

Beyond illness



A qualitative exploration of talking about the future in pediatrics with IMPACT

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- No conflict of interest



IMPACT: IMplementing Advance Care planning Tool

Conversation guide for professionals:

conversation with child and parents



Step 2: Explorations

2.1 Exploring identity

2.2 Exploring values and experiences

2.3 Exploring expectations for the future

Het Belang Rijk

DEET BEN IK

DEET MAAK IK DEET

DEET IS MEIN MEENS

SAMEN ONDERNES

7. Wat hopen jullie samen mee te maken?

Alleen dank ik u...

Hog respect van iemand durven stellen?

Alleen weg ik me al...

de dood van jullie kind/ouder? Wat denken jullie dan?

van ons kind, onze zuchtouwe

met de zorg en behandeling van ons kind/ouder?

Alleen dank ik u...

Aim

To identify the **experiences, perspectives and needs** of **children with life-limiting conditions, their parents and health care providers** (HCPs) when conducting **advance care planning conversations** with

IMPACT on:

1. Content
2. Structure
3. Lay-out

Method

- **Qualitative interview study** using thematic analysis
- **Focus groups:** reading the IMPACT content



Children with life-limiting or life-threatening illnesses

- Different developmental fases/ages (4-6;7-11;12-18 years old)



Health care providers

- Academic/local hospitals
- Home care/hospice care



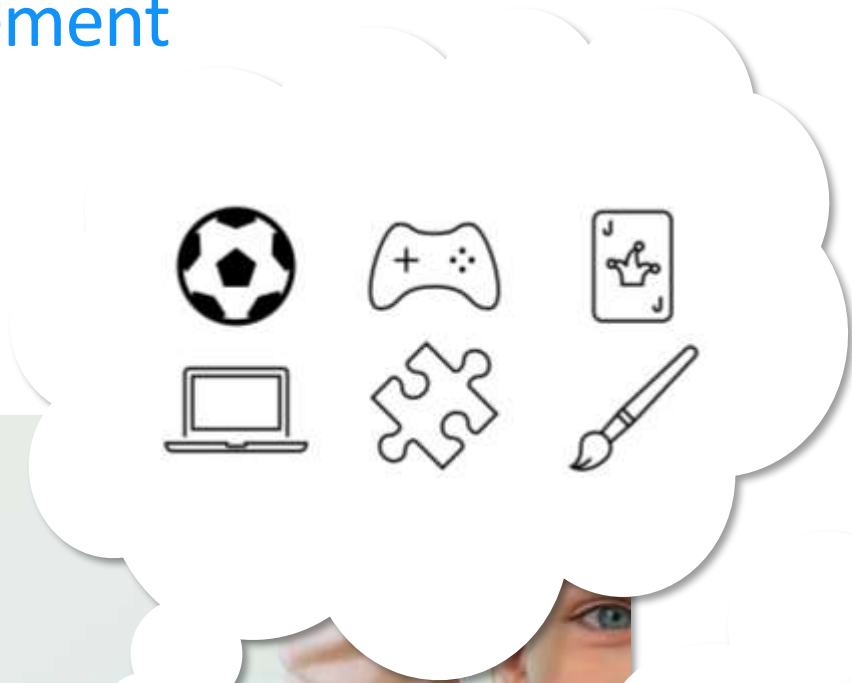
Parents

- Different disease(s)/ trajectories
- With different cultural and religious backgrounds

Interviewing children



Age-appropriate involvement



Background characteristics

| | Children (n=8) | Parents (n=18) | HCPs (n=16) |
|----------------------------|----------------|----------------|-------------|
| Sex | | | |
| • Female | 5 | 10 | 15 |
| • Male | 3 | 8 | 1 |
| • Intersex | 0 | 0 | 0 |
| Age (in years) | | | |
| • 4-6 | 0 | 0 | 0 |
| • 7-11 | 3 | 0 | 0 |
| • 12-18 | 5 | 0 | 0 |
| • 30—50+ | 0 | 18 | 16 |
| Religion | | | |
| • Roman catholic | 1 | 0 | 0 |
| • Protestantisme | 1 | 2 | 6 |
| • Humanism | 0 | 0 | 1 |
| • Hindoeism | 0 | 0 | 1 |
| • Islam | 1 | 0 | 8 |
| • None | 5 | 15 | 0 |
| • Other | 0 | 1 | 0 |
| Cultural background | | | |
| • Dutch | 7 | 16 | 16 |
| • Indonesian | 0 | 0 | 0 |
| • Turkish | 0 | 0 | 0 |
| • Marrocan | 1 | 0 | 0 |
| • Surinamese | 0 | 0 | 1 |
| • Antillean | 0 | 1 | 0 |
| • Other | 1 | 1 | 0 |

