



child friendly healthcare initiative

# The Child Friendly Healthcare Initiative

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*Communicating with children  
and their families*



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# Guiding Principles

- Healthcare provision in accordance with the United Nations Convention on the Rights of the Child
- Endorsed by
  - ◆ Child Advocacy International
  - ◆ World Health Organisation
  - ◆ Royal College of Paediatrics and Child Health (UK)
  - ◆ United Nations Children's Fund (UNICEF)
  - ◆ Royal College of Nursing



# Topics of Discussion

- Background of the CFHI
- 12 standards of care
- Implementation of the CFHI at SCH, Randwick
- Pre-intervention findings
- Where to now?



# Background of the CFHI

- Follows on from the worldwide success of the WHO Baby Friendly Initiative
- Translates the UNCRC into standards of care that are measurable in a health care setting
- Has been implemented or partially implemented in 10 sites, including the UK, Kosova, Pakistan, Moldova, Uganda and Bosnia



# 12 Standards of Care

- Children are admitted to hospital only when in their best interests
- The hospital will provide the highest standard of care and treatment
- The environment will be secure, safe and clean
- Child and family centred care will be delivered in partnership with parents, in areas dedicated to children that are child and family friendly, by staff with 'children's qualifications' or who are experienced. A parent/carer will be enabled to stay with their child and support them, especially during care delivery



# 12 Standards of Care

- Parents and children will be kept fully informed and involved in all decisions affecting their care
- Children will be approached as individuals with their own age appropriate and developmental needs and rights to privacy and dignity
- The hospital will have a multi-disciplinary team to establish and maintain guidelines for the assessment and control of the physical and psychological pain and discomfort of children
- There will always be healthcare staff trained and experienced in resuscitation and the facilities to do this



# 12 Standards of Care

- Children will be able to play and learn whilst in hospital
- Healthcare staff will be familiar with the signs and symptoms of child abuse and be capable of instigating procedures to protect the child
- Health will be promoted by example, education, immunisation, growth and developmental assessment and multi-disciplinary collaboration
- The hospital will comply with the appropriate best practice standards on the support of breastfeeding and nutrition and will ensure that the nutritional needs of each child are met



# Standard 5

- “Parents and Children will be kept fully informed and involved in all decisions affecting their care”



# Implementation

- **Step 1: Establish working group**
  - Director of Nursing SCH
- David Coe chair of Child and Adolescent Nursing
  - Patient Friend
  - SCH Executive Director
- Manager, Recreation and Play Therapy
- Clinical Nurse Consultant – GESCHN and Respiratory
  - Clinical Nurse Specialist
    - Project Officer
  - Consumer – Adolescent
    - Consumer - Parent



# Implementation

- **Step 2:** Market the initiative to internal and external stakeholders
- **Step 3:** Assess how well we currently communicate. Identify areas of concern and things we do well
- **Step 4:** Make recommendations based on findings
- **Step 5:** Implement interventions
- **Step 6:** Reassess, using the same tools



# Pre-Intervention findings

- Based on the CFHI scoring system, SCH is currently providing a 'silver' standard of service in relation to standard 5
- Health worker responses were critical of the level of care we provide
- Overall feedback from patients and families was mostly positive with some recurring concerns



# Pre-Intervention findings

- Six main concerns
  - ◆ Care co-ordination of children under multiple teams
  - ◆ Breaking difficult news
  - ◆ Meaningful involvement of children and parents in decision-making about their care
  - ◆ Effective communication with children and families from NESB
  - ◆ Communication within Multi-disciplinary teams
  - ◆ Making suggestions and complaints



# Pre-Intervention findings

- What are we doing well?
  - ◆ Families generally feel as though they are receiving enough information about their treatment
  - ◆ Health workers are actively taking steps to familiarise themselves with patients
  - ◆ Parents feel that they have opportunities to ask questions



# Where to now???

- **Recommendations**

- ◆ Care co-ordination of children under multiple teams
- ◆ Breaking difficult news
- ◆ Meaningful involvement of children and parents in decision-making about their care
- ◆ Effective communication with children and families from NESB
- ◆ Communication within Multi-disciplinary teams
- ◆ Making suggestions and complaints

# References

- Newell, P. (1991) The UN Convention and Children's Rights in the UK. London, National Children's Bureau.
- Southall, D; Burr, S; Smith, R; Bull, D; Radford, A; Williams, A; Nicholson, S. (2000) "The Child-Friendly HealthCare Initiative: HealthCare Provision in Accordance with the UN Convention on the Rights of the Child" Pediatrics 106(5): 1054-1064.