

EXPLORING THE EXPERIENCE AND THE NEEDS OF PEDIATRIC NURSES CARING FOR CHILDREN WITH A MENTAL HEALTH DISORDER HOSPITALIZED ON NON-PSYCHIATRIC UNITS

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OUTLINE

Introduction

- Background
- Research Questions

Methods

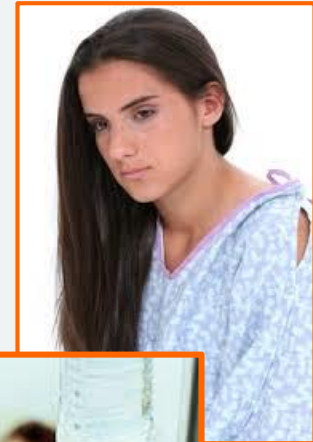
- Sample Characteristics

Results


- Themes & Concept Map

Discussion

- Implications for Nursing Practice
- Limitations & Conclusion



BACKGROUND

- In Canada: High prevalence (20%) of mental health (MH) disorders in children
- In Quebec: Since the de-institutionalization reform in MH,
 low capacity for mental health (MH) inpatients in general & pediatric hospitals
- Montreal Children Hospital (2012-2013):
30% of MH admissions → Non-psychiatric units
(5-15% in general)

BACKGROUND

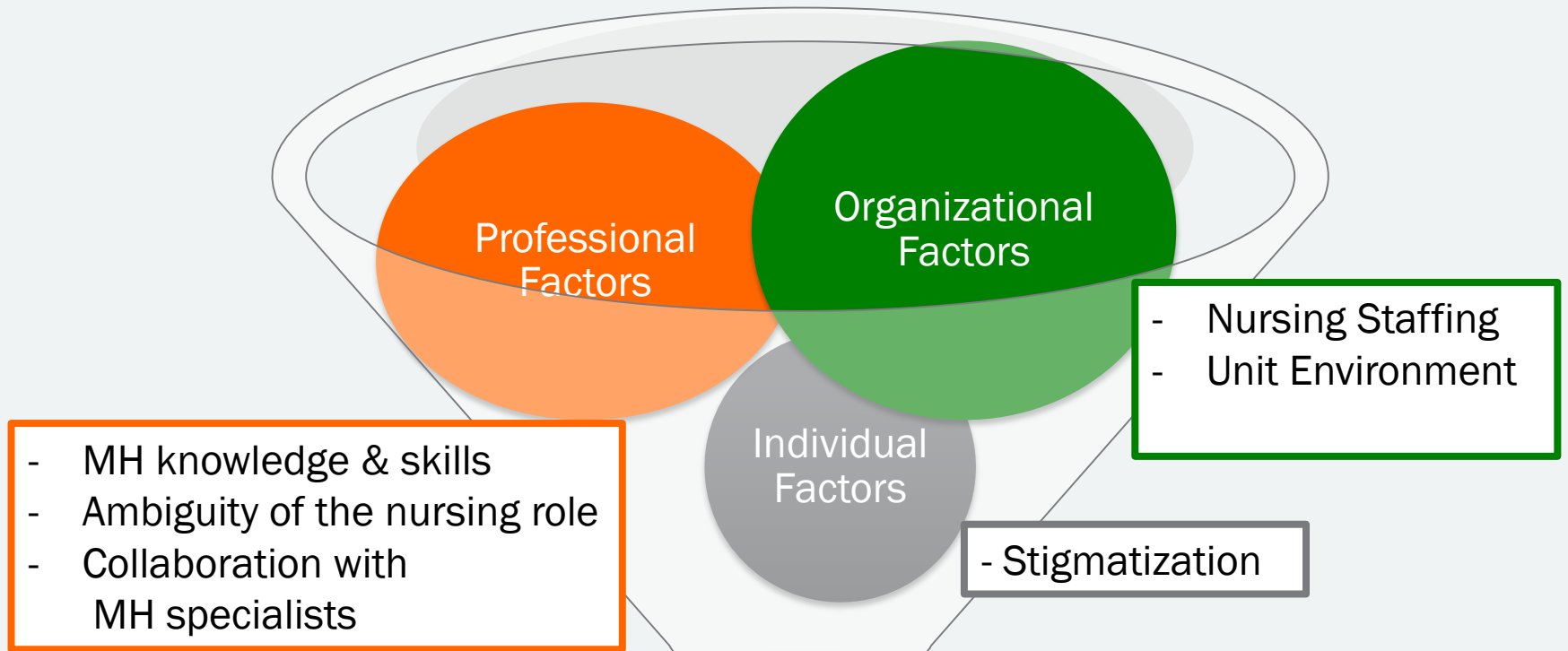
↑ Prevalence of
MH disorders
+
↓ MH Beds in
pediatric hospitals

