

Research Article

The Children's Council as a Mean of Participation in a Hospital

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Abstract

As part of a global strategy of incorporating the patient's voice into the health decision-making process in our hospital, we created stable participation bodies consisting on a Family Council, a Youth Council and a group of patients' associations. In addition, the creation of a Children's Council composed of boys and girls under 12 years-old, complemented the previous bodies of participation in the hospital. The objective of this report is to describe the implementation children's participation in the hospital through a council format. A group of nine children worked on the characteristics that a children's hospital should have, using the Lego Serious Play methodology. Different aspects raised from the workshop like new structures to improve the adaptation of the hospital environment to the children's needs; as well new comfort areas or elements of optimal rest, which facilitate the healing process, among other aspects. This formula allows young children to participate in the improvement of services, highlighting those aspects that would facilitate their journey through the hospital.

Keywords: Children's hospital; Patient's participation; Lego serious play

Abbreviations and Acronyms

LSP: Lego Serious Play

Introduction

Patient participation and empowerment is crucial in order to put patients at the center of the health system [1,2]. Participatory and co-design methods bring together patients and health professionals and increase their involvement in the health decision-making process [3,4]. However, examples to improve engagement have been limited to patients and families or healthcare professionals separately [5]. In pediatric settings, listening to children and considering what they say is not a frequent practice. It is rare for parents and health professionals to take appropriate steps to involve children in the decision-making process to meet their needs more effectively. Therefore, the decision-making process in the care of the pediatric population is a complex issue and should take into account the health professional, the family or main caregiver and the child [6,7]. The Convention on the Rights of the Child of the United Nations (<https://unicef.org.uk>) recognizes play as a children's right. In addition, the European Charter of Hospitalized Children stresses the importance of the child's need to play [8]. Play during childhood is a key element for the children's development and learning process. It helps people to develop new abilities, increase social skills, and obtain emotional support, among other aspects. Even more, when children are in the hospital, play reduce anxiety

and facilitates their enjoyment [9]. Play during childhood can be free or guided. Free play is a kind of play in which there is no goal and adults do not interfere. In contrast, guided play refers to a type of play in which the adult sets a context for learning, with an objective [10]. The Sant Joan de Déu Children's Hospital in Barcelona has stood out for its capacity for change and adaptation to the needs of the population, including the empowerment and participation of patients and their families in the healthcare management, as well as their co-responsibility in the development of health services [11]. As part of a global strategy of incorporating the patient's voice into the health decision-making process in our hospital, we created stable participation bodies, such as a Family Council, a Youth Council and a group of patients' associations [12]. In addition, the creation of an Infant Council composed of boys and girls under 12 years-old, complemented the previous bodies of participation in the hospital. This report focuses on the implementation of a workshop with the members of the Infant Council as part of an umbrella project of patients' participation and empowerment as a means of participation in a children's hospital.

Materials and Methods

During the first workshop of the Children Council, conducted in November 2019, a group of boys and girls under 12 years-old, worked on the characteristics that a children's hospital should have, using the Lego Serious Play (SLP) methodology. This is a problem-solving process in which the facilitator ask a series of questions and the participants build 3D LEGO models in response (<https://www.lego.com>). During the workshop, participants were asked to think about their ideal hospital. The challenge was to build this hospital or a part of it. Then, participants shared their constructions and gave the group an explanation about what they wanted to build and why. The group consisted on nine boys and girls, from six to 11 year-old. Parents were also in the room observing the development of the session. Inclusion criteria for the selection of participants were being a patient of the hospital, and parents' agreement in their involvement in the workshop. Parents were contacted by phone and e-mail. All parents signed an informed consent about their children participation

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and the confidentiality in the treatment of the shared information. The methodology used also followed ethical principles stated in the Declaration of Helsinki [13]. During a two-hour period, we worked on how the ideal children hospital should be. A nurse expert in the LSP methodology conducted the workshop with the aid of a physician. There was also an observer from the hospital staff. Table 1 presents the content and steps of the workshop. After introducing themselves, children reacted to the workshop challenge following the different steps of the LSP method. They first explored and recognized the different pieces that helped them to concrete abstraction and then, constructed and represented their ideas [14,15]. Figure 1 shows some pictures from the workshop.

