

“How are you not snapping her in half?”

Parent/carers’ perceptions of respiratory physiotherapy on PICU: a service evaluation.

Meehan C¹; Shkurka E²; Shannon H²;

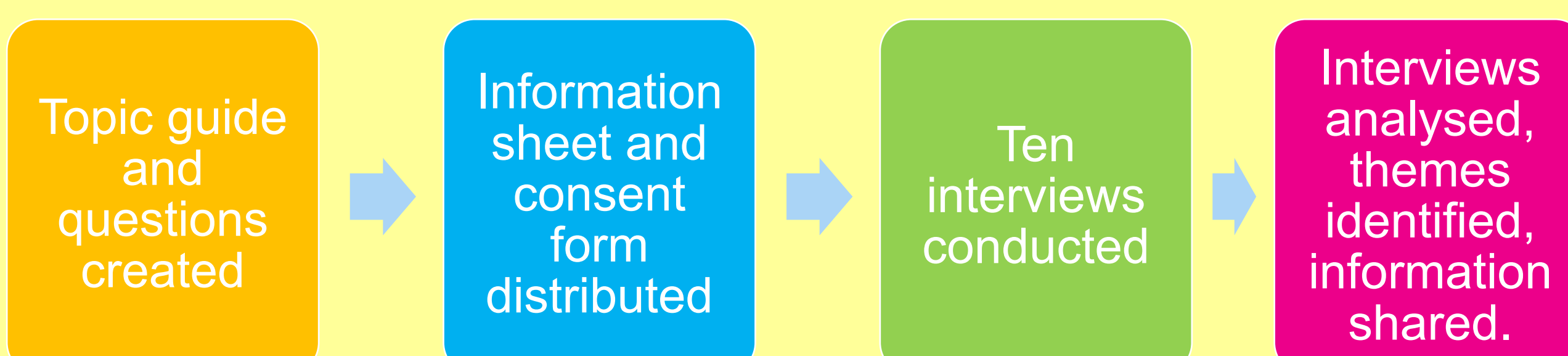
¹ Evelina London Children’s Hospital, Guy’s and St Thomas’ NHS Foundation Trust,

²UCL GOS Institute of Child Health, London UK

Contact: chloe.meehan@gstt.nhs.uk

Introduction/background.

Respiratory physiotherapy is provided to children in intensive care and includes a variety of manual techniques and use of equipment to assist with secretion clearance, improve areas of lung collapse and help with the child’s work of breathing. Ensuring that parent/carers are informed and involved in their child’s care is part of the ethos of intensive care and the aim of the study was to explore parental/carer perceptions of respiratory physiotherapy on PICU.



Methods.