Every hospital
pediatric nurse will
come into contact
with a child who has
a MH issue

Nurses face multiple
barriers &
challenges in caring
for these children

(Buckley, 2010; Happell et al., 2009; Moxham et al., 2010;
Ramritu, Courtney, Stanley & Finlayson, 2002; Smith, 2009; Watson, 2006),

CHALLENGES & BARRIERS



↑ in readmission & prolonged hospital stay

Psychiatric hospitalization is one of the most expensive forms of MH treatment available for children

KNOWLEDGE GAP

Only a few studies have exclusively explored the specific needs for support of pediatric nurses with off-service patients

(Happell et al., 2009; Moxham et al., 2010)

RESEARCH QUESTIONS



1. What is the **experience** of pediatric nurses caring for children with a MH disorder on non-psychiatric units at a tertiary university affiliated pediatric hospital?
2. What are the **types of support** pediatric nurses need in caring for children with a MH disorder on non-psychiatric units at a tertiary university affiliated pediatric hospital?

METHODS

- **Research Design**
 - Qualitative descriptive study
- **Sample Characteristics**
 - Purposive sample approach
 - Inclusion criteria
- **Data Collection**
 - Semi-structured, individual interviews (N=17)
 - Socio-demographic questionnaire
- **Thematic content analysis**
 - Condensing data



Displaying data

Elaboration and verification of data

(Miles & Huberman, 1994; Polit & Beck, 2012; Sandelowski, 2000)

Sample Characteristics

Variables		N	%
Gender	Female	16	94
	Male	1	6
Range of Age	18-33	12	70
	34-54	2	12
	>55	3	18
Education	College	4	24
	Bachelor	12	70
	Master	1	6
Work Status	Full-time	14	82
	Part-time	3	18
Experience since graduation (years)	<4	6	35
	5-9	5	29
	10-14	2	12
	>15	4	24



Results

Two main themes:

Experience of Nursing :

*Constant loop of
helplessness
in care*

Nurses need:

Striving to break the
powerlessness loop to
ensure better care.

ONGOING POWERLESSNESS LOOP OF CARE

Not knowing what to do

- As soon as you throw us something out of our norm, we don't know what to do. So, it throws us for a loop and these kids, they challenge us, they test you and they push you to your limit and, I don't know, I just don't know what to do with them anymore. (P7, 5-15).....

Gaps in mental health resources

- So, we called in the morning, we left the message with psychiatry and they said: "Yeah we'll round in the morning." And then I never heard from them, they never showed up. I called again and they said "We're gonna round this afternoon." So, I think we spend a lot of time waiting for them and not knowing when they're gonna come and not having a lot of support with taking care of the children. (P10, 28-30).

