinence affects 200 million people worldwide. There are social, sexual, professional, interpersonal and psychological issues associated with UI

1. LEARNING OBJECTIVES:

- -Definition of what constitutes incontinence.
- -Different types of Incontinence
- -Definition of different types of urinary incontinence and its impact on individuals and communities
- -The Basic Skills and investigations required to assess female with different types of urinary incontinence
- -Description of the different treatment types: pharmacological therapy, lifestyle interventions, pelvic floor exercises, urge suppression etc in the management of urinary incontinence
- -To understand when to refer to a specialist nurse and other healthcare
- -Professionals for urodynamic assessment and further management
- -Organization of levels of care and referral pathways within and between settings
- -Development of skill and knowledge to support continence care in diverse settings
- -Health promotion and learn strategies of service delivery based on current evidence
- -Supervision of other staff involved with continence promotion and the delivery of client-focussed management practice
- -Enhance professional scope of practice, broaden Nurses' workplace practice and create opportunities for them to move into a new area of clinical practice.

2. COURSE PARTICIPANTS:

The training is relevant to qualified Nurses, Specialist Nurses, Personal care attendants, Student Nurses, Nurses' Assistants, Nurse Educators, Advance Nurse Practitioners, Outpatient Nurses, Midwives, ICU Nurses, Paediatric Nurses and Medical Practitioners.

3. COURSE CONTENT

- -Types of Incontinence
- Male and Female Incontinence
- Therapy Options and Outcome
- Evidence-Based treatment of Incontinence
- Continence care, assessment, diagnosis, treatment and evaluation of care
- Incontinence to continence
- Bowel Dysfunction
- Other Bladder and Bowel Problems
- Referral Pathway and algorithm
- Health Promotion in Incontinence
- Urethral Catheterisation and male catheterisation
- -Special Population; Frail Elderly, Palliative clients, Gynaecology, Acute care,

Rehabilitation, Men's health (Urology) Etc

- International Best Practice
- Development of Hospital Guideline
- 4. DURATION:

ONE-TWO FULL DAYS

- 5. ACCREDITATION:
 - 8-16 hours certified training
- 6. COST: TBC

F. AQUATIC THERAPY TRAINING

Aquatic therapy training (formerly hydrotherapy) is designed to equip professionals how to design pool exercise programs for various groups and individuals across the life span. The physical properties of water, when combined with appropriate exercises have been demonstrated to have a range of benefits in disease and ill health.

These benefits would increase muscle strength in weak upper and lower extremities; restore function following neurological attacks; allow for more movements in stiff and immobile joints in arthritis; confer relaxation on stressed and tense body parts; improve heart and lung functions in adults, the elderly and children; consolidate the potential of rehabilitation clients and promote the well being of those with no established medical challenges.

1. LEARNING OBJECTIVES

-Improve clinical reasoning related to Aquatic Therapy

-Allow practitioners to gain insight into Pool Management

-Expand Treatment Techniques and Exercise Prescription

-Increase knowledge of participants in the planning, designing, implementation and evaluation of safe and effective aquatic therapy

-Expand the horizon of attendants in the management of diverse conditions in health and disease

2. COURSE PARTICIPANTS-

-Medical Doctors

-Exercise Physiologist

-Fitness Instructors and Special Needs Teachers

-Exercise Trainers

-Swimming Instructors and Teachers

-Physiotherapists

-Occupational Therapists

-Nurses

Rehabilitation Assistants

3. COURSE CONTENT

-Physics and Physiology of Aquatic Therapy

-Aquatic Properties and Therapeutic Interventions

-Pre-screening: Contraindication and Precautions

-Assessment and Evaluation

-Pool Rescues, Entries and Exits

-Positions for Exercises

-Pool Exercise and Exercise Prescription

-Pool Chemistry

-Understanding of the hydrostatic Principles relating to Exercise Regimes in water

-Practical Demonstrations: Hands-on Treatment Techniques

-Pool Exercise for Special Populations

-Philosophy and Techniques: Bad Ragaz Ring Method; Halliwick Concept; Ai Chi; Watsu; Etc

- Case Studies: Special Needs; Neuromuscular; Cardiovascular training; neurology; Obstetrics; Orthopaedic; Elderly; Etc

4. DURATION

Three-five days of training

5. ACCREDITATION

Training program is fully certificated

6. COST

TBC

- G. HEALTH PROMOTION
 - 1. LEARNING OBJECTIVE

Health promotion training would equip healthcare professionals at all levels to inculcate health promoting principles into their intervention.

It would afford healthcare institutions and health Promoting Workplaces to emphasize health education and disease preventing initiatives in their environments.

