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Pediatric Hospital Environments: Do They Make a Difference?

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Abstract

The environment can have an extreme impact on a child's well-being, growth, and health. This should be taken into consideration especially for those children that are surrounded by a hospital environment. The healthcare system can come across as extremely intimidating and frightening to young patients. The purpose of this research study is to change this mind-set by creating a more welcoming atmosphere through child-friendly interventions such as, magic, colorful art, and nature. The research has shown that it is important to take children's perspectives into consideration and to implement them into the design of pediatric hospitals. Often times children's opinions are overlooked, forgotten, or laid to side when compared to adult perspectives. By performing this research study, children's thoughts and ideas can be gathered and then applied to the beginning of the design process. The ultimate result of this research study is that there will be quick healing and increased satisfaction as a whole in the pediatric patients and their families.

PICO

Population - Pediatric patients ages ranging from newborn to 18 years old. **Intervention -** Creating a child friendly environment. **Comparison -** Utilizing a neutral and detached environment. **Outcome** - Quick healing and overall satisfaction of both patients and patient

families.

Purpose

Is the therapeutic use of a child-friendly environment an effective coping mechanism for healing in pediatric patients?

• The purpose is to gather the perspectives of children on the designs and features of a pediatric hospital environment. Specifically: accessibility, personal space, and physical environment. (Lambert, Coad, Hicks, & Glacken, 2013)

• The purpose is to find techniques that can be used as coping mechanisms in both acute and chronic diseases in pediatric patients.

Materials/Methods

In the literature review, there was a mutual design findings amongst several studies, these findings include:

Artwork & Surroundings- promoted distraction, improved moods, and reduced stress within the hospital setting. Pediatric patients sought shapes, colors, and creativity in halls, windows, flooring, etc. The children searched for items and artwork to make them feel more at home.

Outdoor features- According to Abbas and Ghazali, gardens will not only provide an environment to reduce stress and anxiety in patients and their families, but also in the staff of the hospital (2010). Some ideas included: water features, windows to view from the inside out, and playgrounds.

Accessibility- It was found that pediatric patients requested an easier way to find their way through the hospital, maybe even without their parents help, such as, paw prints or arrows to follow down the halls, and easy to read maps that the children can see. New techniques have come to the forefront in pediatric hospitals in order help children cope better with bedside procedures (i.e. starting

IVs) and stressful environment of a hospital. These techniques include: **Magic:** This strategy has begun to be used in pediatric hospitals as a bedside

technique in order to reduce patient's anxiety of procedures, as well as lighten one's spirit with joy and laughter for those that have a chronic illness and extended hospital stays.

Pediatric Hospital Environments: Do they make a difference? Rhyan Elliott, Senior BSN Student Barbara McClaskey, Faculty Pittsburg State University

Materials/Methods

Music: Due to the stimulating environment of hospitals full of noise, lights, and distractions, music has become a calming measure for children and even their families.

Equipment Creativity: Large and small equipment alike can be very intimidating to an adult patient, but especially to the small children encountered in a pediatric hospital. By making items from MRI machines to devices that simply secure the placement of NG or IV tubes more child-friendly, favorable to a child's eye, they can become overall less daunting.

A common discovery amongst different articles of reference, was that young children tend to become selfless when it comes to their comfort over someone else's comfort.

Examples:

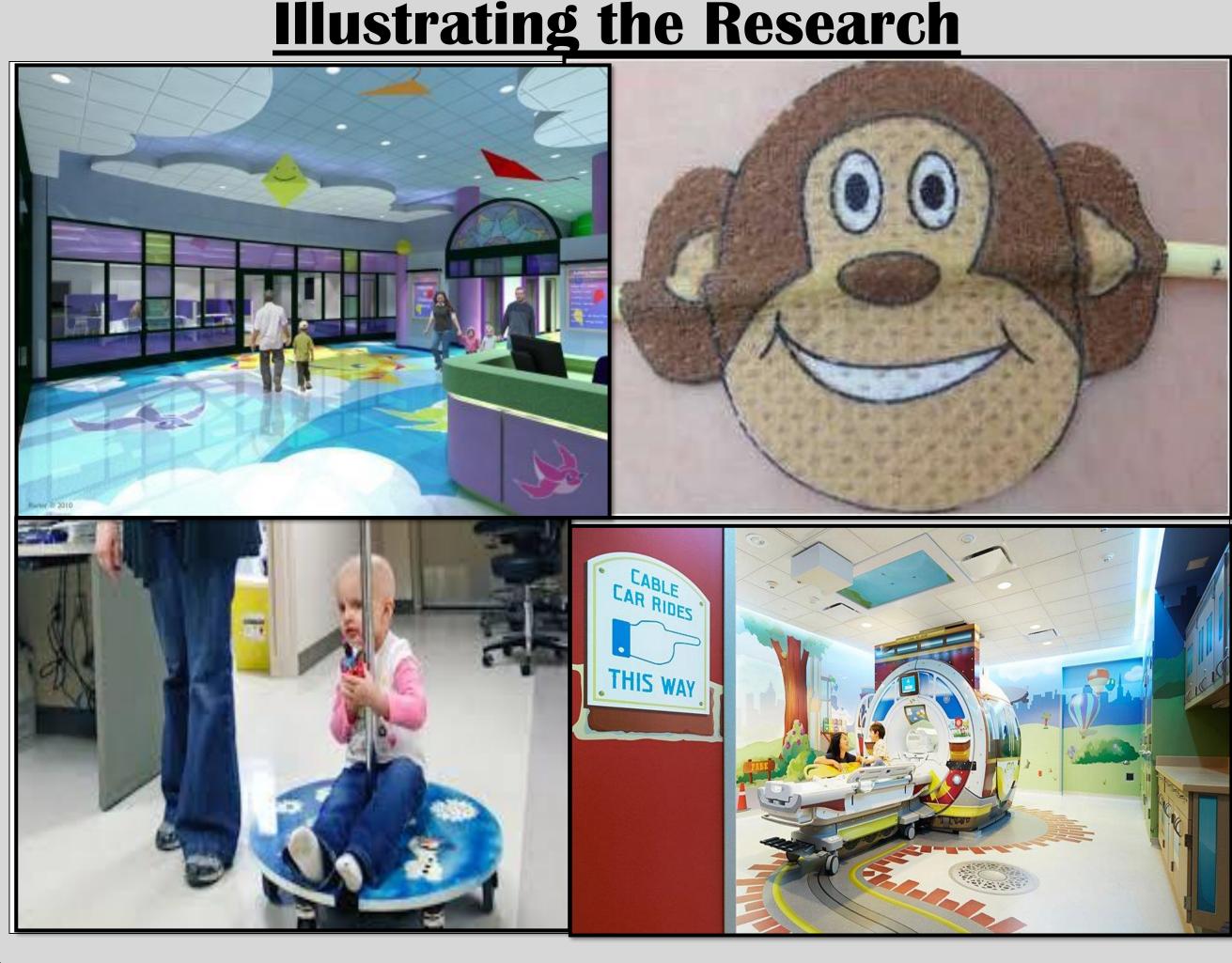
The pediatric patient's were found to be concerned about where their parents would sleep. They were also concerned about siblings would do when staying in the patient room. The children found that they preferred private rooms over shared, because it allowed freedom to make some small decisions for themselves and to have their family close.