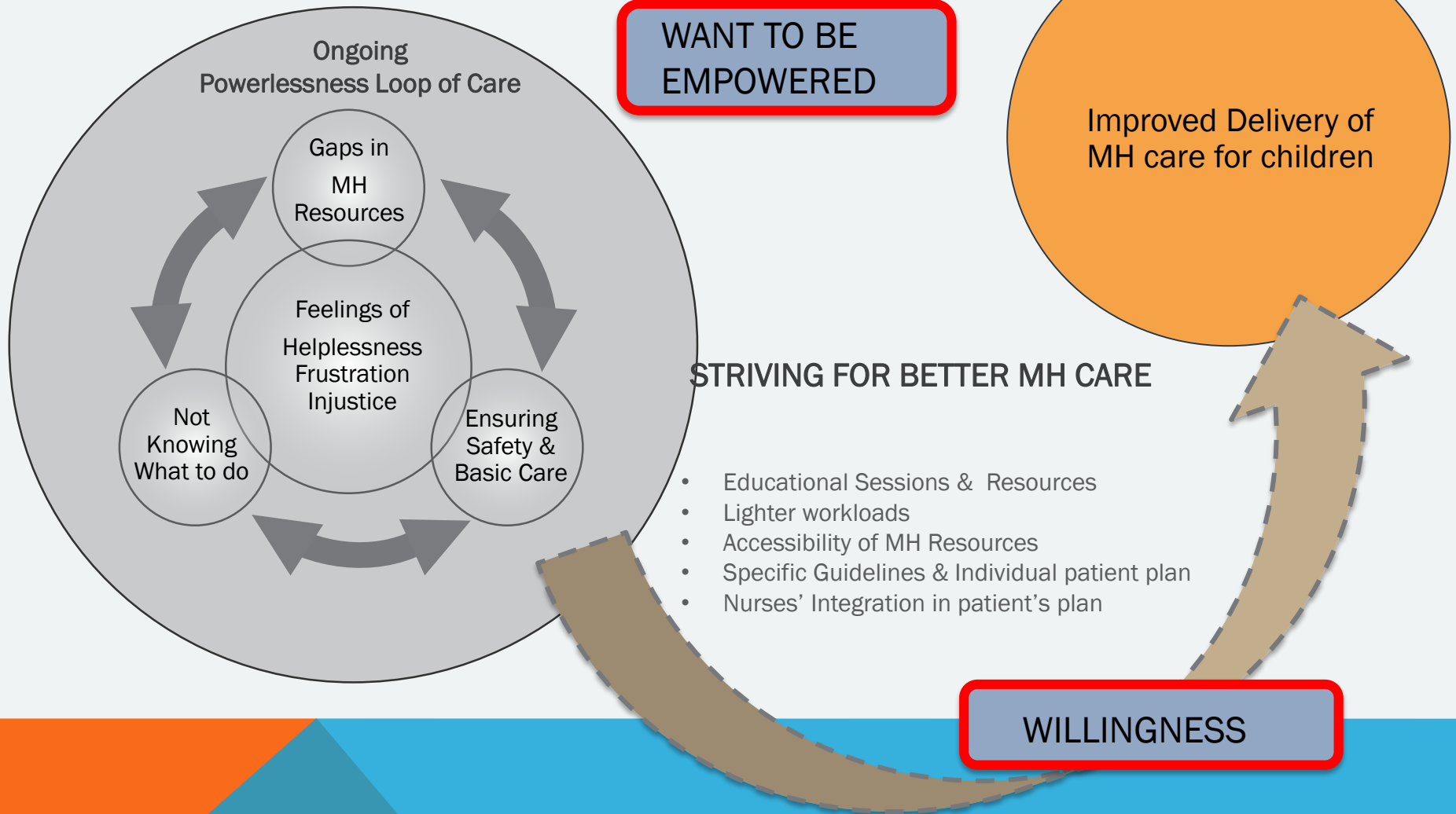
Ensuring safety and basic care

- "Your job is to keep them safe, it's to protect them from harm" (p4, 305)

Feelings of helplessness, frustration and injustice

- "We feel frustrated because we feel that here in surgery is not the right place. It's not that the child bothers me, but... I feel that we don't have the necessary tools" (P1, 21-24).

Results & Discussion



Nurses striving to break the Ongoing Powerlessness Loop of Care when caring for children with MH disorders hospitalized on non-psychiatric units

IMPLICATIONS

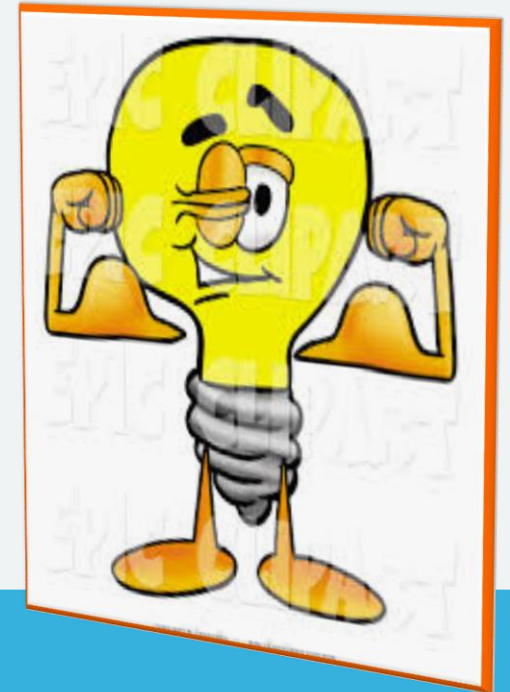
Strategies to Empower Nurses

- ✓ Access to information:
 - Use of an individualized therapeutic care plan

- ✓ Access to support:
 - Foster better collaboration between MH care team, unit nurses and nurse leaders
 - Monthly debriefing forum