2. COURSE PARTICPIANTS

All Cadres of healthcare disciplines Healthcare Managers and Administrators Directors and Director-Generals Professionals in Occupational Health Lawmakers

3. COURSE CONTENT

-Introduction to Health Promotion

-Principles of Health Promotion

-Benefits of Health Promotion

-Consequences of Lack of Health Promotion

- Health Promotion Strategies

-Health Promotion in Action

-Case Studies: Physical Activity; Elderly; School Health; Men's and Women's Health; Disabilities Service; Smoking Cessation; Etc

-Health Campaigns: Corporate involvement and role of communication

-Health Promotion and Advocacy

-Health Promoting Hospitals and Workplaces

-Health Promoting Legislations

4. DURATION

One day

5. ACCREDITATION

Training is anchored by health promotion professionals and instructors.

Training is an 8 hour certificated program



H. PRIMARY CARE INITIATIVES

Primary care is a form of care delivery disengaging healthcare from the secondary and tertiary levels to the primary/community level. It emphasises the role of

17

different health professionals working as first point of contact for users and consumers of service. Primary Care team based model gives increased access to healthcare for the individual, families, communities and the whole population. This approach is all encompassing, encapsulating prevention, intervention, rehabilitation, health promotion and other aspects of holistic care.

This system encourages a 'comparative advantage' of healthcare activities concentrated at the primary care level, leaving the secondary and tertiary levels to consolidate their activities.

1. LEARNING OBJECTIVES

-Highlights the benefits of the Primary Care Team Based Approach

-Create awareness and comprehensive understanding of this approach and its core principles

-Establish the application of the system to local needs

2. COURSE PARTICIPANTS

-Director Generals

-Permanent secretaries

-Directors in the Ministries of Health

-Health Policy Advisors at the Federal, State and Local government Levels

-Primary Care Physicians

-Allied Health Professionals

-Lawmakers

-Heads of Healthcare Institutions in the private and public sectors

3. COURSE CONTENT

-Introduction to the concept of multidisciplinary primary care teams

-Population Health benefits of decentralised healthcare
-Statutory Basis for the Primary Care Team Based system
-Components of the Primary Care Team Based (PCTB) healthcare
-Capacity Development within the Primary team concept
-Multisectoral collaboration of the primary Care Team Based approach
-Opportunities and Strength of the Primary Care Team Based concept
-Layers and Levels of the PCTB system
-Workings and Challenges of the PCTB system
-PCTB versus Primary Healthcare
-Case Studies

-The Way Forward

4. DURATION ONE FULL DAY PROGRAM

5. ACCREDITATION

8 hours of certificated learning

6. COST

I. HEALTH AND SAFETY/MANUAL HANDLING

Manual handling relates to the moving of items either by lifting, lowering, carrying, pushing or pulling. Injuries do occur as a result of poor manual handling skill based on the number of times you have to do or repeat a particular task, the distance to be covered carrying out the task, the height involved (too high or too low) in executing the task and if it involves any amount of twisting, bending, turning, over reaching or any awkward movement.

Manual Handling remains one of the most common causes of injury in the work place, accounting for a third of all workplace injuries. These injuries pose a great deal of challenge to both the injured and the employer due to the cost (psycho-social, financial, emotional, and economic) of injuries. It is essential therefore that employers manage the risk to their employees in the workplace.

1. LEARNING OBJECTIVES

-Create and increase the level of awareness of the risks of back injury from inappropriate and unsafe handling.

-To promote the principle and culture of safe handling in the workplace

-To educate employees and employers of their roles in preventing and mitigating injuries in the workplace

-To introduce and educate on the safe use of manual handling equipment in the workplace.

-To reduce absenteeism through ill health (back problems, soft tissue injuries, etc) and increase productivity and efficiency

2. COURSE PARTICIPANTS

-All Healthcare Workers: managers and frontline staff

-All Healthcare Support Staff (clerical, portering, domestic, backroom staff, etc)

-Industry workers involved any form of lifting/handling-logistics, delivery, transport companies, telecommunications, Oil and Gas, Public Sector, etc

-Lawmakers

-Labour Relations Experts

-Organised Trade Union

3. COURSE CONTENT

-Legal and Professional Responsibilities

-Manual Handling Injuries in the workplace

-Safer Handing Policies

-The no lifting Policy

-Biomechanics of Low Back Pain

-Risk Assessment: Principles and Preparation

-Risk Assessment Tool: T.I.L.E

-Risk Assessment Forms

-Manual Handling Incidents Reporting Systems (M.H.I.R.S)

-Risk Assessment in Practice

-Animate and Inanimate Handling

-Unsafe lifting Practices

-Manual Handling in Emergencies and support for the falling and/or fallen client

-Special Handling situations: elderly, spinal injuries, bariatric clients, unconscious clients, maternity, stroke, X-ray, ITU, traction clients, etc

-Manual Handling Equipments

-Case Studies

4. DURATION

Manual Handling training is a One (1)-two (2) full day program.

