

Building Trust with Parents of Medically Fragile Infants

MacKay et al. (2026). *Journal of Pediatric Nursing*, 87, 381–391

Evidence-Based Strategies for Pediatric Nurses

STUDY SNAPSHOT

- Design** Qualitative Interpretive Description
- Participants** 18 parents of 15 medically fragile infants
- Setting** Pediatric inpatient units (non-ICU)
- Interviews** 15 semi-structured • 48–81 min each
- Analysis** Thematic analysis of parent perspectives

THE PARENT EXPERIENCE

Parents described their hospital journey as "excruciatingly difficult," marked by high anxiety, fear, roller-coaster emotions, helplessness during procedures, and constant worry about their infant's survival.

“ Trust is when you put your life into someone's hands... I have this relief in my head that if this person is standing in front of me, they can handle my infant in that situation.

WHAT BREAKS TRUST

Missing Core Elements

When nurses fail to demonstrate the key trust-building behaviors.

Medical Mistakes

Errors in care delivery — trust CAN be rebuilt through transparency and sincere apology.

Unit Transfers

Disruption of established nurse-parent relationships and care continuity.

POSITIVE OUTCOMES OF TRUST

For Parents	For Infants	For Nurses
· Reduced stress & anxiety	· Safe, nurturing environment	· Collaborative partnerships
· Increased caregiving confidence	· Buffered from toxic stress	· Reduced conflict
· Better coping mechanisms	· Better growth & development	· Enhanced job satisfaction
· Feeling heard & supported		

DAILY PRACTICE QUESTIONS

- How can I show this parent I genuinely care about their infant today?
- What can I teach this parent to better empower them in their infant's care?
- How can I actively support this parent's emotional well-being this shift?

Trust + Relationships = Collaborative Parent-Nurse Partnerships

The essential foundation for providing safe and nurturing care to Medically Fragile Infants

THE 10 CORE ELEMENTS THAT BUILD TRUST

- 1 Know the Infant**
Learn the baby's unique personality, needs, and preferences; go beyond the chart.
- 2 Empower Through Education**
Teach care skills; clearly explain procedures, medications, and the full care plan.
- 3 Experience & Expertise**
Demonstrate clinical competence; openly admit when you need to find an answer.
- 4 Attentive & Responsive**
Respond promptly to calls, anticipate needs, and remain physically and emotionally present.
- 5 A Caring Attitude**
Show genuine kindness, compassion, and empathy for both the infant and the whole family.
- 6 Involve Parents in Care**
Actively include parents in decisions and daily care; honor their expertise on their child.
- 7 Care for the Parent**
Check in on parent well-being, offer breaks, and genuinely listen to their concerns.
- 8 Communication**
Engage in open and honest communication, provide frequent updates; always keep parents fully informed.
- 9 Primary Nursing**
Maintain consistent nurse assignments when possible to build rapport and continuity.
- 10 Faith**
Acknowledge and respect the family's spiritual or religious beliefs as a source of strength.

QUICK TRUST-BUILDING ACTIONS

- ✓ Introduce yourself and your role clearly at every encounter.
- ✓ Explain what you are doing before and during every procedure.
- ✓ Include parents in care decisions and daily care activities.
- ✓ Ask the parent about the baby's personality, preferences, and routines.
- ✓ Listen actively without judgment; always follow through on promises.
- ✓ Check in on parent well-being, not just the infant.

REFLECTION QUESTIONS FOR YOUR PRACTICE

- Which of the 10 core elements do you use most effectively in your current practice?
- Which element is your greatest opportunity for growth — and what is one concrete step?
- What unit-level or system barriers make building trust with parents more difficult?
- How might your unit adopt or expand primary nursing to strengthen family relationships?

RELEVANT REFERENCES

- MacKay, L., Benzies, K., Barnard, C., & Raffin Bouchal, S. (2020b). Parental experiences caring for their hospitalized medically fragile infants: A description of grief, stress, and coping. *Canadian Journal of Nursing Research*. MacKay, L., - MacKay, L., Benzies, K., Raffin Bouchal, S., & Barnard, C. (2021). Parental and health care professionals' experiences caring for medically fragile infants on pediatric inpatient units. *Children's Health Care*, 53, 119–138.
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KEY TAKEAWAY: Trust isn't just nice to have — it is the essential foundation for quality family-centered care and positive patient and family outcomes.