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Nurses' response to parents' speaking-up efforts to ensure their hospitalized child's safety: An attribution theory perspective

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Background: Participation of parents in maintaining their child's safety is shown to reduce the incidence of and risk of clinical errors. Unless nurses respond appropriately to parents' safety alerts, this potential source of support could diminish.

Aim: Aim of this study is to understand how attribution processes (control and stability), which the nurse attributes to parental involvement in maintaining child safety, determine the nurse's response to a safety alert.

Design: A 2 (controllability: high vs. low) × 2 (consistency: high vs. low) factorial design.

Methods: Data were collected during the period 2013–2014 in pediatric wards. Four variants of scenarios were created corresponding to the different combinations of these variables. A total of 126 nurses read a scenario and completed self-report questionnaires measuring their response to the parent's safety alert. Additional data were collected about the manipulation check, safety norms in the ward, and demographic variables. Data were analyzed using analysis of variance.

Findings: Results showed a main effect of stability, and a significant two-way interaction effect of stability and controllability, on a nurse's tendency to help the parent and fix the safety problem. Nurses who attributed lower controllability and lower stability to the parent's behavior tended to help the parent more than in the other three conditions. Further, safety norms were significantly related to nurses' response.

Conclusion: These findings contribute to the understanding of antecedents that affect nurses' responses to parents' speaking-up initiatives: whether nurses will reject or heed the alert. Theoretical and practical implications for promoting parents' engagement in their safety are discussed.

Biography

Sondos Bsharat is a PICU Nurse, Clinical and CPR Instructor, Parental Guide on various topics. Her research focuses on "The issue of parents' participation in the treatment of their hospitalized child, particularly in maintaining the child's safety".

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