

ADVICE

Supporting children aged 5+ and young people having a blood test or vaccination

We know that psychoeducation can help reduce distress. This leaflet is intended to provide information for health professionals who are supporting parents or carers, children, or young people, for blood tests and vaccines.

You, as a professional, play an important role in promoting the best outcomes during these procedures. Whilst most appointments will go well, there are simple things that you can do to help. Some pointers are below.

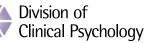
BEFORE APPOINTMENT

Provide information for parents, children or young people (see our other three leaflets). Providing the right amount of information about what to expect, at the age-appropriate level, can help to reduce anxiety. Ask parents or carers to let you know before or at the start of the appointment if they or their child is especially afraid of needles, or whether they have fainted before during immunisations. The other leaflets explain to families it will be beneficial if the child can be brought by a supporting adult who can 'model' tolerating needles.

Refer on if there is clinical need: These resources are for everyone, not just those with 'needle phobia'. If these 'universal' (for all), and 'targeted' (for those most afraid of needles) resources do not seem enough, and if there is an important clinical need for a procedure, then 'clinical/ treatment' level is reached, meaning that it has become appropriate to refer onwards to the relevant local services, such as child medicine, play therapy, or psychology, ahead of their procedure.

Allocate the most experienced member of staff for the most worried children.













START OF APPOINTMENT

Welcome warmly and engage, as usual. Explain (or show using a teddy for younger children), in an honest way, the steps of what will happen, and sensations to expect. Keep it short, but offer to explain any part in greater detail for those who want this. Younger children may be offered the opportunity to role play vaccinating the teddy, if they wish.

The purpose of these leaflets is not plan-making per se, but to provide a way to help shift focus onto what they can change. Ask the child to make choices about comfort. Help them to focus on choices they can make to increase comfort, and try to accommodate their suggestions. See other leaflets.

Ask the child to make choices about distraction. Distraction helps reduce anxiety during procedures, by switching our focus from the procedure to something else. See other leaflets.

Numbing cream: Let families know whether there will be numbing cream available to reduce pain, and if so, practicalities of how this can be used if they consent and it is safe to do so.

DURING THE PROCEDURE

Have as few members of staff present as possible, if the child is very distressed.

Say: 'Ready'. Avoid saying it won't be long or apologising for the procedure.

Encourage the child/young person to use their chosen posture/way of increasing comfort.

Prompt the child/young person to use their specific method of distraction. Be specific, such as by saying 'Look at X', 'Let's try Y', and not 'Use distraction'.

If your patient has fainted in this situation before or if they feel faint, they should be lying down while the procedure is done, and stay that way until they feel OK. Injuries can occur from fainting so this needs to be avoided.

If your patient feels panicky, support them to practise relaxation exercises: For deep, slow 'Tummy breathing', ask them to sit upright but not stiff, and to let shoulders and jaws relax. Ask them to take slow, deep breaths, in through the nose (for 4), pause (for 4) and out through the mouth (for 4). Ensure the tummy goes out, and not just the chest. Repeat... This breathing exercise will only help if these full breaths are taken.

Young children can instead be given bubbles to blow.

For visualisation, ask them to imagine their favourite place, and think about what they would see, hear, smell, taste, and touch there.

If more than one needle needs to be given during an appointment, if possible, give the most painful one last.

Language: Avoid saying things that are not true, such as it won't hurt, or dismissing worried feelings, such as saying you're fine, or need to be brave, or not cry. Instead, be honest about the sensation that will be felt (e.g. a little sore for a moment). Remind them, even when they feel very worried, they can handle very worried feelings. It is OK to let children shout or scream. Direct them to using the above strategies.

AVOID saying 'Calm down' or 'This won't hurt'

AFTER

Offer praise, and a sticker if younger. Ask what they have chosen to do after the appointment.

AUTHORS

The authors have written this document on behalf of the Division of Clinical Psychology (DCP), one of the divisions of the British Psychological Society. The DCP works closely with a number of organisations including the NHS, across disciplines, the government, and multiple professional bodies and groups in the voluntary sector, to promote and develop clinical psychology as a body of knowledge and skills.

Those who are from marginalised groups have a lower uptake of vaccinations (BMJ, 2019). These leaflets intend to provide a preventative resource for everyone, as well as support for those who have a needle phobia, defined as avoiding the procedure itself, (Orenius & Sailus, 2018). Orenius and Sailus (2018) emphasise the importance of healthcare professional assessment of need for onwards referral if needed, and of ensuring the vaccinator and young person form a positive alliance.

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FURTHER RESOURCES

Reducing pain during vaccine injections: clinical practice guideline https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4577344/

Coronavirus - elearning for healthcare https://www.e-lfh.org.uk/programmes/coronavirus/

https://www.nice.org.uk/guidance/cg159/ifp/chapter/treatment-for-children-and-young-people

https://journals.sagepub.com/doi/full/10.1177/2377960818759442?__cf_chl_jschl_tk__=gbixYxdwqh5aXIT3vKtN yW7F1n5wlJwMUpQU022qweE-1643712773-0-gaNycGzNB6U

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