Table 1: Content of the workshop.

Content area	Description
Welcome	Welcome to the workshop and introductions Children introduce themselves and begin to share with others
Objectives	Setting of the objectives and characteristics of the workshop
Step 1. Beginning	Question development. Challenge identification
Step 2. Construction	Children construct their ideal hospital or a part of it
Step 3. Presentation	Children present their constructions
Step 4. Discussion	Children share their ideas also with parents
Wrap-up	Conclusions with the main results from the workshop
Close	Acknowledgments and messages for improvement

hospital should have and pointed out areas for improvement: They contributed with ideas of new structures to improve the adaptation of the hospital environment to their needs. They also incorporated solutions to new comfort areas, highlighting elements of optimal rest, which facilitate the healing process.



Figure 2: Constructions of the ideal hospital.



Figure 1: Pictures from the workshop.

Table 2: Children's expressions.

"What about outdoor terraces?"
"With beautiful trees, flowers and plants"
"With gardens on the different floors"
"Let some lights on at night in any corner of the room that doesn't bother you, so you don't get scared"
"With a flower that has a button to be able to play music"
"With a pool that can be transported with a caravan"
"With transparent walls and bell on the ceiling to let the light in"
"With nice spaces for families to stay and rest"

Results

Children created different constructions representing how the ideal hospital should be. Figure 2 shows pictures of some of these constructions. They highlighted the importance of different aspects such as having plants and flowers, good views from the room, clear colors and some elements like a swimming pool for children, TV screens and playrooms, among other leisure aspects. Other findings were that every participant liked blue and white colors, as well as elements of transparency. Open spaces prevailed, with buildings without walls, many windows, terraces and gardens. Children who have been hospitalized before placed value on construction and physical spaces. Other important elements were safety, access, and comfort. Such elements were alarms to warn if a child is unwell, the presence of caregivers in the playrooms, or a room for families, among other elements. Table 2 shows some of the children's expressions while sharing their constructions. The members of the Children's Council agreed on the characteristics that a children's

Discussion

The Children's Council is a participation body that allows children to collaborate in the improvement of services, highlighting those aspects that would facilitate their journey through the hospital. Together with other participation methodologies, this is an innovative initiative to incorporate patients in the decision-making process and place them at the center of care [15]. The LSP is an appropriate method in line with the ages of the children. Innovative opinion and expression methods were generated for children from six to 12 years of age in collaboration with their families. This facilitated the ability to imagine solutions and allowed children to express their opinion. Favoring children's game facilitated greater involvement and motivation to achieve the session's objective [16]. Although play is a methodology that takes place mainly in educational areas, it is also used in other settings such as health [17]. The intervention is designed for children to use collaborative games based on the Lego pieces. In this way, the child's learning with his/hers peers is motivated according to their interests and promoting a cooperative approach [18]. Lego is a multilevel, predictable and systematic construction methodology. Provides structured and motivating tasks to be easily implemented [19]. It is designed to make social interactions interesting and allows participants to be in environments where they learn to cooperate [20]. As a limitation of this experience, the findings extracted from the workshop refer exclusively to the participants and cannot be generalized to other children. However, these findings served to recommend actions for improvement in different hospital areas. The

workshop was held before the state of pandemic. Since the COVID pandemic, telemedicine has been established as a useful tool in health systems [21]. Patient satisfaction with video or remote consultations compares favorably with face-to-face visits, and this situation supports the use of telemedicine as an alternative and complemented to face-to-face consultations [22]. This changed the health services organization in our hospital concerning some of the recommendations extracted from the workshop about the characteristics and elements of the physical spaces. In this new pandemic situation, and as a stable body of participation in the hospital, members of the Children Council also expressed their feelings and needs to help overcome the situation.

Conclusion

- Young children can participate in the health decision-making process.
- SLP constitutes an appropriate method to incorporate the voice of the young patient in the improvement process of health services.
- The Children's Council is a stable body of participation formula that takes into account the patients' view in the health centers as a means of patient's empowerment.

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