

Family-centred Care of Children and Young People in the Acute Hospital Setting: A Concept Analysis

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Introduction/Background

- Family centred care (FCC) has become a central tenet of children's nursing in the Western world over several decades. It is widely supported by children's nurses as the preferred model of care within which to deliver children's nursing care (Franck & Callery, 2004; Murphy & Fealy, 2007; Shields *et al*, 2007; Coyne *et al*, 2011; Tallon *et al*, 2015; Feeg *et al*, 2016).
- Although it is a term used frequently, there is no single internationally accepted definition for FCC, rather different understandings of the concept have developed & a list of elements are described in the literature.
- There is a lack of clarity about its meaning among nurses (Murphy & Fealy, 2007; Coyne *et al*, 2011; Feeg *et al*, 2016; Coats, 2018).
- As a result of this lack of clarity, FCC is not always implemented effectively or with consistency (Foster *et al*, 2010; Coyne *et al*, 2011; Smith *et al*, 2014; Feeg *et al*, 2016; Smith *et al*, 2017; Coats, 2018).
- A lack of clarity about the operational meaning may lead to inconsistencies in how care is delivered & uncertainty for families & staff.
- While children's nurses endorse the concept of FCC, implementation of its principles in practice is more problematic (Foster *et al*, 2010; Coyne *et al*, 2011).

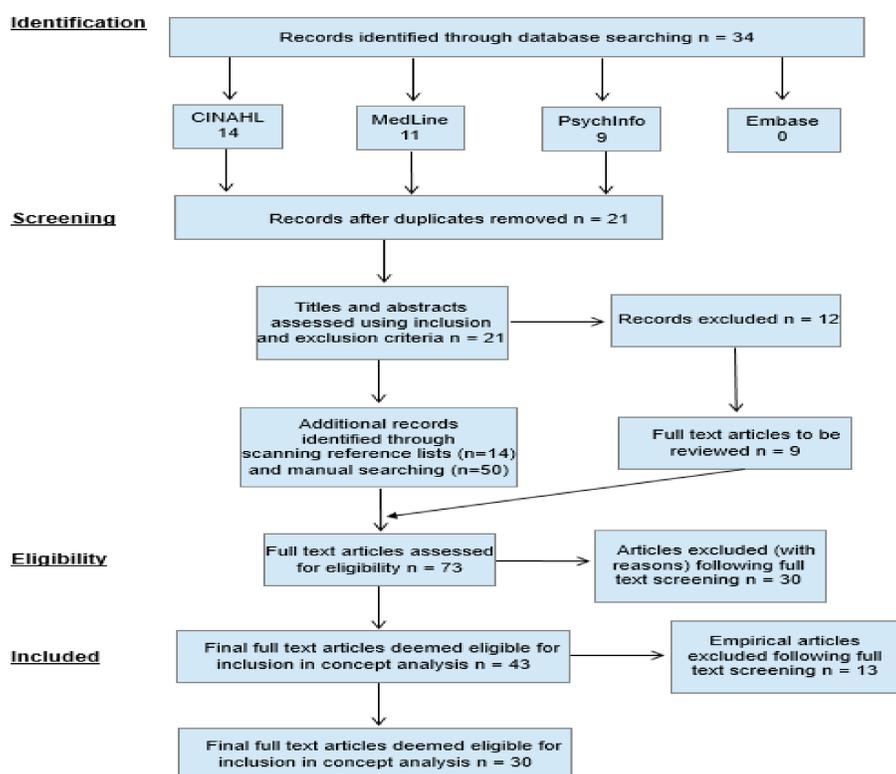
Design

- When a concept is not clearly understood, its impact on practice is greatly impaired (Rodgers, 1989).
- Concept analysis is widely acknowledged as a form of inquiry to develop the knowledge base of nursing, & to aid in the development of standardised nursing language (Rodgers, 2000).
- A clearly clarified concept may be used more effectively & its strengths & weaknesses evaluated (Rodgers, 2000).
- Rodgers (2000) evolutionary concept analysis was used as the guiding framework for this concept analysis. The strength of this framework lies in its systematic approach, especially during data analysis, adding to the clarification, description & explanation of concepts central to nursing (Toftagen & Fagerstrom, 2010).
- The aim was to provide an operational definition of the concept as it applies to hospitalised children and their parents.