5. ACCREDITATION

-Training is fully certificated

6. COST

TBC

J. LOWER LIMB BIOMECHANICS

1. LEARNING OBJECTIVES

-To equip participants with the latest state-of-the-art, easy to use toolkit, technology and techniques in the management of biomechanical foot problems

-Provoke the application of sound clinical reasoning in solving disabling foot and related biomechanical problems otherwise overlooked

-To sensitise healthcare professionals on the need for prevention, early detection, and appropriate intervention in the care of biomechanical foot and lower limb dysfunction

2. COURSE PARTICIPANTS

-Prosthetists

-Orthotists

-Nurses (General and specialist) working in Sensory, Cardiac, and Diabetic Clinics

-Physiotherapists

-General Practitioners

-Podiatrists

-Other Healthcare Professionals with interest in foot health and biomechanics

3. COURSE CONTENT

Day 1: Foot anatomy, gait cycle, foot cycles, foot columns, lumbo-pelvic complex, evidence-based facts on foot biomechanics

Day 2: Hands-on Practical Sessions, Pathomechanics, Specific foot conditions in children and the elderly.

Foot related back problems

Foot dysfunction in the active age group

Diabetic foot

Foot mechanics and musculoskeletal problems

Foot Orthoses

Footwear measurement (generic versus customised)

Problem Solving

Case Studies

Complicated Foot Problems

Introduction to Diagnostic Tool and Current Technology

4. DURATION

This training Program is a two-day workshop

5. ACCREDITATION

The biomechanical training is certificated and conducted by specialist in lower limb biomechanics

6. COST

твс

K. CARDIOPULMONARY RESUSCITATION/FIRST AID RESPONDING

Cardiopulmonary resuscitation (CPR) is a must for all workplaces and public places. It meets the requirements of all employees and employers irrespective of their discipline or nature of their business.

1. LEARNING OBJECTIVES

-Provide workplace first aid training

-Teach the public, employees and employers how to provide immediate, crucial life-saving pre-hospital life and death intervention

2. COURSE PARTICIPANTS

All employers and employees (Healthcare; Banking; Oil & Gas; Transport and Logistics; Private and Public Sectors; Military/Police and Paramilitary; Etc)

3. COURSE CONTENT

-Workplace and Public First Aid (incorporating patient assessment; respiratory emergencies, cardiac accidents, wounds and bleeding, soft tissue injuries, etc

-Adult CPR

-Child CPR

-Adult and Child Choking

-Use of AEDs

-Life Threatening Injuries

-First Aid Principles and Approaches

-Practical and Demonstrations: accident and emergency in the public Places (church/mosque, banking hall, sports club/centre, airport, schools/colleges, etc)

4. DURATION

Full day Training

5. ACCREDITATION

This is an accredited light saving training for all workplaces and public places

6. COST

TBC

L. OPHTHALMIC (EYE) CARE

Eye diseases and trauma are prevalent in our society. The cost of blindness and other eye diseases is enormous. This cost can be reduced with capacity building in preventive eye care at all levels, early intervention and appropriate follow up.

For example, cataract is a leading cause of blindness and low vision. It accounts for 51% of the world's blindness, which represents about 20 million people. Healthcare practitioners' ability to intervene adequately, timely, promptly, and effectively will reduce the devastating impacts of eye problems.

1. LEARNING OBJECTIVES

At the completion of the training, participants would be able to provide adequate patient-centred care within and without the hospital

On completion of course, participants would be equipped to provide a comprehensive preventive eye health using appropriate health education tools and serving as specialist ophthalmic resource

Participants would be able to work as members of the multidisciplinary team providing preventative eye care and maintenance of ocular health

The training overall will strengthen the capacity of the individual participant and their institutions in providing quality, affordable and effective eye care meeting their local needs.

2. COURSE PARTICIPANTS

- -Ophthalmologist -Ophthalmic Nurses -Primary Care Nurses -Community-based Nurses -Health Educators
- 3. COURSE CONTENT

-Assessing, diagnosing, treating and discharging patients with eye conditions and injuries

-Screening, monitoring, and initiating treatment pathways for patients with chronic ophthalmic conditions such as glaucoma, dry eye and diabetic neuropathy

-Pre-assessing, consenting, follow up and discharge of patients undergoing cataract extraction and other minor and major ophthalmic surgeries.

