

Running head: Children's Hospital Awareness Initiative

Children's Hospital Awareness Initiative:  
Improving Employee Communication with Pediatrics

Sarah Hines

Lehigh Valley Health Network

## Children's Hospital Awareness Initiative

### **Abstract**

Appropriate communication with children is key for any children's hospital. As Lehigh Valley Health Network is not exclusively pediatric, it is important to train all staff members on how to interact with children. A survey was completed by 18% of all staff highlighting the need for more education for distraction techniques and communication skills. A TLC is being developed to become mandatory staff training, developed by Child Life Specialists. It involves discussions about how to earn a child's trust, as well as how to describe difficult procedures in appropriate manners. Examples of such may involve the use of a movie or the comfort of sitting on a parent's lap. The main focus of this study was to highlight education needs amongst all employees and distribute materials to increase reports of higher knowledge and comfort communicating with pediatric patients.

Keywords: distraction techniques, communication, education, pediatrics

## Children's Hospital Awareness Initiative

### Children's Hospital Awareness Initiative:

#### Improving Employee Communication with Pediatrics

#### **Background**

Since the establishment of the Children's Hospital at Lehigh Valley Health Network, pediatrics has become a focus in relation to areas of improvement. To gain higher rankings as a children's hospital, the quality of care and comfort that a child receives at Lehigh Valley Hospital must become a priority. Unlike other children's hospitals in the area, the Children's Hospital at Lehigh Valley Health Network is a hospital within a hospital, meaning that both pediatric and adult patients are treated under the same roof. As a result, some staff members are trained to work with pediatrics, and others are not. The focus of the Children's Hospital Awareness work group is to establish barriers between pediatric patients and an extraordinary level of care. As many clinical employees are trained in providing clinical care to children, this was not a large concern. However, communicating with children is taught less frequently, and often approached inappropriately. The purpose of the task group was to establish these difficulties, and create educational plans to remedy them.

#### **Methods**

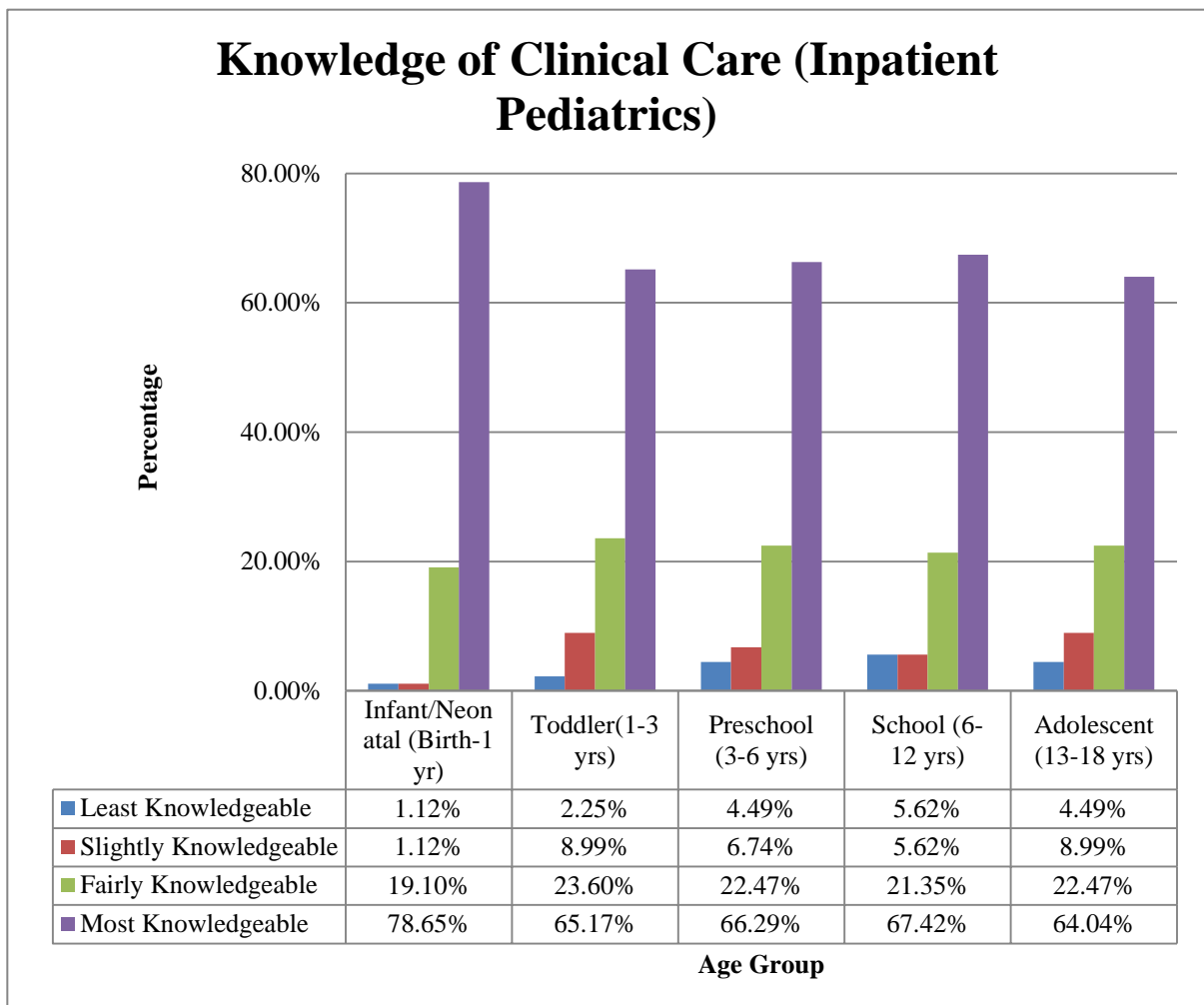
A survey was distributed to the over 12,000 employees of the Lehigh Valley Health Network, with a return rate of about 18%, or 2137 responses. Baseline questions such as whether the employee was clinical or non-clinical, and what department they worked with was preliminarily asked as a system in which responses could be sorted. Then, questions such as "What is your level of comfort to provide clinical care" were asked, followed by five different age groups (infants/newborns, toddlers, preschool aged,

