Psychosocial standards review and how one hospital is implementing the standards to improve care and educational opportunities

THE UNIVERSITY OF TEXAS Children's Cancer Hospital®

Sheila Brown, MPS, CCLS Kris Frost, M.Ed

The University of Texas MD Anderson Children's Cancer Hospital

Children and families who undergo cancer treatment are often at risk for psychosocial issues. Cancer treatment can have profound effects on the growth and development of pediatric patients (Brand, S., Wolfe, J. & Samsel, C., 2017). The services offered in each institution may vary, so the ability to create standards potentially benefits all children and families who undergo cancer treatment.



Learning Objectives

- 1. Share the creation of the Psychosocial Standards
- 2. Review the standards
- 3. Understand how the standards relate to education and child life services
- 4. Learn how one program is examining and implementing the standards with a multidisciplinary team

Development and history of the psychosocial standards for children with cancer and their families

In March of 2012, a congressional symposium that included psychosocial experts met and discussed the need for children and their families to have universal psychosocial services (Mattiemiracle/historystandards).

These experts:

- Conducted a systematic review
- Engaged in discussions
- Developed 15 evidence-based standards
- Formed work groups
- Invited additional reviewers
- Received feedback

Creating a team to review and implement the Creation of task forces standards

Understanding the guidelines' value to the psychosocial care of children and families, the Children's Cancer Hospital created an interdisciplinary psychosocial team to review each standard. The standards became the inspiration for the psychosocial team.

Educators and child life specialist who are experts in the education and coping of hospitalized children were active participants on the team and are leading the way in improving care for children with cancer, siblings and families.

The Interdisciplinary Psychosocial Team consists of:

- Child life specialists
- Education liaisons
- Nurses
- Psychologists
- Chaplains

- Translators
- Physicians
- Music Therapist
- Arts in Medicine

Psychosocial Team responsibilities

- Meet bi-weekly
- Review each standard
- Examine current practice
- Identify weakest standards/growth opportunities
- Create task forces
- Research relevant materials
- Develop and implement new programing to meet the standard
- Continue to review each standard and implement appropriate programming to advance quality care

The psychosocial team identified three standards which required immediate attention to improve services. Task forces were created for each of these standards and charged with reviewing current practice, brainstorming improvements and implementing the improvements.

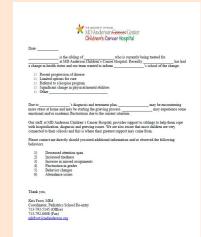
The psychosocial team will also follow these guidelines and review the remaining 12 standards. Once all standards are reviewed and improvements are implemented, the standards will be reviewed bi-annually by a group on the psychosocial team to ensure they continue to be met and improvements are continuing to support children and families.

Standards addressed relevant to education

Standard 10: Siblings of children with cancer should be provided with appropriate supportive services. Parents and professionals should be advised about ways to anticipate and meet siblings' needs, especially when siblings are unable to visit the hospital regularly.



Standard 11: Academic continuity and school reentry support as a standard of care in pediatric oncology.





Current initiatives

- Developing school communication forms for patients and siblings
 - Diagnosis
 - Emergent needs or special issues
 - End of life
- Developing sibling assessment and programming
 - Siblings intake form
 - Tracking data
 - Sibling and family events
 - Sibling recognition

Conclusion

It is crucial that psychosocial professionals including education specialists and child life specialists collaborate to offer the highest quality support and psychosocial care to pediatric patients, siblings and families. The standards could guide educational programming that provides quality care to patients and families. Reviewing the standards and implementing them can help ensure that programs are achieving the highest standards for patient and family care (Scialla, et al., 2017).