Data Collection

A robust search strategy was designed to ensure the sample of literature was rigorously selected, represented the literature fairly and minimised researcher bias. The search results are outlined on the Prisma Flow Diagram below.

Prisma Flow Diagram



Data Analysis

- The aim of data analysis is to identify a consensus in the literature (Rodgers, 2000).
- Surrogate terms, related concepts, attributes, antecedents & consequences of the concept being analysed were examined.
- Data was examined for areas of agreement/disagreement, changes over time & emerging trends which may indicate a need for further research.
- Each article was read and re-read to identify the data related to each of the key categories.
- Data extraction records were compiled for all articles.

Results

Table 1 – Key attributes of family-centred care and their contributing attributes

Key attributes	Contributing attributes
Parental participation in care	<ul style="list-style-type: none"> Parental participation in care Parental involvement in care Care-by-parent
Development of respectful and trusting partnerships	<ul style="list-style-type: none"> A partnership formation with the child, family and the nursing team The development of respectful and trusting relationships Mutually agreed goals and a shared responsibility for the child's care
Information sharing	<ul style="list-style-type: none"> Communication and negotiation Patient and family empowerment
All family members as care recipients.	<ul style="list-style-type: none"> Recovery process for the child and the family starts with caring for the family

Table 2 – Antecedents of family-centred care and related attributes

Antecedent	Related family-centred care attributes
Parents at the bedside	<ul style="list-style-type: none"> Parental participation in care
Parents' willingness to perform some aspects of their child's care	<ul style="list-style-type: none"> Parental participation in care
Staff willingness to collaborate respectfully with parents and families	<ul style="list-style-type: none"> Respectful and trusting partnerships
Open, honest, respectful communication and negotiation	<ul style="list-style-type: none"> Information sharing Respectful and trusting partnerships
Adequate time for communication	<ul style="list-style-type: none"> Information sharing
Flexible visiting arrangements	<ul style="list-style-type: none"> Parental participation in care The family members as care recipients.
Facilities for parents to be resident	<ul style="list-style-type: none"> Parental participation in care

Findings

- FCC enhances the hospital experience for children & parents and improves their well-being (Dunst & Trivette, 2009; Shields *et al*, 2012; Coyne, 2013).
- There is a lack of attention to cultural & societal changes, thus our understanding of FCC across culturally diverse settings is limited (Dennis *et al*, 2016).
- Developments in the delivery of acute hospital care = shorter length of stay, increased patient throughput and increased patient acuity.
- These factors reduce opportunities for developing trusting relationships between families and nurses, & pose challenges to effective & consistent implementation of FCC.
- While children's nurses have been applying some elements of FCC to their practice for decades, the concept continues to evolve.

Implications for Research & Practice

- The findings provide a starting point from which further research can be conducted.
- Explore FCC from the child's & parents' perspectives, reflecting cultural diversity & social norms.
- Examine the outcomes of FCC for the child & family.
- The cost to families of having the responsibility of caring for their child at home following a day-case procedure or early discharge is not yet known.
- Further research must examine what FCC means for families, in light of the current social context & changing family configurations.

References

See following publication for full list of references: O'Connor, S., Brenner, M. & Coyne, I. (2019) Family-centred care of children and young people in the acute hospital setting: A concept analysis. *Journal of Clinical Nursing*, 28: 3353-3367. <https://doi.org/10.1111/jocn.14913>

Acknowledgements

Thanks to the National Children's Hospital Foundation based at Tallaght University Hospital, Dublin 24 for funding.

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