

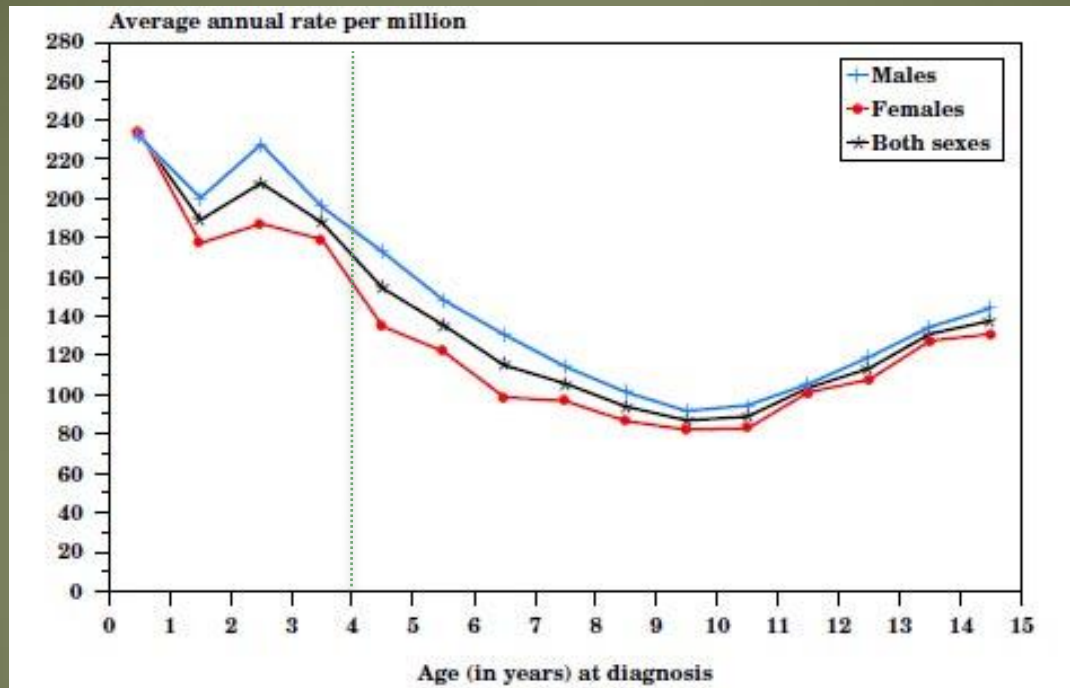
Implementation and Early Evaluation of the Beanstalk Program on the Haematology/Oncology/BMT Program at SickKids

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Why Oncology?

- ~ 1310 new diagnoses (0-19yrs) each year
- Malignancies of infancy ~ 10%



From: <http://seer.cancer.gov/publications/childhood/infant.pdf>

Prolonged hospitalizations

- Challenging, complex and sometimes lengthy treatment regimes
 - extended or repeat hospital stays

Prolonged hospitalizations

- Social and exploratory passivity
- Developmental regression
- Inhibited perception of ability to move
- Separation anxiety
- Irritability, Distractibility
- Minimal vocalizations

Contributing factors

- Sterile environment
- Exploratory play becomes limited
- The environment is either over or under stimulating.
- Loss or change in the parental role

What is Beanstalk?

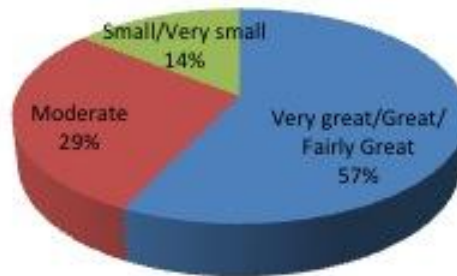
- Developmentally-focused culture of care for children 0-3 years of age
- The Beanstalk Program was developed at Sick Kids in 2002 by the Multi-Organ Transplant team
- Began as a joint initiative: PT, OT, Speech, Child Life and Nursing

Parental feedback

- Measure of Processes of Care (MPOC-20)
 - (revised to 24)

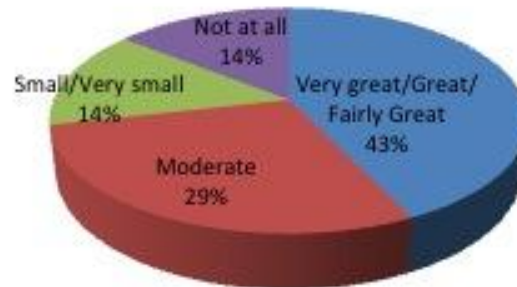


...looks at the needs of your whole child (e.g. at mental, emotional, and social needs) instead of just at physical needs?



Parental feedback

... have information available about your child's condition and impact on your child's development (e.g. its causes, how it progresses, future outlook)?



Who is eligible?



- All children 3 years and under
- Oncology / HSCT Inpatients
 - Admitted to hospital for ≥ 3 weeks
 - Length of stay known to be > 3 weeks

The 3 C's – Core Principles



Create a space

Communicate the plan

Celebrate milestones

CREATE

WHY?

- Fragmented sensory experience
 - disruptive, chaotic, monotonous, unpredictable
- Support emerging organization, and foster growth and development

CREATE

HOW?

- Daily schedules
 - Day/night patterns
- Age appropriate music
 - Radios/CD players
- Developmentally appropriate toys
 - (i.e. mobiles, mirrors, etc.)
- Safe and appropriate equipment
 - (tumbleforms, high chairs, mats, benches, etc.)



COMMUNICATE

WHY?

- Parent-child interaction is negatively impacted
- Fear, guilt, grief, depression, exhaustion, inexperience, separation
- Consistency

COMMUNICATE

HOW?

- Parental education
- Nursing education
- Volunteer education
- Interdisciplinary team



CELEBRATE

WHY?

- Encourage parental attachment
- Encourage increased involvement of families in the daily care of their child
- Empowering capabilities of parents

CELEBRATE

HOW?

- Celebrating milestones and "normal" life experiences and accomplishments
 - Examples: cameras, photo albums, scrapbooks and plaster material for molds



Initial Steps

- Nipissing District Developmental Screen
- Bins
 - Developmentally appropriate toys
 - Developmental tip sheets
 - Not age-based, but skill/developmental level-based



Working Together

Nurses

- Patient identification
- Notify the Child Life Specialist
- Explain and promote the program
- Culture of developmentally-focused care
 - i.e. open blinds, turn off television, help promote scheduled nap times (nap signs), get children out of bed, onto mats, etc.



Working Together

Child Life Specialists

- Usually first contact
- Enroll new patients in the program
- Nipissing District Developmental Screen
- Assemble bins
- Explain and promote the program

Working Together

PT/OT/Speech

- Assemble Bins
- Periodically reassess
- Explain and promote the program
- When required, provide hands-on treatment



Working Together

Residents, Fellows, NPs, Physicians

- Patient identification
 - 3 years or under, and planned admission 3+ wks
- Explain and promote the program
- Referral to PT/OT/Speech if concerns with the child's development

Changing the “Culture of Care”

This is not a “program”

Changing the way we function

Changing the standard of care to include a focus
on developmental care



Early Evaluation

- 8 families interviewed
- Liked the developmentally-appropriate toys and handouts
- Liked the “bin” concept
- Felt the handouts were too detailed
- Wanted hands-on time from professionals

Future Directions

- Modifications of the educational handouts
 - Including photos
- Program Evaluation
 - Staff and Parents

Thank you



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