



Conference Paper

The Experienced of Nurses and Family Caregivers towards Family Center Care among Hospitalize Children

Eva Supriatin and Joshua Pangestu

STIKEP PPNI, WEST JAVA. INDONESIA

Abstract

Background: Family Center Care (FCC) is an approach to nursing care based on a mutually beneficial partnership between the patient and family. Objective: This study aimed to describe the experience of the nurse and the family in nursing care support: Family-Centered Care in hospitalized children. Method: This research was a qualitative descriptive-analytic study, with key informants and snowball sampling techniques through inclusion obtained research subjects 3 nurses and 3 families, data analysis techniques using an interactive model that includes reduction, data display and conclusionsketch. Results: the result of this study showed six themes, namely: determinants of family support, efforts of nurses to achieve treatment goals, supporting factors for family involvement, family experience in the hospital, family dependence and family trust. In family-centered patient care, patients and families determine how they will participate in care and decision making. FCC as a standard of practice can produce high-quality services. The FCC provides care based on mutual trust, collaboration or partnerships that work together with families by paying attention to aspects (bio, psycho, socio, and spiritual) respecting diversity and recognizing the family is a source in children's lives. Conclusion: Provides an illustration that the themes in the research results prove family-centered care is realized through mutually beneficial cooperation through partnerships between nurses and patients.

Keywords: Family Center Care, Hospitalization, Experience

Corresponding Author: Eva Supriatin evatarisa@gmail.com

Received: 22 September 2019 Accepted: 4 October 2019 Published: 10 October 2019

Publishing services provided by Knowledge E

© Eva Supriatin and Joshua
Pangestu. This article is
distributed under the terms of
the Creative Commons
Attribution License, which
permits unrestricted use and
redistribution provided that the
original author and source are

Selection and Peer-review under the responsibility of the ICHT 2019 Conference Committee.

1. Introduction

Health qualityservices are manifestation of the demands of society in the current era of globalization. An increasingly critical and educated community is strengthening so that health services are more responsive to the needs of the community. One of the health quality services that must be continuously improved is the quality of nursing services in hospitals [1]. Nursing as a profession and professional staff is responsible for providing nursing services according to competencies and authorities that are independently owned or in collaboration with other health team members [2]. In child

○ OPEN ACCESS

nursing practice, nursing care is applied based on the philosophy of child nursing. Child nursing philosophy is a belief or view held by nurses to provide services to children One of them is Family Center Care (FCC). Family Center Care emphasizes the importance of family involvement in providing care for children in hospitals.

The FCC is an approach to the planning, implementation, and evaluation of health services based on a mutually beneficial partnership between patients, families and health care providers. It is founded on understanding that the family plays an important role in ensuring the health and well-being of patients of all ages [3]. In family-centered patient care, patients and families determine how they will participate in care and decision making. FCC as a standard of practice can produce high-quality services. FCC provides treatment to be based on mutual trust, collaboration or partnership working with families with due respect to (bio, psycho, socio, and spiritual) respect for diversity and recognizes the family is the source of the child's life[3]

From the phenomenon above, the researcher is interested in researching with the title "Nurse and family experience in supporting Family Center Care in children hospitalized in DustiraCimahi Kindergarten II Rumkit" Thepurpose of this study is to describe the experience of nurses and families in supporting family centered care in hospitalized children.

2. Methods

2.1. Study design

Qualitative descriptive type used in this study is intended to obtain information about the experience of nurses and families in supporting Family Center Care in hospitalized children carried out in DustiraCimahi Kindergarten II Rumkit from May to June 2019.

2.2. Sample

Subjects were obtained by snowball and criteria key informant The nurse who was with the patient while in the ministry, the family of the mother or father who waited for more than 2 days. Inclusion and exclusion criteria, sampling tecahniques, sample size? How to decide?



2.3. Interview guideline

What are the question asked to informant and how to develop those questions.

2.4. Procedure

Data collection using semi-structured interview methods and data analysis using data reduction, data presentation, and drawing conclusions, and using auditing for testing the validity of the data.