-Initiating and managing the care of children with ophthalmic condition and advising on their care

-Performing surgical procedures as part of overall care episode

-Research and audit

-Governance and good clinical practice (incorporating evidence based care)

-Community-based eye care (incorporating health education and promotion)

-Communication

-Leadership and competence in developing local eye service

4. DURATION OF TRAINING

One-three weeks of training, depending on the discipline involved

5. ACCREDITATION

Training program is certificated

6. COST

TBC

M. UNDERSTANDING ADHD (ATTENTION DEFICIT HYPERACTIVITY DISORDER)

The global prevalence of Attention Deficit Hyperactivity Disorder (ADHD) in Children is estimated to be between 5% and 10%. It is most diagnosed in boys than girls and tends to peak between the ages of 7-8 years of age, after which they often begin to decline. ADHD is a developmental disorder that is typically diagnosed during childhood. However, can remain undiagnosed, persisting into adulthood.

Rather than intensifying with age, ADHD tends to improve with early diagnosis, ongoing treatment and management

- 1. Learning Outcomes
 - Better Understanding of ADHD
 - -Improved understanding of Sleep hygiene and Need to Move
 - -Deepening the knowledge of the different behavioural Strategies
 - -Understanding of available and required Support for an ADHD Child at home and School
 - Identify the differences between ADHD and other Neurodevelopmental Disorder, in particular ASD (Autism Spectrum Disorder)
 - Role of Parents/Carers and Support for Families of Children with ADHD F
 - -Understanding of ADHD Medication
- 2. Course Participants
 - -Nurses-School Health, Public Health, Primary Care, Neurodevelopmental,

etc

-Educationalist (School Owners, Managers and Administrators)

-Teachers

-Parents

3. Course Contents

-What is ADHD

-ADHD: Symptoms and Signs

-What is it like having ADHD

-The positives of ADHD

-Other conditions similar to ADHD

-Role of Movement in ADHD

-ADHD: Sleep and sleep hygiene

-ADHD: Roles of School and Teachers

-Management: Medication, Parenting Strategies, Emotional regulation

-ADHD and Support

4. Duration:

One full day

5. Accreditation:

Training is accredited and CPD hours allocated at the end of the training

6.Cost

TBC

N. UNDERSTANDING ASD (AUTISM SPECTRUM DISORDER)

28

Autism Spectrum Disorder (ASD) is a developmental disability caused by difference in the brain. ASD is an umbrella term that covers the different levels. The autism spectrum includes conditions that were considered as separate before. People with ASD can present with social, emotional, communication problems or repetitive behaviours or interest.

People with ASD may also have different ways of learning, moving, or paying attention

1. Learning Outcomes

-Enhance better understanding of ASD

-Equip professionals to have greater awareness of the presentation of ASD in Children and young people so that they can offer early intervention and refer to appropriate services for support and assessment

-To be aware of the co-existing conditions and the differences between ASD and ADHD (Attention Deficit hyperactivity Disorder)

-To Increase understanding of the three domains of Autism in line with the DSM-5 Manual Criteria to fulfil diagnosis of Autism

-To Increase the knowledge of sensory differences and the impact on a child or young person's function

-To have greater understanding of a girl's presentation when assessing for ASD and to be aware of social masking

-To increase knowledge about the behavioural challenges an autistic child or young person may encounter and how to support this

2. Course Participants

-Nurses: Primary Care, Community Health Nurses, School Health Nurses, etc

-Educationalists (School Owners, School Managers and Administrators)

-Government Officials and School Planners

-Parents/Carers of Children with ASD

-School Teachers

3. Course Content

-What is ASD?

-Causes and Symptoms of ASD

-Impacts of ASD-individual and Families

-What is it like to have ASD

-ASD and Girls

-Anxiety

-Understanding ASD and Supporting Behaviour

-Common Problems-Feeding and Toileting

-Better Understanding of Sensory Processing

-Management-Primary Care, Community Setting, Home and School

4. Duration

One Full Day

5. Accreditation

Certificates with CPD points will be issued at the end of training

- 6. Cost
 - TBC

The final cost (per participant) depends on the number, venue and logistics involved in planning the program

All courses are pre-booked and discount available for group bookings

30

Minimum number applies.

Please contact for further details

Oladimeji Oyeleye MISCP, MCSP, M.Sc. MPH

31

Global Development Consultant

Public Health/Primary Care Practitioner

www.peslocushc.com

Email: training@peslocushc.com

+44 (01245922167)