

# Chapter 1

## Perspectives of Pediatric Nursing

# HEALTH CARE FOR CHILDREN

- *Healthy People 2020*
  - Framework for identifying essential components for child health promotion programs
  - Designed to prevent future health problems in children

# Health Promotion: Six Categories (World Health Organization, 2007)

1. Tobacco use
2. Behavior that results in injury and violence
3. Alcohol and substance use
4. Dietary and hygienic practices that cause disease
5. Sedentary lifestyle
6. Sexual behavior that causes unintended pregnancy and disease

# Child Health Promotion

- Provides opportunities to reduce differences in current health status among members of different groups and ensure equal opportunities and resources to enable all children to achieve their fullest health potential

# Nutrition in Infancy

- Breast-feeding is BEST
  - Human milk is the preferred form of nutrition for all infants
  - Provides
    - Micronutrients
    - Immunologic properties
    - Enzymes that enhance digestion and absorption

# Nutrition in Childhood

- Life-long eating habits established by age 3
- Parent teaching
- Role of culture with food

# Dental Care

- Dental caries are preventable
  - Dental hygiene beginning with first tooth eruption
  - Role of fluoridated water
  - Early dental preventive care

# Immunizations: Role of Nurse

- Review individual immunization records at every clinic visit
- Avoid missing opportunities to vaccinate
- Encourage parents to keep immunizations current (US Department of Health and Human Services, 2009)
- Keep up with changes in immunization schedules, recommendations, and research related to childhood vaccines
- [www.cdc.gov/vaccines](http://www.cdc.gov/vaccines)

# Childhood Health Problems

- Obesity and Type 2 Diabetes, p. 3
- Childhood Injuries, p. 3
- Violence, p. 5
- Substance Abuse, p. 6
- Mental Health Problems, p. 6

# Mortality

- Infant Mortality
  - Death in first year of life
  - Recorded per 1000 live births
    - neonatal mortality (<28 days of life)
    - postneonatal mortality (28 days to 11 months)
- Childhood Mortality
  - usually presented per 100,000 population

# Morbidity

- Childhood morbidity
- Statistics generally rates per 1000 population
- Difficult to define
  - May denote acute illness, chronic disease, or disability

# Childhood Morbidity

- Acute illness: symptoms severe enough to limit activity or require medical attention
- Respiratory illness = approximately 50% of all acute conditions
- Infections and parasitic disease = 11%
- Injuries = 15%

# The “New Morbidity”

- *AKA Pediatric Social Illness*
  - Behavior, social, and educational problems
  - Psychosocial factors
    - Poverty, violence, aggression, noncompliance, school failure, and adjustment to parental separation and divorce
  - Mental health issues

# Evolution of Child Health Care in the United States

- Federal- and state-funded programs
- Health care reform (historic and present day)

# THE ART OF PEDIATRIC NURSING

# Philosophy of Care

(from American Nurses Association, 2003):

1. Attention to the full range of human experiences and responses to health and illness without restriction to a problem-focused orientation
2. Integration of objective data with knowledge gained from an understanding of the patient or group's subjective experience
3. Application of scientific knowledge to the processes of diagnosis and treatment
4. Provision of a caring relationship that facilitates health and healing

# Family-Centered Care: Two Basic Concepts

- Enabling
  - Current abilities and competencies
  - Acquire new abilities and competencies as needed
- Empowerment
  - Interaction that allows the family to maintain or acquire a sense of control
  - Behaviors that foster family's strengths, abilities, and actions

# Atraumatic Care

- Eliminate or minimize distress
  - Psychologic
  - Physical

# Goals of Atraumatic Care

- Prevent or minimize separation from the family
- Promote sense of control
- Prevent or minimize bodily injury and pain
- Examples
  - Foster the parent-child relationship
  - Prepare child before any treatment or procedure
  - Control pain
  - Provide play activities for expression of fear and aggression

# Role of the Pediatric Nurse

- Therapeutic Relationship
- Family Advocacy and Caring
- Disease Prevention and Health Promotion
- Health Teaching
- Support and Counseling
- Coordination and Collaboration
- Ethical Decision Making

# Ethical Decision Making

- Ethical dilemmas = competing moral considerations
- Competing moral values may include
  - Autonomy
  - Nonmaleficence
  - Beneficence
  - Justice
- Determine the most beneficial or least harmful action within the framework of
  - Societal mores
  - Professional practice standards
  - The law
  - Institutional rules
  - Family's value system and religious traditions
  - Nurse's personal values

# Evidence-Based Practice

- Based on valid, important, and applicable patient-reported, nurse-observed, and research-derived information
- Combines knowledge with clinical experience and intuition
- Provides a rational approach to decision making that facilitates best practice

# GRADE Criteria for EBP

- Evaluates the quality of research articles used to develop practice guidelines
- Rates the quality of the evidence
- Establishes a strong versus weak recommendation for practice change

# The GRADE Criteria to Evaluate the Quality of the Evidence

TABLE 1-5 THE GRADE CRITERIA TO EVALUATE THE QUALITY OF THE EVIDENCE	
QUALITY	TYPE OF EVIDENCE
High	Consistent evidence from well-performed randomized clinical trials (RCTs) or exceptionally strong evidence from unbiased observational studies
Moderate	Evidence from RCTs with important limitations (inconsistent results, methodologic flaws, indirect evidence, or imprecise results) or unusually strong evidence from unbiased observational studies
Low	Evidence for at least one critical outcome from observational studies, from RCTs with serious flaws, or from indirect evidence
Very Low	Evidence for at least one of the critical outcomes from unsystematic clinical observations or very indirect evidence
QUALITY	RECOMMENDATION
Strong	Desirable effects clearly outweigh undesirable effects, or vice versa
Weak	Desirable effects closely balanced with undesirable effects

Adapted from Guyatt GH, Oxman AD, Vist GE, et al: GRADE: an emerging consensus on rating quality of evidence and strength of recommendations, *BMJ* 336:924-926, 2008.

# CRITICAL THINKING AND THE PROCESS OF PROVIDING NURSING CARE TO CHILDREN AND FAMILIES

# Critical Thinking

- Purposeful, goal-directed thinking that assists individuals in making judgments based on evidence rather than guesswork

# Nursing Process

- Assessment
- Nursing diagnosis
- Planning
- Implementation
- Evaluation

# Documentation: Written Evidence of Progress Toward Outcomes

- Initial assessments/reassessments
- Nursing diagnoses and/or patient care needs
- Interventions identified to meet patient's nursing care needs
- Nursing care provided
- Patient's response to, and outcomes of, care provided
- Abilities of patient and/or, as appropriate, significant other(s) to manage continuing care needs after discharge

# QUALITY OUTCOME MEASURES

- Evaluated at discharge and after discharge
- Agency for Healthcare Research and Quality has federal guidelines
- info@ahrq.gov; [www.ahrq.gov](http://www.ahrq.gov)