2.5. Data analysis

Add here more detail how to analysi your interview results

3. Results

3.1. Nurse Experience

Better to add the information of the nurse (demographic characterists of studied participants)

Analysis of the data obtained from in-depth interviews and field notes during the data collection process resulted in six themes: family categories as determinants, efforts to achieve nurses' goals, driving factors for family involvement for nurses and for families: experience, dependency, trust. Nurses' efforts to achieve treatment goals, factors supporting family involvement, family experience in the hospital, family dependence and family trust. All the themes comes from all participants or what? Please explain here

Theme 1 nurse: What is the name? write it here

Determinants of family support. Based on the nurses 'experience, the informant broadly considers the patient's family to be divided into two groups, namely supporting families and non-supporting families, the results of the analysis of informants' statements that they view cultural beliefs, educational backgrounds, and the role of families in care rooms. This can be seen from the keywords culture, knowledge, family roles. the themes comes from all participants or what? Please explain here

Add quotation here "interview results that refelected the theme"



3.2. Efforts to Achieve Treatment Goals.

In the standard nursing care process, the goals of care are stated in the planning of nursing achievement through implementation according to the needs of patients. The informant acknowledged that the family has the power and builds that strength by providing opportunities for families to participate at all levels of child health care, including engaging in care activities for children and getting education from health workers, participating in making regulations and development programs. This is evident from the keywords that appear, namely how to approach the patient, family independence, family needs, facilitate the role of nurses.the themes comes from all participants or what? Please explain here

Add quotation here "interview results that refelected the theme"

3.3. Family Involvement Factors

This is evident from the keywords that appear namely the Condition of Children, Family Needs. Encourage children and families to discover their strengths and strengths, build self-confidence, and make choices in determining children's health services. Health workers seek to increase family confidence by providing the knowledge that families need in childcare, the themes comes from all participants or what? Please explain here

Add quotation here "interview results that refelected the theme"

3.4. Family Caregivers Experience

Better to add the information of the family caregivers (demographic characterists of studied participants)

This is evident from the keywords that appear that is the length of stay, frequency of hospitalization

3.5. Dependence

This is evident from the keywords that appear that is helpless. Families are supported in caring activities and their role as decision-makers by building unique strengths and recognizing their expertise in caring for children both inside and outside the hospital (Newton, 2000 in Hockenberry & Wilson, 2009). The next keyword is Ignorance, according to informants, nurses as professionals will be able to establish good relationships

with families during treatment by sharing information about illness, treatment and care with the family.the themes comes from all participants or what? Please explain here

Add quotation here "interview results that refelected the theme"

3.6. Trust

This can be seen from the keywords that emerge namely Attention, where the Nurse pays attention to the safety principle in performing nursing actions, as well as providing health education about the patient's illness. the themes comes from all participants or what? Please explain here?

"... everything here is good, checking, fever, I see it last night until 12 o'clock is also still being checked, the nurse is good..."

The next keyword is Performance, where care in the child's room performs procedures with play activities first, Facilitating collaboration family/professional at all levels of nursing services at the hospital. The policy that exchanges complete and clear information between family members and professionals in terms of support in a supportive way at all times.

4. Discussion

should have discussion section to talk about your findings and the significant also implication

5. Conclusion

Based on the results of research conducted, the conclusions obtained are: In the perspective of child nursing, collaboration of nurses and patients 'families is one of the nurses' professional appearance standards. This is proven by family-centered care (FCC) as a philosophy of child nursing in which there are principles of family involvement in patient care activities. There are two groups of family characteristics which, according to the informants, are determinants of how they are involved in caring for children in hospital. The first group is the characteristics of families who are less cooperative/unwilling to engage in care activities. Characteristics of families that are less cooperative include families with background knowledge, culture and the role of the family in the room. The condition of the child and family needs in care activities are the driving factors for the informants. Besides the long experience of hospitalization is a form of family adaptation

in caring for children, the frequency of hospitalization adds to the family experience in caring for children, a form of family helplessness accepting anything instructed by nurses, a form of ignorance informants do not understand what is discussed with nurses, family trust is formed from attention nurses who always explain the actions to be taken, and the performance of nurses when taking care actions for the speed of care. So the conclusion of the research is that the themes prove that family center care should be carried out in the hospital.

Pre-hospital Counseling, i.e. Counseling conducted by health workers to parents and children, related to hospital policies, procedures and regulations before the child is treated. Counseling is seen from the principle of family-centered care, health workers provide clear information rights to clients and families. Respect children and families, that they have the right to ask

Acknowledgement

The authors would like to thank their colleague for their contribution and support to the research. They are also thankful to all the reviewers who gave their valuable inputs to the manuscript and helped in completing the paper.

References

- [1] Nursalam, (2016). Nursing Management and Applications in Nursing Practices,. Jakarta: SalembaMedika.
- [2] Gustini, (2007, January 4). Nursing Services, Scientific Article: Faculty of Nursing, University of Indonesia, p. 3.
- [3] American Academy of Pediatric. (2016, February Monday). Retrieved from http://www.aap.org.