## Children’s Hospital Awareness Initiative

school aged, and adolescents). Other questions revolved around knowledge and comfort with communication and distraction techniques for the above age groups. This survey was completed prior to the writer’s involvement in the research program, and results were retrieved, analyzed, and compiled.

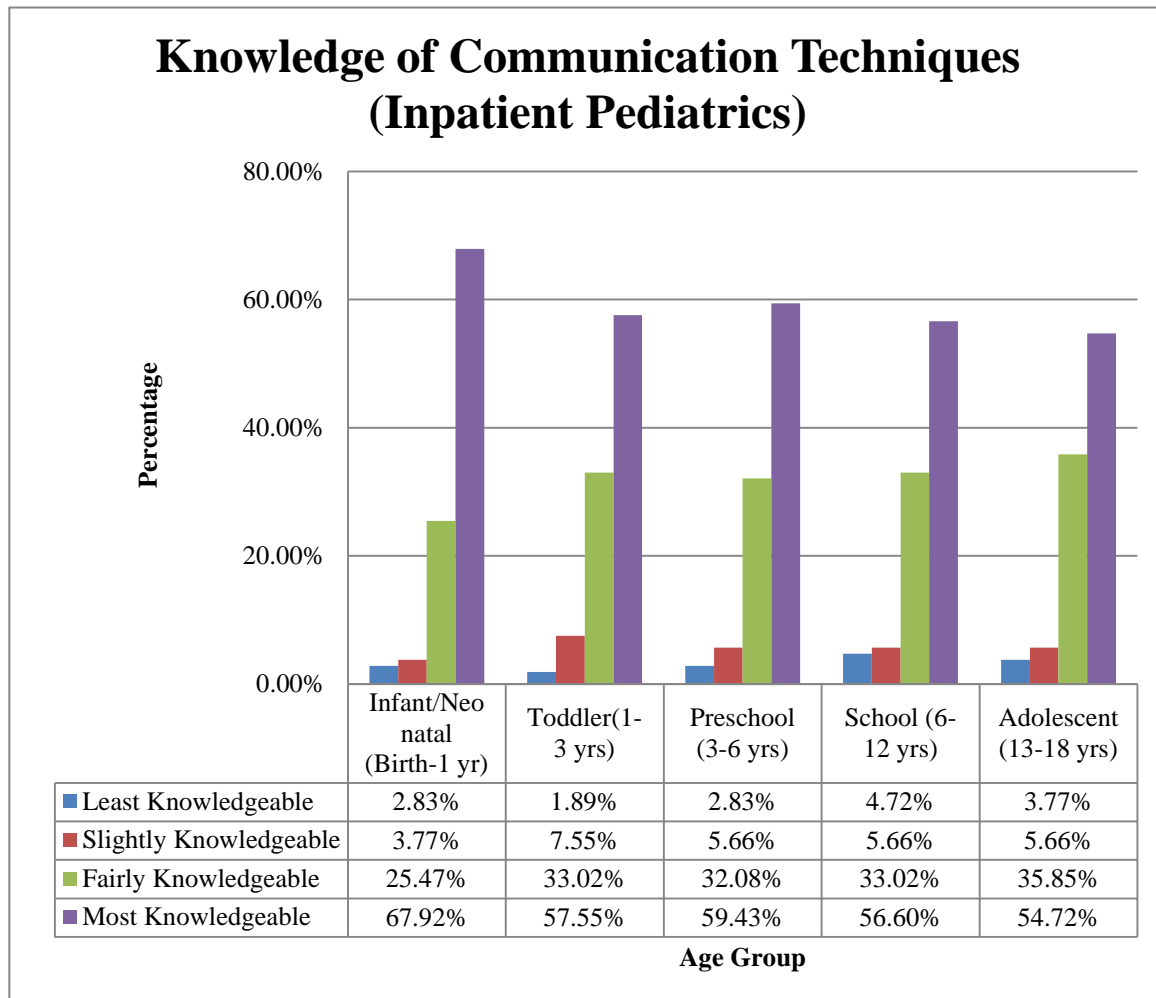