Background characteristics

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| • Antillean | 0 | 1 | 0 |
| • Other | 1 | 1 | 0 |

Spiritual
counselors

Baseline characteristics

| | Children | Parents | HCPs |
|--------------------------------------|----------|---------|------|
| Disease (HCP: speciality) | | | |
| • Cancer | 0 | 5 | 6 |
| • Other | 8 | 13 | 10 |
| Disease staging | | | |
| • After diagnosis | 1 | 0 | |
| • Stable disease | 6 | 3 | |
| • Detoriation | 1 | 3 | |
| • Preparing for end of life | 0 | 9 | |
| • Deceased | 0 | 3 | |
| • Other (recovered) | 0 | 3 | |
| Function | | | |
| • Nurse (specialist) | | | 11 |
| • Doctor | | | 5 |
| Working experience (in years) | | | |
| • 0-5 | | | 3 |
| • 5-10 | | | 4 |
| • 10+ | | | 9 |
| Setting | | | |
| • Academic hospital | | | 4 |
| • Local hospital | | | 9 |
| • Home/hospice care | | | 3 |
| IMPACT experience | | | |
| - Yes | 1 | 2 | 15 |
| - No | 7 | 16 | 1 |

Results

Content

Structure

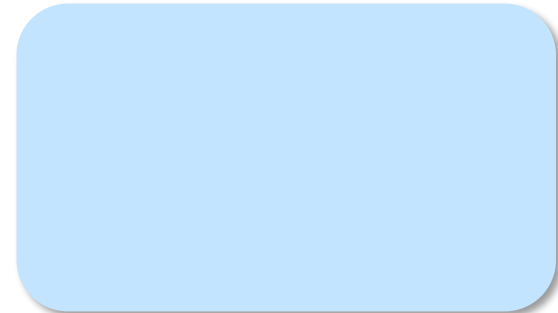
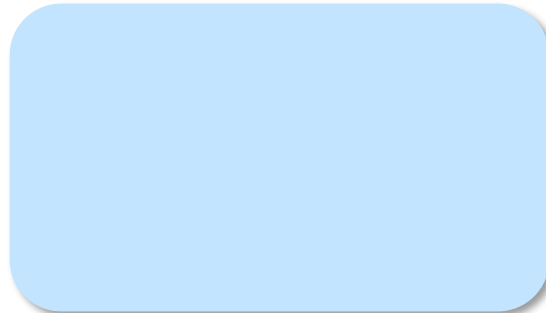
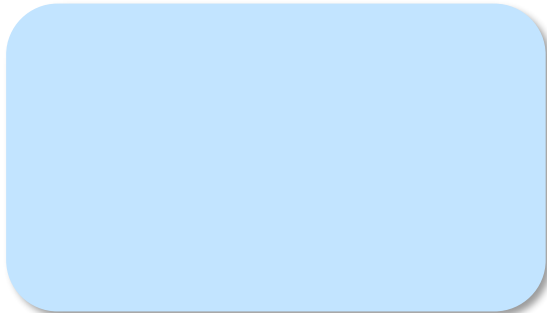
Lay-out



N=8



N=18



N=16



Results

Content

Structure

Lay-out



N=8



N=18



N=16

All participants value
the content of
IMPACT.

Results

Content

Structure

Lay-out



N=8

- Need to tell about who they are, what they like



N=18

- Need to clarify the goal of IMPACT, "hidden agenda"



N=16

- Repetition in themes, summaries

Results

Content

Structure

Lay-out



N=8



N=18



N=16

Talking about the future is experienced as:

1. Difficult
2. Important, to prepare them on future worst-case scenario's

Results

Content



N=8

Talking about the future is experienced as:

1. Difficult
2. Important, to prepare them on future worst-case scenario's



N=18



N=16

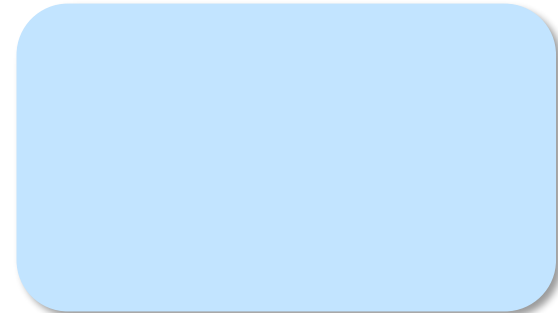
Structure

All participants feel a need to a reorganise IMPACT themes:

- 1) Who we are
- 2) What we go through
- 3) What we wish for
- 4) Where we go to

Trusting the HCP's

Lay-out



Results

Content

Structure

Lay-out



N=8



N=18



N=16

- “Boring”
- Need for more age-appropriate lay-out

Appreciate the current lay-out of IMPACT, need for more age-appropriate lay-out

Implementation

Het Belang Rijk

This is me

What I go through

What I wish for

Where we go for

DIT MAKEN WE MEE

1. Bedenk een woord dat het best past bij wat jullie meervoud is.
2. Als jullie tweeën denken wat worden jullie dan?
Als vader/wa is: _____ Als moeder/wa is: _____
3. Wat hopen jullie samen mee te maken?

