Engaging Children in Emergency Care

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Patient-centered health care

Patient centered care is healthcare that is respectful of, and responsive to, the preferences, needs and values of patients and consumers
Over the past two decades, patient-centered care has become internationally recognised as a dimension of the broader concept of high-quality health care.
Studies show that when healthcare administrators, providers, patients and families work in partnership, the quality and safety of health care rises, costs decrease, and provider and patient satisfaction increase.
Picker’s Eight Principles of Patient Centred Care

1. Respect for patients’ preferences
2. Coordination and integration of care
3. Information and education
4. Physical comfort
5. Emotional support
6. Involvement of family and friends
7. Continuity and transition
8. Access to care
Standard 2: Partnering with Consumers

Requires the involvement of consumers in the organisational and strategic processes that guide the planning, design and evaluation of health services
Service leaders come to front line interface

- Patient Experience Surveys
- Consumer Advisory Groups
- Focus groups
- Rounding with patient
Patient Experience / Satisfaction Surveys

Satisfaction is associated with the perceived quality of communication and interactions that occur between the physician and the patient.
Patient surveys

- **Patient experience** questions: give factual responses about what did or did not occur during an episode of care—’Do you think the hospital staff did whatever they could to help control your pain’

- **Patient satisfaction** questions: give subjective responses—’How would you rate the communication between staff about your care?’
The UK, the US and some European countries have implemented patient survey programs to systematically collect patient and carer experience and feedback at a National level.

**CAPHS** - Consumer Assessment of Healthcare Providers and System Surveys - developed at Harvard University and based on the Picker principles.
Meanwhile in Australia…. 

‘The more public hospitals use patient satisfaction surveys the greater the potential for increasing the quality of public hospital services to better meet patients’ needs’

National:
– The Australian Bureau of statistics
– Commonwealth Fund
– Bureau of Health Information

Local and State-wide

Review of patient experience and satisfaction surveys conducted within public and private hospitals in Australia, Australian Commission of Safety and Quality in Healthcare, 2012
Family Centered Care

‘Innovative approach to pediatric health care planning, delivery, and evaluation that is grounded in a mutually beneficial partnership among patients, families, and providers that recognizes the importance of the family in the patient's life’

The Committee on Hospital Care and Institute for Patient- and Family- Centered Care, 2012
FCC Key Principles

• Information sharing
• Respect and honoring differences
• Partnership and collaboration
• Negotiation
• Care in the context of the family and community

The Committee on Hospital Care and Institute for Patient- and Family- Centered Care, 2012
Survey data about children’s health care is mostly adapted from adult tools and collected from parents rather than directly from children, for both logistic and methodological reasons.
Worldwide, there is little available evidence of children’s experiences of health care, and few specifically designed measuring tools.

Little voice: Giving young patients a say, 2012
‘Children and young people are constantly missed out of official surveys asking people what they think of their healthcare’

The RCPCH Youth Advisory Panel, 2014
Feedback challenges in children

Obtaining informed consent, contacting children, and interviewing them are substantial challenges for obtaining survey responses in the pediatric population.
Children and young people ought to be involved in decision-making about their healthcare to the greatest possible extent, in line with their capacities for understanding and participation.

Charter of Children’s and Young People’s Rights in Healthcare Services in Australia
Parent/carer views are not necessarily accurate or appropriate as proxy measures for the experiences of young patients

Little voice: Giving young patients a say, 2012
Including CYP in patient experience surveys is feasible, enhances what is known from parents’ responses, and has potential to improve the quality and patient-centeredness of pediatric care.
Healthcare providers should attempt to understand and make sense of children’s and young people’s communications, rather than assuming that they do not make sense.
A UK initiative with the Alder Hey Children’s Hospital developed the Fabio the Frog app.

It was designed for parents / carers and to also be easily accessible to as many children as possible, including children as young as three and those with special learning needs, and visual, sensory and audio impairments.
Designed with children for children
Staff can design tailored surveys, upload to the app, collect feedback from patients and their families, and download the data into easily understood graphs
Fabio QI Wishlist funded project 2016, Paediatric Ward, Nambour

Inclusions
• Children aged 3-17 years
• Able to understand English
• Willing to participate
• Pain under control
QI project outcomes

- Children get to share their experiences with staff
- Improve processes involving painful procedures
- Tweaking menu options
- Re-scheduling of outpatient clinics to increase choices for parents and children
- Understanding parent’s concerns in relation to Code Blue emergencies.
- Boredom and entertainment options - without Fabio, it would have remained a ‘non-issue’
Fabio QI Limitations

- Embedding into everyday processes (despite funded PO and QR postcards)
- Clinical and therapeutic processes over quality improvement
- Unprecedented change (opening a new hospital facility)
- Safekeeping of electronic devices
Adaptation for SCUH ED?
Children, young people and their parents/carer’s must be involved in providing feedback of their experience in the urgent and emergency care setting.
While you were waiting, did hospital staff tell you what was happening?

Don't know / can't remember
No, but I would have liked to have been told
No, but this was not needed
Yes, definitely
Yes, sort of

Were you looked after while you waited in the Emergency Department (with pain medicine, blankets, sick bowls or anything else you needed)?

I did not need anything
No
Yes, definitely
Yes, sort of
Expanding reach in ED
Patient reported Experience Measurement (PREM) for urgent and emergency care

New survey, developed with focus groups, launched by the Royal College of Paediatrics and Child Health (RCPCH), specifically for use in Urgent and Emergency Care (U&EC) Settings

RCPCH and the Picker Institute Europe, 2014
What’s next for fabio at SCUH?

• Keep going and spread the word!
• Making the meaningful change happen
• Feedback to children and families and staff
• Staff surveys
• More innovation!!
Thank you
U tube
References

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