The doctor said only little kids are allowed to sleep on the big bed but my daddy and mammy have to sleep on the floor on a mattress (laughing) ... and there's a little boy sleeping in his bed and his daddy was sleeping on a mattress like my mammy and daddy ... I won't stay on my own ...just stay with my mammy and daddy, not on my own' (boy 5 years)

'A picture [on wall] of my family ... maybe I should draw it ... maybe I'll just make a picture of me and my sister' (girl 5 years)

'Maybe there should be boy and girl room [bathroom] ... think we have to put need put girl one here and a boy one here and girl one here ...' (girl 5 years) 'If you put it [box for paints/crayons] up there [top shelf] then how can you reach it' (girl 5 years

'And outside there was an alarm in the dark like ... someone set off an alarm out there ... yeah I couldn't sleep my ears were so stiff, I couldn't even get awake with it' (boy 5 years) 'Maybe like a little map ... so you can look up, that's my playroom that's my room' (girl 5 (Lambert, et al. 2013) years.)



topic further, such as:

-Informing the architects/builders of the ideas and innovations at the blueprint stage of the design of the hospital. This needs to be done in order to make the children's dreams a reality.

their families.

-Ways to make these interventions versatile, no only in pediatrics, but across all aspects of the healthcare system.

Proposed Plan for Change

The interventions taken to create a favorable environment to healing in pediatric hospitals have taken leaps and bounds from what they were in the past. I agree with all of them and have a few tips to keep the progress going.

Bring home to the patients - Home is where patients are often the most comfortable, by bringing aspects such as video games, stuffed animals, artwork, etc. into the hospital environment, we as nurses can help them have peace of mind in a stressful situation.

Allowing them to be kids - As nurses, we need to look past the patient's illness and realize they are still just like every other kid, only with a few minor limitations. Kids in the hospital still want to interact with the outside world and do the "normal" activities their peers are doing, such as: going to prom, playing on the playground, or maybe just doing homework like everyone else.

Lambert, V., Coad, J., Hicks, P., & Glacken, M. (2013). Young children's perspectives of ideal physical design features for hospital-built environments. Journal of Child Health Care, 18(1), 57-71. doi:10.1177/1367493512473852 Abbas, M. Y., & Ghazali, R. (2010). Healing environment of pediatric wards. Procedia - Social and Behavioral Sciences, 5, 948-957. doi:10.1016/j.sbspro.2010.07.215 Hart, R., & Walton, M. (2010). Magic as a Therapeutic Intervention To Promote Coping in Hospitalized Pediatric Patients. *Continuing Nursing Education*, 11-17. Retrieved October, 2018. Coad, J., & Coad, N. (2008). Children and young peoples preference of thematic design and colour for their hospital environment. Journal of Child Health Care, 12(1), 33-48. doi:10.1177/1367493507085617 Lambert, V., Coad, J., Hicks, P., & Glacken, M. (2013). Social spaces for young children in hospital. Child: Care, Health and Development, 40(2), 195-204. doi:10.1111/cch.12016 Eisen, S. L., Ulrich, R. S., Shepley, M. M., Varni, J. W., & Sherman, S. (2008). The stress-reducing effects of art in pediatric health care: Art preferences of healthy children and hospitalized children. Journal of Child Health Care, 12(3), 173-190. doi:10.1177/1367493508092507

Gaps in the Literature There are some small steps that can be taken in order to develop this

-Most of the studies were being developed in countries overseas like, Ireland and Australia, but there is not as much being done in the United States.

-Ways to make these colorful interventions cost effective for the hospitals, patients, and

References

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