

## GLACLP Article Review: “Reducing infection transmission in the playroom: Balancing patient safety and family-centered care”

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Playrooms are an important room for pediatric patients. Playrooms can normalize a child’s hospitalization through therapeutic play. The playroom can also be a space for group activities that encourage social interaction or for medical play sessions with a child life specialist to help patients understand upcoming procedures or process previous medical experiences. The playroom is also a space where siblings can play together or a place where healthy siblings can receive education and support from a child life specialists about their sibling’s diagnosis or hospital stay.

Siblings are a part of a patient’s family which means that family centered care must include providing for the healthy siblings who aren’t staying in the hospital. It is widely accepted that siblings should be welcomed at the hospital but putting this theory into practice can be hard, especially with the risks of infection that siblings might bring into the sterile hospital environment. “Reducing infection transmission in the playroom: Balancing patient safety and family-centered care” by Ivany, LeBlanc, Grisdale, Maxwell and Langly (2016) looks at how researchers developed a way to screen siblings so they could visit the playrooms. Whenever visitors come to see patients, those patients are potentially exposed to diseases and infection. There is a need to minimize the risk of patients to exposure to infection from child visitors while at the same time welcoming and encouraging siblings as a part of family-centered care.

Researchers started with conducting a literature review to identify best practices. Although siblings are theoretically encouraged to visit patients during their hospitalization, 89% of US newborn units were restricting children visitor’s access (Ivany et al, 2016). After the literature review, researchers then developed a situation background assessment recommendation (SBAR). Parents were instructed to fill out a sibling screening form as a part of admission and it was the parent’s responsibility to update staff if any new symptoms developed for siblings. The forms were connected to a patient’s care plan but not a permanent record. The child life staff would review the form before the sibling visited the playroom or participated in programming. If the form revealed a risk of infection, that sibling was restricted until they were no longer a risk. As a result of this new screening program, siblings became an accepted and necessary component of this hospital’s family-centered care.

Child life specialists know the importance of providing support for siblings and the role that siblings can play in a patient’s coping during diagnosis and hospitalization. This article advocates for sibling inclusion in the hospital environment and responds to the risk of infection that is often associated with siblings. For child life specialists advocating for the care of siblings, this research can provide guidelines to help the child life team respond to concerns from

infection control. This article is also a great example of the need for collaboration in order to provide family-centered care. Researchers included unit staff, infection control and child life specialists in their multidisciplinary approach. By collaborating with these three departments, they were able to create and implement this sibling screening form.

Ivany, Leblanc, Grisdale, Maxwell, & Langley. (2016). Reducing infection transmission in the playroom: Balancing patient safety and family-centered care. *AJIC: American Journal of Infection Control*, 44(1), 61-65.