SAMEN ONDERWEG

Dit vinden wij belangrijk voor de zorg en behandeling van ons kind/ouder/broer.

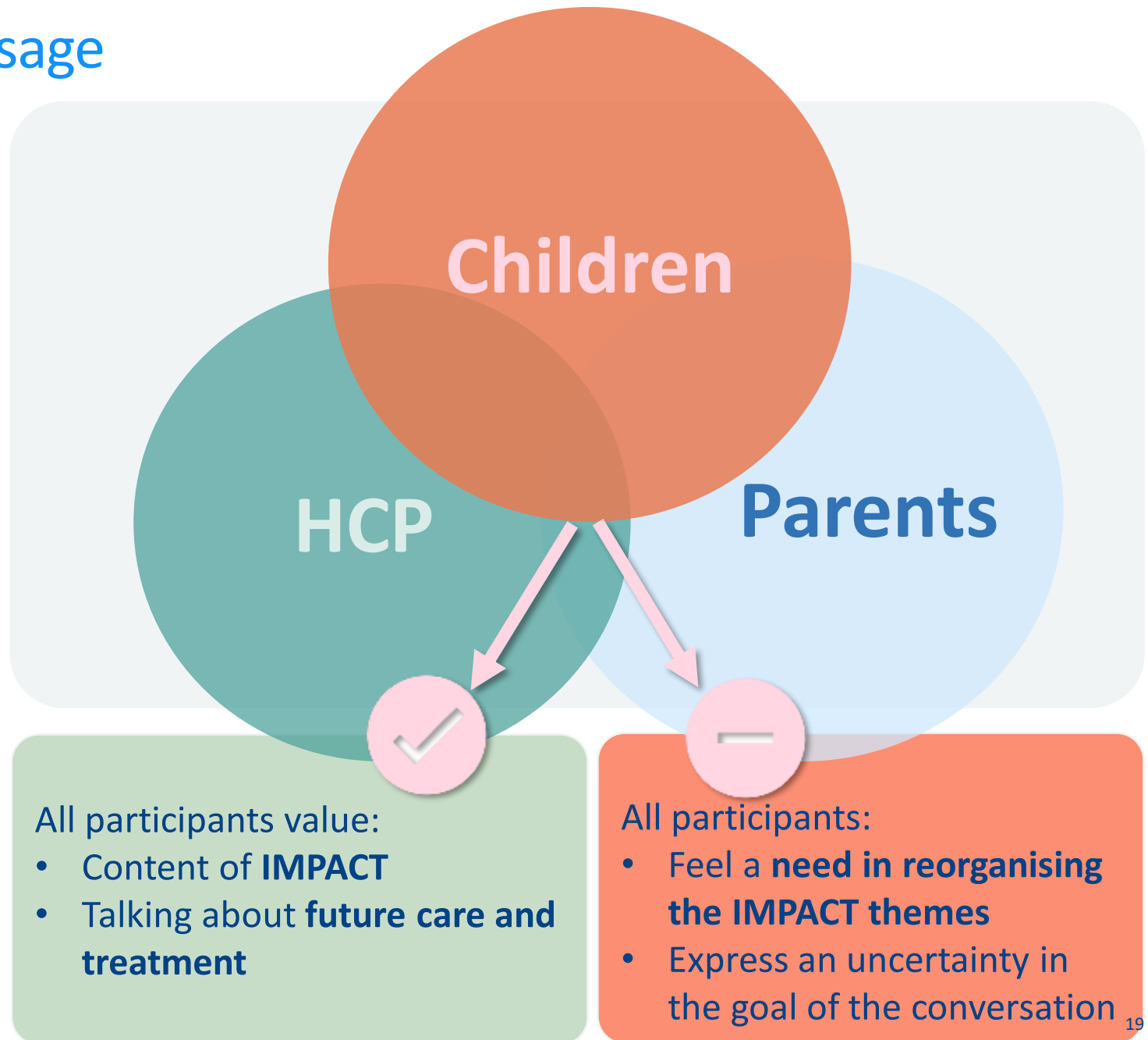
Als vader/wa is: _____ Als moeder/wa is: _____

Discussion

- **Selection/population bias**
 - Lack of children with cancer, 4-6 years old, preparing for EOL
 - Lack of multiple religious and cultural backgrounds
 - HCP with experience in IMPACT
- **Future research: CO-IMPACT**
 - Qualitative and quantitative evaluation of advance care planning conversations with the new developed IMPACT materials



Key message



Thank you!