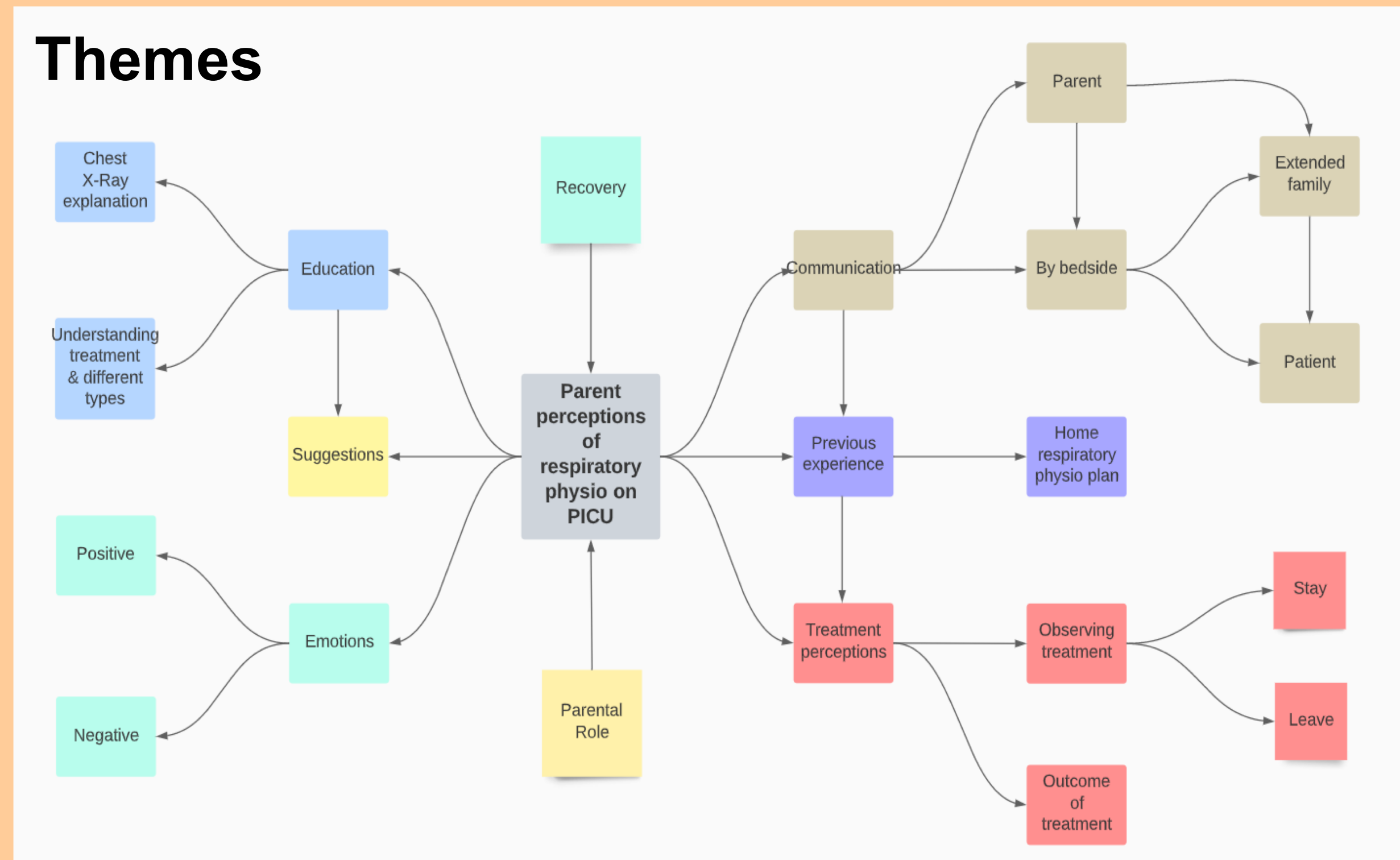
A service evaluation involved semi-structured interviews conducted in a paediatric tertiary hospital in London. Parents/carers were approached if their child had received respiratory physiotherapy during an intensive care admission. Interviews were transcribed and analysed using thematic analysis.

Table 1: Characteristics of parents interviewed and their children.

	Categories	Number (%)
Parent/care role	Mother and Father	3 (30%)
	Mother	6 (60%)
	Father	1 (10%)
Ethnicity/nationality (as stated by parents)	British	7 (70%)
	British/Irish	1 (10%)
	European	2 (20%)
Location of interview	Family room	3 (30%)
	PICU	6 (60%)
	Ward	1 (10%)
Patient information		
Gender	Male	6 (60%)
	Female	4 (40%)
Condition	Neuro disability (CP, SMA, Patau syndrome)	5 (50%)
	Cardiac (Cardiomyopathy, HLHS)	2 (20%)
	Respiratory (Pneumonia, bronchiolitis)	3 (30%)
Respiratory status at time of interview	Self-ventilating	6 (60%)
	Intubated	3 (30%)
	Non-invasive ventilation	1 (10%)
Respiratory status at time of physiotherapy	Intubated	10 (100%)

Results.

Ten parents/carers were interviewed, eight themes were identified: communication, previous experience, treatment perceptions, education, emotions, parental role, recovery and suggestions.



Theme: previous experience. ‘And chest physio in the PICU has been like such an important part of his treatment...but I feel like it’s an undervalued part of his care....it’s quite difficult to explain to people isn’t it?’

Theme: communication. ‘So it’s a bond of trust. The way they tell things, yeah, makes you very comfortable.’

Theme: Treatment perceptions. ‘Not thinking that it is hurting because she would fall asleep..... but you think? She looks like she’s being pummelled a bit.’

Conclusions.

Parents/carers valued the role of physiotherapy in PICU, and most felt informed as to the nature of treatments. Further resources could help prepare parents/carers for observing physiotherapy.

References: Basch C (1987) Focus group interview: an under-utilised research technique for improving theory and practice in health education. *Health Education Quarterly* 14, 411–418.
Geoghegan S, Oulton K, Bull C, Brierley J, Peters M, Wray J. (2016) The Experience of Long-Stay Parents in the ICU: A Qualitative Study of Parent and Staff Perspectives. *Pediatr Crit Care Med*. 2016 Nov;17(11):496-501