### Results

While the overall results of the survey were above satisfactory, there were some definite areas in need of improvement, mostly related to communication with pediatric patients. For example, below is a graph depicting reported levels of knowledge of clinical care:



## Children’s Hospital Awareness Initiative

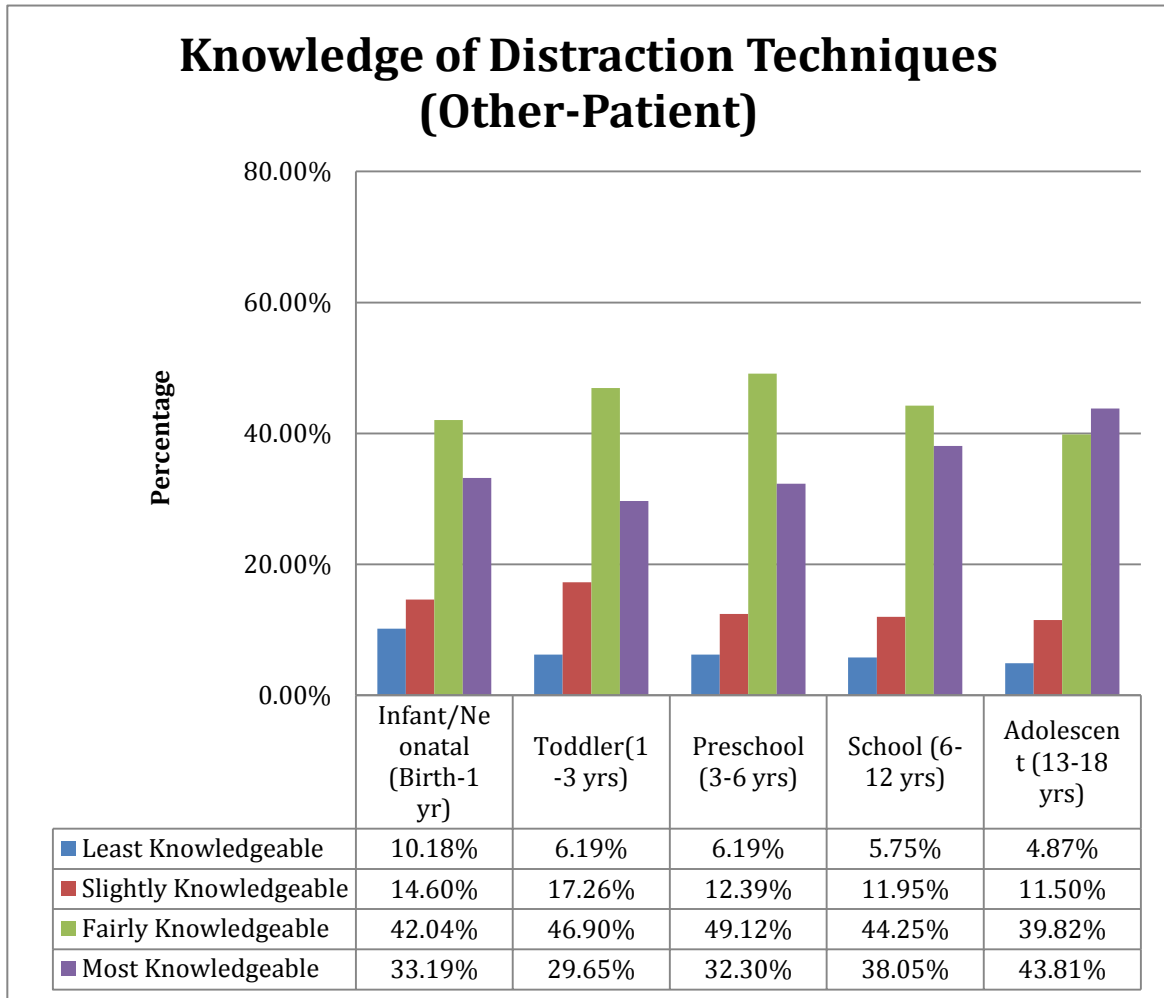
Alternately, below is graph of the same scale, but showing knowledge of communication techniques:



