

An article review of: Hill, C., Knafl, K. A., & Santacroce, S. J. (2017). Family-centered care from the perspective of parents of children cared for in a Pediatric Intensive Care Unit: An integrative review. *Journal of Pediatric Nursing, 41*, 22–33, by Katrena Froh on behalf of the GLACLP Research Committee.

According to Just (2005), “the introduction of Family Centered Care (FCC) in pediatric settings was intended to change how providers interact with families and care for hospitalized children. Based on FCC principles, the family is central to the child’s health and pediatric care should focus on partnership with the family”. The Institute of Patient and Family Centered Care (IPFCC) says the goal of FCC is to “improve patient and family satisfaction and care outcomes; FCC has the potential to influence health care delivery at levels ranging from social and institutional policies to daily interpersonal interactions with staff and family” (www.ipfcc.org).

Boles et al., (2020) says, “Certified Child Life Specialists are patient-and-family-centered care professionals who have established and raised the proverbial bar for the patient experience movement in healthcare settings”. Family centered care is a guiding principle of child life practice. Child life specialists deeply understand the importance of FCC in the healthcare experience.

The four core concepts of FCC according to The Institute of Patient and Family Centered Care include respect and dignity, information sharing, participation, and collaboration. While other research has examined FCC from other perspectives, this article used systematic reviews and meta-analyses, “to examine parents’ perspectives on and experiences with implementation of the FCC core concepts in the context of having a child in the PICU” (Hill et al., 2017).

Hill et al., (2017) explains “of the four core concepts, evidence of implementation being met and unmet with regards to respect and dignity, information sharing, and participation was present in the parent report articles and provide direction for advancing the implementation of FCC in the PICU. Collaboration was mentioned just once in the implications section of one article. An additional review finding was the impact of the physical and cultural environment of the PICU on the parents’ perception of FCC implementation”.

Hill et al., (2017) says “the findings from this integrative review reveal per parent report that they encounter positive and negative implementation of core concepts of FCC while their child is in the PICU. Nurses and other health care providers must be cognizant of the core concepts of FCC and how their actions can impact parents both positively and negatively. This integrative review reveals that despite the push for FCC in the PICU environment, parent report indicates there is still much work to be done to ensure full implementation”.

Hill et al., (2017) states “additional research is needed to determine the knowledge base of clinicians regarding FCC”. This author would also like to see additional research regarding what was found regarding the impact of the physical and cultural environment of the PICU on parents’ perspective. Limitations of this review include “the analysis of published literature that may not have reported all of its data; authors of the included studies may have only reported data relevant to their research question and in turn parent report data specific to FCC concepts were not included in their results” (Hill et al., 2017).

References

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