



## PEDIATRIC PARTNERSHIP CARE: WHERE ARE WE AND WHERE SHOULD WE BE?

Maria Goreti Silva Ramos Mendes

**Conceptual Framework:** Although the importance of involving the family into day's care process is now widely accepted (Moretz & Abraham, 2012), there is still variability in the way the care partnership is developed in pediatric contexts (Granjard-Goy, 2015). This study sought to analyze the partnership care nature in pediatric context with the purpose of contributing to the reconstruction of the effective partnership care. **Method:** A qualitative approach was used in this study, based on the Grounded Theory from the symbolic interaction perspective. The study included 12 nurses of the pediatric unit and 18 mothers/fathers who stayed in the hospital with their hospitalized children. The number of participants was defined according to data saturation. Participant observation and semi-structured interviews were chosen as data collection techniques and it was analyzed using the program NVivo8. The ethical principles required in research with human beings have been ensured. **Outcomes /Discussion:** Principles, assumptions and conceptions were described by the study participants. However, according to the observation, the dichotomy identification between the conception and the nurse's practical development was possible. In certain contexts, that knowledge was not explicit when talking about the child's nurse care and the interaction with the parents. What seems to be a clean perception of the partnership care and a supposed knowledge of the dimensions that characterize it, was identified by the participants words but that kind of clarity appeared as a result of the developed practices. Weaknesses in the negotiation process were identified, mainly in the communication and in the interpersonal relationship and in the definition of the involved partners' roles and a perceived imbalance of power installed in the nurses/parents relationship. **Conclusions:** The effective partnership care must be based on an effective communication between nurses and parents (Giambra, Stiffler & Br oome, 2014), where negotiation skills with children and families are central to the process. Nurses and parents must build up themselves in knowledge subjects and situated on the same construction plans of the actions, without borders or unequal plans (Collet, 2012). It allows the family's knowledge to be contemplated in the perspective of the child's care and to have space in the action as partners in the care process.

### References:

Collet N. (2012). Interacting subjects in hospitalized children care: challenges for Pediatric Nursing. *Rev Bras Enferm.* 65(1): 7-8.

Giambra, K.; Stiffler, D. & Broome, E. (2014). An integrative review of communication between parents and nurses of hospitalized technology-dependent children. *Worldviews Evid Based Nurs.* 11;369-75.

Moretz, G. & Abraham M. (2012). Implementing patient and family centered care: Part II - Strategies and resources for success. *Pediatric Nursing.* 38(2): 106-10.

Sousa, P.; Antunes, A.; Carvalho, J.& Casey A. (2013). Parental perspectives on negotiation of their child's care in hospital. *Nursing Children & Young People.* 25(2): 24-8.

[Redacted text block]

[Redacted text block]

[Large redacted text block]

[Redacted text block]

[Redacted text block]

[Redacted text block]

[Redacted text block]