CHILD LIFE SERVICES IN HEALTHCARE SETTINGS

Child life services in healthcare settings strive to promote optimum development of children* and their families, to maintain normal living patterns and to minimize psychological trauma. As integral members of the healthcare team in both the ambulatory care and inpatient settings, child life staff provide children opportunities for gaining a sense of mastery, for play, for learning, for self-expression, for family involvement and for peer interaction.

I. Rationale for Child Life Services

A. A child’s healthcare encounter can at times be a positive growth experience when truly comprehensive care is given. Such comprehensive care by definition includes child life services staffed by appropriately educated and trained personnel.

B. Interruption of normal life experiences can jeopardize growth and development.

C. Physical limitations of illness and healthcare encounters have the potential to invite dependency and can erode self-esteem.

D. Anxiety and stress related to illness, separation, hospitalization, and medical encounters interfere with a child’s optimal response to medical treatment and care.

II. Essential Goals of Child Life Services

These goals require qualified personnel who are capable of structuring both a range of therapeutic activities and a physical environment that is appropriate and receptive to different age groups.

A. To Assess Coping Responses and Needs of Children and Families to Healthcare Experiences

1. Review comprehensive information related to all assigned patients on a daily basis.

2. Utilize above information to develop priorities for intervention.

3. Develop plans to address assessed needs of child and family.


B. To Minimize Stress and Anxiety for the Child

1. Provide abundant play opportunities and other experiences that encourage expression of feelings and promote a sense of mastery and understanding of healthcare experiences.

2. Support the child’s relationship with parents and other family members by:
• involving parents in child life plan
• promoting policies which encourage unrestricted parental visiting, rooming-in, and parental presence during stressful events
• providing opportunities for parents to actively continue their parenting role
• communicating with parents about their child’s emotional responses and behavior and extending support as needed
• providing support for siblings and peers

3. Provide a supportive relationship with children and family members characterized by warmth, empathy, respect and an understanding of developmental stages.

C. To Prepare Children and Families for Healthcare Experiences

Increase overall understanding of and comfort with surroundings and events by:

1. providing developmentally appropriate explanations to the child about the sequence, nature and reasons for procedures and routines.

2. facilitating support through medical events and/or invasive procedure

D. To Provide Essential Life Experiences

1. Provide play opportunities and other experiences which foster continued growth and development, which may prevent adverse reactions to healthcare encounters.

2. Support recognition of significant and familiar experiences, including meaningful holidays, birthdays, and other family observances.

3. Advocate for comprehensive school services in the hospital with qualified teaching personnel and classroom facilities.

4. Manage activities of community groups involved in interacting with children and their families.

E. To Create Opportunities Which Strengthen Self-Esteem and Independence

1. Ensure recognition of the child as a unique individual.

2. Encourage inclusion of children in decision making to a degree consistent with their level of development.

3. Foster responsibility for self and others.

4. Provide access to equipment and facilities that encourage maximum independence, minimize loss of competency and enhance the rehabilitative process.

5. Heighten feelings of competency by providing opportunities to be creative and successful at a variety of experiences.

6. Support ties to home, school and community.
F. To Communicate Effectively with Other Members of the Healthcare Team

1. Maintain sensitivity to team process, reflecting an awareness of roles and expertise of other health professionals.

2. Educate team members on the developmental needs of children.

3. Communicate observations, assessments, and recommendations for care in the form of daily verbal reports, multidisciplinary rounds and recording in the child’s health record.

4. Educate and advocate for therapeutic, safe and inviting spaces for children and families.

III. Standards for Personnel

A. Child Life Specialist

Certified child life specialist with minimal preparation at the bachelor’s degree level. This individual will have knowledge and experience with:

1. Individuals and groups of children of all ages

2. All forms of diversity

3. Family dynamics

4. Growth and development issues for all ages

5. Play and therapeutic interventions

6. Interpersonal communication

7. Developmental assessment

8. Children and family responses to illness and/or life changing events

9. Learning process

10. Group process

11. Behavior management

12. Interventions to support coping

13. Collaboration with other healthcare professionals

14. Basic understanding of medical terminology and disease process

15. Knowledge of research which supports child life practice

16. Supervisory skills
B. Child Life Assistant

Academic preparation at the associate degree or community college diploma level in a related field. This person would work only under the direct supervision of a certified child life specialist.

C. Child Life Leader/Administrator

Ideally this individual would be a certified child life specialist with academic preparation at the master’s degree level contributing to expertise in all of the areas listed under child life specialist. In addition, it is necessary for the leader/administrator to be competent in:

1. Establishing Child Life Service objectives
2. Interpreting objectives and needs to child life staff and to the administration
3. Selecting, mentoring, supervising and evaluating staff
4. Managing budget and organizing resources to provide most effective service
5. Providing educational resources regarding child life services to students, other staff and the community
6. Maintaining good communication internally and externally to the organization
7. Managing quality improvement programs
8. Ensuring ongoing professional development opportunities
9. Ensuring quality of child life practice

IV. Administration of Services

A. Child life services should be autonomous, have equal status with other services/discipline groups while collaborating directly with management. Basic child life services include coverage for days, evenings, weekends and holidays.

B. Child life services should have adequate staffing to meet assessed patient needs as outlined in the “Child Life Council’s Standards of Clinical Practice” and described in the Guidelines for the Development of Child Life Programs in Health Care Settings.

C. Stable funding for staff, developmentally appropriate materials, equipment and activities should be the responsibility of the healthcare organization. Adequate space should be allocated for child life services to ensure that patients will be provided with easily accessible safe, therapeutic, enriching and appropriately stimulating play and learning areas.

D. Child life personnel will provide training and supervision of volunteers, students and others participating in child life services.

E. Child life policies and procedures shall be consistent with those of the organization.
F. Child life personnel shall conduct a periodic assessment of the quality and appropriateness of child life services and provide for continuing staff education and development.

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