

Towards Person-Centred Paediatric Care: Insights into the Design, Impact, and Management of Family Rooms

01 Background

- Hospital stays are stressful for families, especially in intensive or long-term care.
- Hospitals often lack dedicated, supportive spaces for them.
- Family Rooms provide a non-clinical environment to rest, connect, and support care.
- Their integration into hospital workflows can improve care coordination and continuity.



02 Gaps & Research Questions

- Limited evidence on Family Rooms' role in care coordination and continuity
- Few scalable and replicable management models
- Lack of data on sustainability and integration in hospital systems
- Underexplored collaboration between hospitals and external actors

03 A Data Collection

Desk Research

Analysis of 22 Family Rooms across multiple countries (services, users, support models)

Field Research

04 Italian case studies

05 semi-structured interviews with hospital staff and coordinators

Focused on: **access procedures, staff collaboration, care integration, sustainability, and impact**

03 B Data Analysis

Thematic coding based on **Integrated Care framework**

Focus on two key dimensions:

- **Care Coordination**
- **Care Continuity**

Cross-cut by:

- **Impact**
- **Scalability & Sustainability**

04 Results

Care Coordination

Impact

The Family Rooms enhance care coordination by integrating into hospital routines and encouraging collaboration between staff and volunteers.

Scalability / Sustainability

- **Flexible management:** check-in handled by either hospital staff or Family Room personnel.
- **Effective across specialized units** (e.g., NICU).
- **Engagement initiatives** (e.g., tea days, staff lunches) build awareness and trust.
- **Cost-sharing model:**
 1. Hospital: utilities, linen service
 2. Family Room: renovations, staff, personal care items, towel cleaning

Care Coordination

Impact

The service supports continuity of care by aligning family presence with clinical pathways.

Scalability / Sustainability

- **Spaces adapt to needs** (e.g., day rooms for overnight stays).
- **Booking procedures shared with hospital staff**, based on clinical urgency.
- **Stay aligned** with hospitalization timelines
- **Collaboration with hospital-based associations** and international partners.