- ✓ Access to resources:
 - Implement new advanced practice nursing role of the CNS in psychiatry

- ✓ Opportunity to Learn & Grow:
 - Knowledge Transfer strategies



(Davies, Wong, & Laschinger, 2011; Kanter, 1993; Laschinger & Read, 2014; Nisell & Ridelius, 2007)

IMPLEMENT NEW ADVANCED PRACTICE NURSING ROLE IN PSYCHIATRY

Model of collaborative practice

In Quebec: special permit by Order of nurses of Quebec (ONQ) for evaluation of psychiatric diagnoses based on DSM–V with supervision by psychiatrist

OBJECTIVES

- **Increase the accessibility of care and services** for off services pediatrics patients and families with mental health diagnoses.
- **Improve the delay in support from psychiatric services.**
- **Improve continuity of care and outcomes of care.**
- Facilitate links between patients-families, psychiatric and pediatric health care teams.
- **Provides recommendations to the nursing team, based on clinical assessment and expertise, for the development or modification of the therapeutic nursing plan.**
- **Increase knowledge, clarify roles and improve pediatric nursing practice specifically in mental health assessment and management.**

LIMITATIONS OF THE STUDIE & FUTURE RESEARCH

Limitations

- Small sample of pediatric nurses of one hospital

Future Research can include:

- Explore the efficiency of the empowering strategies after implementation
- Explore MH care team's perspectives
- Explore stigmatization in nurses and its impact on MH care

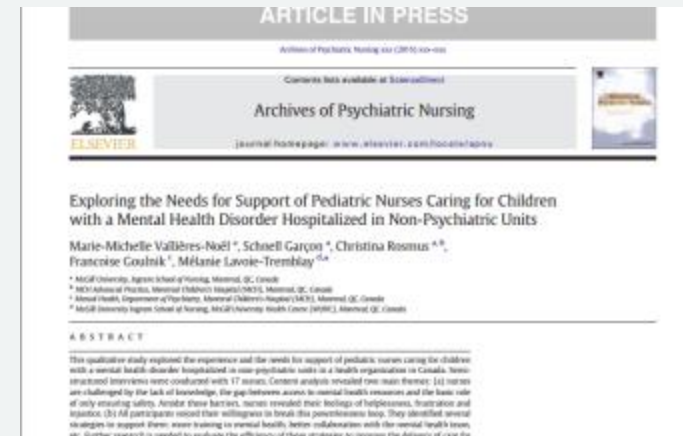
CONCLUSION

This study emphasizes the importance of empowering nurses to better care for children with a MH disorder hospitalized on non-psychiatric units and suggest empowerment strategies in professional, educational and organizational areas.



KNOWLEDGE TRANSFER ACTIVITIES

1. June 2015: Congrès Mondial du Secrétariat international des infirmiers et infirmières de l'espace francophone (SIDIEF).
2. August 2015: Paper in press in Archives of Psychiatric Nursing
3. October 2015: National conference of the Canadian Federation of Mental Health Nurses (CFMHN)
4. Inform the development of the role of the advanced practice nurse in psychiatry at the MCH .



tenki ขอบคุณคุณ takk спасибо kam sah hamnida
дзякуй hvala 1111 dhanyavadagalu tack
gracias djere deuf blagodaram mési xièxie tanemirt
arigatô manana diolch akun bedankt rahmet enkosi mochchakkeram trugarez dank je
ačiū grazzi ありがとう kia ora dankon děkuji
tau barka mamnun gràçie kiltos spas
teşekkür ederim bayarlalaa obrigada tapadh leat chnorakaloutioun
sagolun murakoze taiku mahalo didi madloba sukriya obrigado chokrane rahmat dakujem
terima kasih misaotra welain mercé najis tuke اركش
asante grazie nandri 謝謝 mersi köszönöm nanni vinaka
mauruuru matondo cam on ban go raibh maith agat merci paldies ngiyabonga

Exploring the Experience and the Needs of Pediatric Nurses Caring for Children with a Mental Health Disorder Hospitalized on Non-Psychiatric Units

Questions or Comments?



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