These graphs were created using data from the group of respondents whom identified as working in inpatient pediatrics clinically. Essentially, even those who work full time with pediatrics do not have communication skills that are on par with their clinical skills. In contrast, the graph below will show the data retrieved from the survey results of those who identified as “Other” when referring to their department, in relation to their knowledge of distraction techniques. Through further analysis, many of those who chose

## Children’s Hospital Awareness Initiative

the “Other” category did so because there was no option for departments who see both pediatric and adult patients.



Upon the conclusion of data analysis, it was established that communication was an area in which all departments seemed to lack universally. From that point on, staff education surrounding communication and the use of distraction techniques became the work group’s focus.

### Future Steps

As of the date of writing, Child Life Specialists within the hospital have been recruited to develop an educational tool in which all employees could increase their

## Children's Hospital Awareness Initiative

knowledge and comfort concerning communication with pediatric patients. It was determined that a TLC would be the most effective route of relaying the information, and the goal is to strive for including the TLC in the next mandatory staff bundle. In order to ensure full absorption of the information provided, the TLC will be interactive in nature, including quizzes and self-reflection questions, as opposed to simply reading educational materials.

### **Communication**

While many people are fully capable of carrying out a conversation with a school age or preschool age child, they may balk at the task of explaining an important medical procedure to that child in a way that will lessen their anxiety and include no false information. For example, if one were to tell a child "This needle won't hurt one bit!" and then it causes immense pain for that child, they will label one as a liar and fear any other procedures one must complete. Or, for example, you would not blow bubbles to pacify a teenager who is having a nasogastric tube placed, but that would be appropriate for an infant or toddler (Martin, 2013). Building trust with a patient not only makes their stay more enjoyable, but it makes the jobs of those who care for them infinitely easier as well. Simple fixes, such as allowing a small child to sit upon a parent's lap while a needle is being inserted can calm a child and make them feel protected (Cavender, Goff, Hollon, & Guzzetta, 2004). Watching a movie was shown to soothe a younger child much more effectively than simply doing the procedure without any distraction (MacLauren & Cohen, 2005).

### **Conclusion**

## Children's Hospital Awareness Initiative

The results of this survey and study have demonstrated a need for mandatory staff training on age-appropriate distraction techniques and communication skills by age group. The intention of this education is to improve patient satisfaction in pediatric patients, as well as satisfaction from their guardians. It will provide patients with all three aspects of the Triple Aim. Patients will experience better care, in that they will have staff working with them in a way that is less traumatizing and more comforting. Better health will be achieved by procedures being completed more easily. And lastly, better cost will be evident by fewer rescheduled procedures, such as CT scans and MRIs, due to higher patient compliance. Departments may also run more efficiently due to fewer backed-up schedules.



## Children's Hospital Awareness Initiative

### Works Cited

Cavender, K., Goff, M., Hollon, E., & Guzzetta, C. (2004). Parents' positioning and distracting children during venipuncture. Effects on children's pain, fear, and distress. *Journal of Holistic Nursing*, 22(1), 32-56.

MacLaren, J. E., & Cohen, L. (2005). A Comparison of Distraction Strategies for Venipuncture Distress in Children. *Journal of Pediatric Psychology*, 30(5), 387-396.

Martin, V. (2013). Using distraction techniques with children. *Nursing*, 43(11), 68.